



PALM BEACH COUNTY BUILDING DIVISION

2300 N. Jog Road
West Palm Beach, Florida 33411
Telephone (561) 233-5100
Online Permitting Portal: <https://www.pbcgov.com/epzb>

CHANGE OR ADD CONTRACTOR/QUALIFIER FORM

Please Select: Contractor/Company Qualifier's Name Assign Contractor (from a To Be Determined Application)

Application / Permit Number _____

Address of Project: _____

Name of Contractor/Qualifier Being Released: _____ as of: _____

New Contractor/Qualifier - Complete this section:

Name of New Contractor/Qualifier Assuming Responsibility: _____

Address of Assuming Party _____

Qualifiers Name: _____ License Number: _____

Signature of Qualifier: _____ Date: _____

I am retaining Sub-Contractors I am not retaining Sub-Contractors

(Please identify each sub-contractor retained) _____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this ___ day of _____, 20__ by _____
(Name of person acknowledging)

is Personally known OR Produced Identification Type of Identification _____

(Signature of Notary Public) _____
(Print, type or stamp Commissioned Name of Notary Public)

Owner, Tenant Lessee or Agent – Complete this section:

I, the Owner, Tenant, Lessee or Agent, acknowledge that the previous contractor/qualifier was removed from the permit number listed above and, I, the Owner, Tenant Lessee, or Agent, shall assume full responsibility for the work completed by the previous contractor/qualifier and hold Palm Beach County, its agents, employees and elected officers harmless and without liability for the removal of my previous contractor and any work performed before, during or after such removal. **Any issued sub-permits must be re-applied for in order to move forward unless indicated above.**

Owner's signature: _____ Date: _____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this ___ day of _____, 20__ by _____
(Name of person acknowledging)

is Personally known OR Produced Identification Type of Identification _____

(Signature of Notary Public) _____
(Print, type or stamp Commissioned Name of Notary Public)