



## Miramar | Building Division

Community & Economic Development Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

## Change of Contractor

**The intent of the application for change of contractor is replaced the previous contractor on record and transfer the responsibility of the work to a new contractor, under Florida Building Code 105.6.4**

### Who Can Apply (A or B)

**A. Licensed Contractors for Residential & Commercial:** Permit can be issued to **Licensed Contractors** properly registered in the Community Development - Building Division. Contractors shall provide all required applications properly signed and notarized. **Also, Contract signed by both parties (Contractor & Homeowner) shall be provided indicating contract value per every applicable discipline.**

**B. Owner/Builder for Residential Only. READ CAREFULLY.** Permit can be issued to owner/builder if his/her address on picture ID (Driver License, I.D. Card) matches the location/address for which he/she intends to apply for permit, also proof of ownership (Warranty Died, Broward Tax Statement) shall match the name and address on the picture ID.

**EXCEPTION:**

- **For Air Conditioning (HVAC), a Mechanical Licensed Contractor must apply for permit.**
- **If a contractor is hired, then the contractor must pull the permit.**

### Required Documents

- All required applications based on the scope of work (Structural, Plumbing, Electrical, Mechanical-A/C, Roofing, etc.). For owner-builder, read carefully the note B shown above. **Based on the scope of work, you may need to make additional copies of the Broward Standard Application Form.**
- Hold Harmless Letter.
- Letter of Responsibility.
- Job contract: Completed & signed by both parties (Contractor & Homeowner).
- Affidavit of Awareness of Homeowner's Association (Included in this package).
- Owner –Builder Disclosure Statement, proof of ownership and picture ID matching job address (For Homeowner applicants only).
- For Signed & Sealed plans previously used for the original contractor, an authorization letter from the Designer of Record (Architect/Professional Engineer) must be submitted along with other required documents. Because of the Copyright Laws, this letter shall state the permission to new contractor to work using the designed plans by the Professional of Record.
- Proof to the Building Official that the contractor on record for the subject permit has been notified about the intent of change of contractor. This notification can be one the following:
  - **Certified Mail Letter and corresponding receipt mailed to previous contractor on record.**
  - **Notarized letter from previous contractor on record attesting he/she is aware of the change of contractor.**

**Attention Applicant:** As per Florida Statutes 713.13, a Recorded Notice of Commencement is required when construction, renovation, alterations values exceed \$2,500. This subsection does not apply to a direct contract to repair or replace an existing heating or air-conditioning system in an amount less than \$7,500. Construction cost (Including labor & material) will be based on contract signed by both parties (owner & contractor) and/or as determined by the Building Official (FBC 109.3). **Notice of commencement can be recorded at the office of Broward County Government Center / Records Division 115 S. Andrews Ave. Fort Lauderdale, FL 33301.**



# Miramar | Building Division

Community & Economic Development Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

## Hold Harmless Letter

This Hold Harmless Letter is required when the owner request to change the previous contractor on record and transfer the responsibility of the work on his/her property to another contractor. Based on the Florida Building Code, see below the regulations:

1. Where a prime contractor is the permit holder the owner shall file such hold-harmless letter.
2. Where a sub-contractor or specialty contractor is the permit holder the owner and prime contractor shall both file such hold-harmless letters.

**FBC 105.6.4** Upon request of the owner and/or permit holder and on investigation by the Building Official to determine that the work has been abandoned or that the contractor is unable or unwilling to complete the contract a second permit may be issued where there is a change of contractor without the initial permit being revoked or suspended.

**FBC 105.6.4.1** The foregoing will be permitted only when the following stated persons have filed with the Building Official a letter stating the reason for a second permit being required and holding the Building Official harmless from legal involvement. All interested parties shall be notified before action is taken.

To: **Community & Economic Development Dept. | Building Division | City of Miramar**  
**Attn. Building Official**

Date: \_\_\_\_\_

I no longer authorize the previous permit holder \_\_\_\_\_  
to proceed with the work covered under the Permit No. \_\_\_\_\_

I hereby authorize the following contractor to complete the work under this permit.

