CITY OF GAINESVILLE
BUILDING INSPECTIONS DEPARTMENT
311 HENRY WARD WAY (P. O. BOX 2496)
GAINESVILLE, GEORGIA 30503
PHONE: (770)531-6570 FAX: (678)989-3397
E-mail: dbuggle@gainesville.org
Website: www.gainesville.org

Change of Contractor Letter

Name: _____ Phone Number: _____

(Check One)

☐ Owner ☐ General Contractor (Company Name): _____

Job Address: _____

To the City of Gainesville:

I wish to change my Contractor for: Please check the appropriate box below

☐ Building ☐ Mechanical/HVAC ☐ Electrical ☐ Plumbing

I am hereby discharging: _____
(Contractor's Name)

_____
(Company Name)

from My Project as of _____ for the following reason(s):
(Date)

_____

_____

Permit Number(s): _____

My New Contractor is: _____
(Contractor's Name) ***A copy of the New Contractor's State and Business license must be attached.***

_____
(Company Name)

Subscribed and sworn before me this _____day of
_____ 20_____.

_____ _____

Signature (Owner or General Contractor) Signature of Notary Public (Seal)