



CITY OF OKEECHOBEE
BUILDING DEPARTMENT
55 SE THIRD AVENUE
OKEECHOBEE, FL 34974
Tele: 863-763-9821 Fax: 863-763-1686

DATE _____ PERMIT # _____

OWNER'S NAME _____

TELEPHONE # _____ CELL # _____

PROJECT ADDRESS _____

ORIGINAL CONTRACTOR _____

LICENSE # _____

NEW CONTRACTOR _____

LICENSE # _____

REASON(S) FOR CHANGE OF CONTRACTOR _____

Please check one of the following:

- Attached release letter, signed & dated, from original contractor relinquishing all plans, documents, fees, if applicable, to the new contractor.
- The original contractor will not release any documents.

Signature of Owner _____

State of Florida
County of _____

Affirmed and subscribed before me this _____ day of _____, _____ by _____ who is personally known to me or who has produced _____ as identification.

Signature of Notary

Printed name of Notary

SEAL: