

Job Address: \_\_\_\_\_ Permit #: \_\_\_\_\_  
Owners Name/Address: \_\_\_\_\_  
Owners Phone Number: \_\_\_\_\_

**Current Contractor of Record**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_

**New Contractor of Record**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_  
License Number: \_\_\_\_\_

This form must be signed by the Owner and the New Contractor of Record:

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

Personally know to me \_\_\_\_\_ OR produced  
\_\_\_\_\_ as identification.

Notary: \_\_\_\_\_

Seal:

\_\_\_\_\_  
Owners Signature

\_\_\_\_\_  
Date

Sworn to and subscribed before me this \_\_\_\_\_  
day of \_\_\_\_\_, 20\_\_\_\_.

Personally know to me \_\_\_\_\_ OR produced  
\_\_\_\_\_ as identification.

Notary: \_\_\_\_\_

Seal: