PERMIT CANCELLATION PROCEDURES

Permit applications and issued permits may only be cancelled if no work or installation has commenced. If work or installation has commenced, the job must come to completion and receive an approved final inspection. The contractors of issued permits, where the work has commenced, may only be changed through a Change of Contractor form.

The cancellation of permit by the master permit holder (contractor) requires the completion of the Permit Cancellation Request form and signatures from the qualifier of the master permit holder (contractor) and the property owner. The cancellation of permit by the sub-contractor requires the completion of the “Permit Cancellation Request” form and signatures from the qualifier of the master permit holder (contractor), qualifier of the sub-contractor, and the property owner. The cancellation of a permit for a sub-contractor may require the submission of revised plans which remove the cancelled work. The cancellation of an owner/builder permit requires the completion of the “Permit Cancellation Request” form and signature from the property owner.

The Permit Cancellation Request, when submitted, will be sent for inspection of the job address to ensure work or installation has not commenced. Entrance to the job may be required and shall be provided to the inspector for cancellation inspection. Following the inspection of the job address, the inspector will provide a determination of the permit cancellation inspection.

The permit application or issued permit may then be cancelled pursuant to the determination by the inspector. Following the determination, correspondence will be sent notifying all signing parties whether the Permit Cancellation Request was approved or denied. The City’s Building Official reserves the right to make the final determination of the Permit Cancellation Request.
PERMIT CANCELLATION REQUEST

Date: _________________________             Permit #: _____________________________

Description of Work: __________________________________________________________________

Job Address: ____________________________________ Job Phone #: _________________________

Property Owner Name: ________________________________________________________________

Property Owner Address: _______________________________________________________________

Property Owner Phone #: __________________________ Fax #: _______________________________

Master Contractor Name: ________________________________________________________________

Qualifier Name of Master Contractor: _____________________________________________________

Master Contractor Address: _____________________________________________________________

Master Contractor Phone #: ________________________ Fax #: ______________________________

Sub-Contractor Name: _________________________________________________________________

Qualifier Name of Sub-Contractor: _______________________________________________________

Sub-Contractor Address: _______________________________________________________________

Sub-Contractor Phone #: ___________________________ Fax #: ______________________________

Reason(s) for Cancellation of Permit: ___________________________________________________

____________________________________________________________________________________

I certify that no work or installation has commenced. I agree to hold the City of Oakland Park
harmless and relieve it from any responsibility or liability for any legal action or damage resulting
from the cancellation of the permit. I am aware of, acknowledging, and have no objection to the
cancellation of the permit.

Signatures:

________________________  ________________________  ________________________
Owner                      Qualifier of Master Contractor    Qualifier of Sub-Contractor

Date:____________________  Date:____________________  Date:____________________

________________________  ________________________  ________________________
Notary as to above Owner   Notary as to above Qualifier   Notary as to above Qualifier

________________________  ________________________  ________________________
Notary Seal              Notary Seal                   Notary Seal

*For the purposes of this form and the CD-Plus Permitting Database System the term “Void(ed)” is synonymous with “Cancellation (Cancelled).”
PERMIT CANCELLATION INSPECTION

Permit Cancellation Inspector: ________________________________ Initials: __________

Discipline: __________________________________________________________________________

Date of Cancellation Inspection: _________________________________________________________

Please Circle:

APPROVED TO BE CANCELLED   DENIED TO BE CANCELLED

Cancellation Inspection Notes: __________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________

PERMIT CANCELLATION CONFIRMATION / CANCELLATION DENIAL

Cancellation Confirmations / Cancellation Denials Sent
Please check:

_____ Property Owner  _____ Master Contractor  _____ Sub-Contractor

Permit Cancellation Date: _______________  Permit Technician Initials: ___________________

Cancellation Confirmation/ Denial Notes: _________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________
___________________________________________________________________________________