

1900 Hotel Plaza Blvd., Lake Buena Vista, FL 32830 + (407) 828-2034 + (407) 828-4466/IVR + (407) 828-2416/Fax + RCIDPermits@rcid.org + www.rcid.org

## **CHANGE OF CONTRACTOR / QUALIFIER**

CHANGE FORM	
<ul> <li>In the event that a new contractor/qualifier takes over an existing construction project for work done within the Reedy Creek Improvement District, the following must be provided, in addition to this completed form:</li> <li>New Permit Application form, signed and notarized by the contractor and owner.</li> <li>New recorded county-stamped copy of a Notice of Commencement, if the valuation of the work is over \$2,500.</li> <li>Fully executed contract/purchase order/letter of intent (with contract breakdown, if the contract includes scope permitted by sub-contractors).</li> <li>Change of Contractor fee as stated in the current Fee Schedule. Note: Additional permit fees may apply if there is a change of scope from the original approved plan review. Also, if the permit is Expired, the permit renewal fee equal to the original fee or the Change of Contractor fee (whichever is greater) shall apply.</li> <li>Authorized agent or power of attorney of the contractor/licensed professional must email this form and all of the above to: <u>RCIDPermits@rcid.org</u>.</li> <li>Additional items that may apply include:</li> <li>An inspection scheduled and conducted to determine end of contract work and results documented, for previously commenced work.</li> <li>Any change in original scope of permitted work will require a new permit application amendment with accompanying fees.</li> </ul>	
The current permit number will be maintained for the new contractor and the permit will need to be re-issued.	
NEW CONTRACTOR/QUALIFIER INFORMATION	
Project Name:	Permit #:
Project Location:	
Owner's Name:	Phone:
	y: State: Zip:
Current Contractor/Qualifier:	Phone:
	y: State: Zip:
Email:	
Address: Cit	y: State: Zip: New License #:
NOTARY	
Signature of Owner or Agent	Signature of New Contractor/Qualifier
Print Name State of Florida, County of	Print Name State of Florida, County of
Sworn to (or affirmed) and subscribed before me by means of  Physical Presence or  Remote Online Notarization	Sworn to (or affirmed) and subscribed before me by means of  Physical Presence or Remote Online Notarization
Thisday of 20	Thisday of 20
Personally Known	
Produced Identification     Type of Identification	Produced Identification     Type of Identification
Remote Online Notarization Notarized ID: Access PIN:	Remote Online Notarization Notarized ID: Access PIN:
Notary to Owner:	Notary to Contractor:
Notary Stamp Here	Notary Stamp Here

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