



PENDER COUNTY PLANNING AND COMMUNITY DEVELOPMENT

CHANGE OF CONTRACTOR

DATE: _____

GENERAL CONTRACTOR'S NAME: _____ BUSINESS NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE # _____ FAX # _____ E-MAIL ADDRESS: _____

PERMIT # _____ TYPE OF PERMIT ISSUED: _____

PROJECT LOCATION: _____

SIGNATURE: _____ Date: _____

HAS WORK BEGUN ON THE PROJECT? YES / NO

OWNER'S NAME: _____ PHONE # _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE # _____ FAX # _____ E-MAIL ADDRESS: _____

REASON FOR REMOVING CONTRACTOR: _____

OWNER'S SIGNATURE: _____ DATE: _____

NEW CONTRACTOR'S INFORMATION

CONTRACTOR'S NAME: _____ BUSINESS NAME: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE # _____ FAX # _____ E-MAIL ADDRESS: _____

LICENSE # _____

WILL YOU BE ACCEPTING RESPONSIBILITY FOR THIS JOB? YES / NO

WILL YOU BE RESPONSIBLE FOR PERMIT FEES ASSOCIATED WITH THIS JOB? YES / NO

CONTRACTOR'S SIGNATURE: _____ DATE: _____

(THERE WILL BE AN ADMINISTRATIVE FEE OF \$25.00)

(For Office Use Only)

Staff's Signature/Title: _____ Date _____