



Public Works and Environmental Services Department

BUILDING CODE DIVISION | BUILDING PERMITTING

2307 West Broward Boulevard, Suite #300 • Fort Lauderdale, Florida 33312 • 954-765-4400 • Broward.org/Building

CONTRACTOR REQUEST TO CANCEL A PERMIT

If a Contractor wants to cancel a permit, proof shall be submitted to the Building Official that the owner of record for the permit has been notified. Proof shall be either a copy of a certified registered letter and return receipt (please see below example) received by the owner, or by a notarized letter from the owner stating that he/she is aware of the cancellation of the permit and has no objection to the request. In addition, the Contractor will send the Building Official a letter stating that the Building Official is held harmless from any legal involvement. Upon receipt of these documents, the existing permit will be cancelled after a field inspection has been completed.

If a Sub-Contractor wants to cancel a permit, the same procedures apply, with the exception that the Sub-Contractor must show proof to the Building Official that both the Contractor and the Owner of Record have been notified and have no objections. The Sub-Contractor will also send a letter to the Building Official stating that the Building Official is held harmless from any legal involvement.

Example of Proof of Service (Return Receipt):



Certified Mail Receipt | USPS.com
store.usps.com



Stamps.com
stamps.com

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete boxes 1, 2, and 3. Also complete box 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the envelope, or on the back if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from box 1? ☐ Yes ☒ No If YES, enter delivery address below: _____ E. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Signature ☐ Insured Mail ☐ S.O.D. ☐ Yes F. Restricted Delivery? (check box) ☐ Yes ☒ No	
1. Article Addressed to: MP			
2. Article Number (Transfer from service label) # from certified mail slip PS Form 3811, February 2004			

(Form is on reverse side)

CANCELLATION OF PERMIT BY CONTRACTOR

Date: _____

Permit # _____

Permit Holder:

Name: _____

Address: _____ City: _____ State: _____ Zip _____

Phone # _____ Cell # _____

Reason(s) for Cancellation of Permit (Must include Property Address):

Signature of Permit Holder _____ Date: _____

Sworn to (or affirmed) and subscribed before me by means of

☐ physical presence or ☐ online notarization, this _____ day of _____, _____ (year),

by _____ (name of person making statement)