CORAL SPRINGS
EVERYTHING UNDER THE SUN

CANCEL A PERMIT

(Only the owner or qualifier may request a permit to be cancelled.)

This form may be submitted to the City of Coral Springs Building Division in Person, Via Fax to (954) 344-5948 or Emailed to
buildingpermits@coralsprings.org

This is a request to cancel the following permit:

Permit Number: _____ Job Address: _____

CURRENT CONTRACTOR INFORMATION	OWNER'S INFORMATION
Contractor's Name: _____	Owner's Name: _____
Phone No: _____	Phone No: _____
Address: _____	Address: _____
City & Zip: _____	City & Zip: _____

Reason for CANCELLING PERMIT: (Please check only one)

- ☐ Work was not started. (A job check may be scheduled.)
- ☐ Work was completed under Permit # _____.
- ☐ Property has been demolished under Permit # _____.
- ☐ Contractor named in the Permit did not do the work. Please remove my License# from the permit.

Other: (please specify) _____

I/We certify that the above information is a true and accurate representation of the facts. Further, I/We agree to hold the City of Coral Springs, its agent and authorized personnel, harmless and relieve them from any responsibility for damages or expenses, including but not limited to attorney's fees resulting from the cancellation of this permit or the issuance of a new permit. It is your responsibility to notify all interested parties of this Cancel Letter.

_____ or _____
Contractor's Signature — Signature of Property Owner or Agent

State of Florida – County of Broward

Before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared _____, the Owner or Agent of the above property or the contractor of record who is sworn and subscribed to before me on this _____ day of _____, 20_____, who is personally known to me or who produced _____ as identification.

_____
Notary Signature _____
(Print, Type & Stamp Commissioned Name of Notary Public)

Building Division Office/Field verification result: _____ Date: _____