Citrus County Building Division
3600 W Sovereign Path, Suite 111
Lecanto, FL 34461
P: 352-527-5310 E: permit@citrusbocc.com

Permit No. _____
Date: _____
(Fee to be paid at time of application)

Change of Contractor Form

Property Information:
Site Address: _____
Number Street City Zip

Owner's Name: _____ Phone: _____

Has work been started? If so, Describe work done to current date:
_____

Change to: Contractor / Owner-Builder Information:
Qualifier's Name: _____ License No: _____

Company Name: _____
Company Address:
_____Phone:_____
Number Street City Zip

* If applying as owner-builder, a completed owner-builder affidavit is required with this application.

***** NOTICE: In addition to the requirements of the original permit, there may be additional restrictions applicable to this property that may be found in the public records of this county or that may be required from other governmental entities such as water management district, state agencies or federal agencies.**

APPLICANT'S AFFIDAVIT:
Application is hereby made to assume total responsibility for all work that has been performed to date on this project as is indicated in the original building permit application package and as may have been amended. I acknowledge and accept full responsibility for compliance with all applicable codes, regulations and ordinances as well as the payment of all legally constituted fees which remain unpaid regarding this development application, including but not limited to ALL REVIEW FEES, PERMIT FEES, IMPACT FEES AND RESERVATION FEES.

Contractor / Owner – Builder Signature: _____ Date: _____

State of Florida
County of Citrus

Subscribed and sworn to before me this _____day of _____ , 20____ ,by _____ who is personally known to me or who has produced _____ as identification, and who did/did not take an oath.

Notary Public Signature: _____