Contractor Company: \_\_\_\_\_

Qualifier Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Property Address: \_\_\_\_\_ Miramar, FL. Zip \_\_\_\_\_

Folio #: \_\_\_\_\_

This request for change contractor is for the following reason:

\_\_\_\_\_  
\_\_\_\_\_

I agree to hold the Building Official and the City of Miramar harmless and relieve them from any responsibility and/or liability for any legal action or damage resulting from the change of contractor and the cancellation of the existing permit.

\_\_\_\_\_  
*Printed Name (Owner)*

\_\_\_\_\_  
*Signature (Owner)*

\_\_\_\_\_  
*Company Name/Prime Contractor*

\_\_\_\_\_  
*Signature (Qualifier/Prime Contractor)*

State of Florida, Sworn and subscribe before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.  
ID produced  \_\_\_\_\_ Personally Know

\_\_\_\_\_  
*Notary Public - State of Florida*



**BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

Select Trade:  Building  Electrical  Plumbing  Mechanical  Other \_\_\_\_\_

Application Number: \_\_\_\_\_ Application Date: \_\_\_\_\_

<b>1</b>	Job Address: _____	Unit: _____	City: _____
	Tax Folio No.: _____	Flood Zone: _____	BFE: _____
	Building Use: _____	Construction Type: _____	Occupancy Group: _____
	Present Use: _____	Proposed Used: _____	
	Description of Work:		
	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision <input type="checkbox"/> Other: _____		
Legal Description: _____			<input type="checkbox"/> Attachment

<b>2</b>	Property Owner: _____	Phone: _____	Email: _____
	Owner's Address: _____	City: _____	State: _____ Zip: _____

<b>3</b>	Contracting Co.: _____	Phone: _____	Email: _____
	Company Address: _____	City: _____	State: _____ Zip: _____
	Qualifier's Name: _____	Owner-Builder: <input type="checkbox"/>	License Number: _____

<b>4</b>	Architect/Engineer's Name: _____	Phone: _____	Email: _____
	Architect/Engineer's Address: _____	City: _____	State: _____ Zip: _____
	Bonding Company: _____		
	Bonding Company Address: _____	City: _____	State: _____ Zip: _____
	Fee Simple Titleholder's name (if other than owner): _____		
	Fee Simple Titleholder's Address (If other than owner): _____	City: _____	State: _____ Zip: _____
	Mortgage Lender's Name: _____		
	Mortgage Lender's Address: _____	City: _____	State: _____ Zip: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

X \_\_\_\_\_  
Signature of Property Owner or Agent

X \_\_\_\_\_  
Signature of Qualifier

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_

(Type / Print Property Owner or Agent Name)

(Type / Print Qualifier's Name)

\_\_\_\_\_  
NOTARY'S SIGNATURE as to Owner or Agent's Signature

\_\_\_\_\_  
NOTARY'S SIGNATURE as to Qualifier's Signature

Notary Name \_\_\_\_\_  
(Print, Type or Stamp Notary's Name)

Notary Name \_\_\_\_\_  
(Print, Type or Stamp Notary's Name)

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

Code in Effect: \_\_\_\_\_

APPROVED BY: \_\_\_\_\_ Permit Officer Issue Date: \_\_\_\_\_

**A jurisdiction may use a supplemental page requesting additional information and citing other conditions, please inquire.**

Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.



## Miramar | Building Division

Community & Economic Development Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

# Affidavit of Awareness of Homeowner's Association Regulations

The following "Affidavit" is required as per City's ordinance. This is a mandatory affidavit which is required even if your property is not located in a Homeowner's Association.

### ATTENTION APPLICANT. READ CAREFULLY

- For homeowner/Builder applicants, this affidavit can be notarized by Permit Clerk at the Building Division. Homeowner should appear in person with required picture I.D. (i.e. Driver License) and proof of ownership (i.e. Recorded Warranty, County Tax Statement). The physical address on I.D. shall match the address on the proof of ownership (i.e. Recorded Warranty Deed).
- For Licensed Contractor applicants, this affidavit can be notarized outside the Building Division by any Notary Public.

