

**City of North Miami
Building & Zoning Department**

CANCELLATION OF PERMIT

This is a request for a cancellation of the following permit:

Permit No.: _____ Job Address: _____

Owner's Name: _____ Owner's Address: _____

Owner's Phone No.: _____ _____

CONTRACTOR'S INFORMATION:

Contractor's Name: _____ Contractor's Address: _____

License No.: _____ _____

Contractor's Phone: _____ _____

REASON FOR CANCELLATION: No work performed under this permit

I/we certify that the above statements are true and represent an accurate representation of the facts. Further, I/we agree to hold the City of North Miami, it's agents and authorized personnel, harmless, and relieve them from any responsibility for damages, costs or expenses, including but not limited to attorney's fees, resulting from the cancellation of the subject permit or the issuance of a new permit.

**STATE OF FLORIDA
COUNTY OF MIAMI-DADE**

Before me, an officer duly authorized to administer oaths and take acknowledgements, personally appeared _____, owner/contractor of the above mentioned property who is sworn to and subscribed to before me this _____ day of _____ 200__ and who is personally known to me or who has produced _____ as identification.

Owner's Signature

or

Contractor's signature

Notary Public-State of Florida

My commission expires:

Inspector: _____ Building Official: _____