NOTICE TO CHANGE CONTRACTOR

To:	Fayette County	
From:	(Applicant)	/ Phone
Ref:	Permit #	/ Address:
As of t	coday, (date)	, the contractor currently on record
(name	of current contractor)	
	onger the contractor for thing as the new contractor	ne above permit. Please change your records to reflect the of record:
New C	Contractor Name:	
Contra	actor Contact Name and P	hone:
		's state license(s) and Authorized Agent Form as applicable)
Will th		ging sub-contractors? (yes) (no) new subcontractor affidavits with this form)
Proper	ty Owner (Printed or Typ	ed):
Proper	ty Owner (Signature):	
Contra	actor or Authorized Agent	(Printed or Typed):
		(Signature):
201144	0	(~-8
For of	fice use only:	
Receiv	ved by:	
New P	ermit Board Printed:	List of Inspections Provided: