



## Permit Cancellation Request

|                   |                       |
|-------------------|-----------------------|
| Date              | Permit/Process Number |
| Contractor's Name | Contact Name          |
| Job Address       | Apartment/Unit Number |
| Telephone Number  | E-Mail Address        |

A Permit Cancellation Request may be submitted if no work has taken place. If work has taken place, a Change of Contractor must be submitted.

**WARNING: If the work has taken place and the permit is cancelled, you will be in violation of section 109.4 of the Florida Building Code, *failure to obtain a permit* and will be subject to a penalty of 100 percent of the usual permit fee in addition to the required permit fees.**

Reason for cancelling Permit/Process Number:

**Owner**

Print Owner's Name \_\_\_\_\_ Owner's Signature \_\_\_\_\_

STATE OF FLORIDA , COUNTY OF MIAMI-DADE

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

- Personally
- Produced Identification – Type of Identification \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public (SEAL)

**Contractor**

Print Qualifier's Name \_\_\_\_\_ Qualifier's Signature \_\_\_\_\_

STATE OF FLORIDA , COUNTY OF MIAMI-DADE

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

- Personally
- Produced Identification – Type of Identification \_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public (SEAL)

**Office Use Only**

|                  |   |
|------------------|---|
| Date of Receipt: | Permit Cancelled<br><input type="checkbox"/> Yes<br><input type="checkbox"/> No |
|------------------|---|