



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

1801 27th Street, Vero Beach, FL 32960 772 226-1260

CHANGE OF CONTRACTOR NOTICE

INSTRUCTIONS

- 1. OWNER MUST COMPLETE, SIGN AND HAVE THE OWNER'S NOTICE NOTARIZED.**
- 2. FORMER/ORIGINAL CONTRACTOR MUST COMPLETE, SIGN AND HAVE THE FORMER CONTRACTOR'S NOTICE NOTARIZED.**
- 3. NEW CONTRACTOR OF RECORD MUST COMPLETE, SIGN AND HAVE THE NEW CONTRACTOR'S NOTICE NOTARIZED.**
- 4. ALL THREE FORMS MUST BE COMPLETED AND SUBMITTED AT THE SAME TIME. NO INDIVIDUAL FORMS WILL BE ACCEPTED.**
- 5. A \$50.00 CHANGE OF CONTRACTOR FEE MUST BE SUBMITTED WITH ALL THREE FORMS. IF CHANGING ANY SUBCONTRACTOR CHANGES ARE DESIRED, AN ADDITIONAL FEE OF \$20.00 EACH IS REQUIRED.**

*A NOTARIZED LETTER WITH ALL THREE SIGNATURES AND PRINTED NAMES (BY THE SIGNEES) MAY SUBSTITUTE FOR THESE FORMS IN SOME INSTANCES.

Notes:

1. In the case where there is an issue with the Former/Original contractor completing and signing the required form the following must be done.

A certified letter to the Former/Original contractor providing notice that the owner does not want to use them any longer or is requesting a change of contractor must be sent to the contractor, letter to include the required form that the owner needs to sign. The certified letter must be sent return receipt requested. If the contractor refuses the letter/service the green card must be returned indicating the contractor's refusal along with the original letter and envelope. This will be considered service and formal refusal and Building will then move forward with changing the contractor without the form for the Former/Original contractor.

If and when the contractor accepts the certified letter a period of 10 calendar days is provided from date of contractor's receipt of letter to respond. This 10 day period provides the contractor who is the permit applicant time to respond and/or review the contract with the owner. If the contractor does not respond in that 10 day period Building considers that no response the same as a no objection and Building will then move forward with changing the contractor without the Former/Original contractor's signature.

2. The Former/Original contractor may choose to cancel the permit which as the applicant and permit holder has the right to do so. This will require the owner (if allowed to be owner builder) or new contractor to obtain a new permit in order to proceed with completion of the unfinished project.



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CHANGE OF CONTRACTOR NOTICE
(Former/Original Contractor Form)

I _____, the qualifier for _____
(Contractor name) (Contractor Company)

am no longer the Contractor of record for Permit # _____ located

at _____.
(Address)

(Contractor signature)

(Date)

(Name Printed)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this _____ day of _____
20____ by _____ who:

_____ Is personally known by me- OR-
_____ Produced as identification: _____
Type and number of identification

Notary Public: State of Florida



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CHANGE OF CONTRACTOR NOTICE

(New Contractor Form)

I _____, the qualifier for _____,
(Contractor name) (Contractor Company)

whose comp card/license # is _____, am the new Contractor of
record for Permit # _____ located at _____.
(Address)

(Contractor signature)

(Date)

(Name Printed)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this _____ day of _____ 20____
by _____ who:

_____ Is personally known by me- OR-
_____ Produced as identification: _____
Type and number of identification

Notary Public: State of Florida



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CHANGE OF CONTRACTOR NOTICE
(Owner Form)

I _____, property owner of _____
(Owner name) (Property address)

Wish to change contractor's for permit # _____

From _____, the qualifier for _____
(Contractor name) (Contractor Company)

To the new Contractor of record _____ who is
(Contractor name)

The qualifier for _____
(Contractor's Company)

(Owner signature) (Date)

(Owner Printed Name)

STATE OF FLORIDA, COUNTY OF INDIAN RIVER:

The foregoing instrument was acknowledged before me this _____ day of _____ 20____
by _____ who:

_____ Is personally known by me- OR-
_____ Produced as identification: _____
Type and number of identification

Notary Public: State of Florida