



## **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)."*



*Below to be completed by City of Oakland Park*

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**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: \_\_\_\_\_

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**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: \_\_\_\_\_

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