**Homeowner or Condominium Association Affidavit requirement. Miramar - City Code Sec. 22-29.(c)(1)** As part of the application process for a building permit in accordance with this chapter and with Section 713.20 of the Land Development Code, each applicant shall sign an affidavit (the "affidavit of awareness") indicating that the applicant is aware that, if the subject property is located in a Homeowners' Association or Condominium Association, as defined in this section, the applicant's property may be subject to additional regulations despite the issuance of a building permit by the city.

This serves to notify such homeowner that the issuance of a Building, Landscaping, or other permits by the City of Miramar, Florida does not exempt he/she from any and all other regulations imposed by the Homeowner's Association (HOA) in which his/her property is located. Be aware that despite the issuance of a building permit by the city, the applicant's property may result in additional regulations or denial to perform the work in your property located at HOA community.

Read and Initial to the left of the applicable statement

\_\_\_\_\_ I acknowledge that **I am the owner of property** located in the following Homeowner's Association:

\_\_\_\_\_  
Print Name of Homeowner's Association

\_\_\_\_\_ I acknowledge that my property is not located in a Homeowners' Association.

Name: \_\_\_\_\_  
Homeowner - Print Name

Job Address: \_\_\_\_\_

Miramar, Florida Zip Code : \_\_\_\_\_

Signature: \_\_\_\_\_  
Homeowner - Signature

STATE OF FLORIDA. Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public



## Miramar | Building Division

Community & Economic Development Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

# Owner/Builder Disclosure Statement

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ Miramar, FL, Zip Code: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

I am submitting an application for a Building Permit as an Owner-Builder in accordance with the exemption set forth in Florida Statute 489.103. Florida law requires construction to be done by a licensed contractor. It's a requirement by law you read and sign the following statements, and hence you can understand your responsibilities as an owner-builder. By signing the following statements, you attest that:

### DISCLOSURE STATEMENT *(Read and Initial to the left of each statement)*

- 1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.
- 2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.
- 3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.
- 4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.
- 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
- 6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.
- 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.
- 8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.
- 9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.



# Miramar | Building Division

Community & Economic Development Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

## Owner/Builder Disclosure Statement

(Continuation)

- 10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at (telephone number) or (Internet website address) for more information about licensed contractors.
- 11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the address listed above.
- 12. I agree to notify (issuer of disclosure statements) immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

I have read the foregoing instructions and I am aware of my responsibilities.

\_\_\_\_\_  
*Owner Signature*

\_\_\_\_\_  
*Date Signed*

STATE OF FLORIDA, COUNTY OF BROWARD. Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

*F.S 489.103. 3(c). If any person violates the requirements of this subsection, the local permitting agency shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.*

PERMIT NUMBER:

**NOTICE OF COMMENCEMENT**

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes the following information is provided in the Notice of Commencement.

1. **DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** \_\_\_\_\_

**SUBDIVISION** \_\_\_\_\_ **BLOCK** \_\_\_\_\_ **TRACT** \_\_\_\_\_ **LOT** \_\_\_\_\_ **BLDG** \_\_\_\_\_ **UNIT** \_\_\_\_\_

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**

3. **OWNER INFORMATION:** a. Name \_\_\_\_\_

b. Address \_\_\_\_\_ c. Interest in property \_\_\_\_\_

d. Name and address of fee simple titleholder (if other than Owner) \_\_\_\_\_

4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**

6. **LENDER'S NAME, ADDRESS AND PHONE NUMBER:**

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

**NAME, ADDRESS AND PHONE NUMBER:**

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes:

**NAME, ADDRESS AND PHONE NUMBER:**

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_\_\_

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

\_\_\_\_\_  
**Signature of Owner or  
Owner's Authorized Officer/Director/Partner/Manager**

\_\_\_\_\_  
**Print Name and Provide Signatory's Title/Office**

State of Florida  
County of Broward

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_, as \_\_\_\_\_  
(name of person) (type of authority, ...e.g. officer, trustee, attorney in fact)

For \_\_\_\_\_  
(name of party on behalf of whom instrument was executed)

\_\_\_\_\_ Personally known or \_\_\_\_\_ produced the following type of identification: \_\_\_\_\_

Notary

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

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

**Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:**

By \_\_\_\_\_ By \_\_\_\_\_