



Town of Forest City

Inspections and Zoning Department
128 N Powell St, PO Box 728
Forest City, North Carolina 28043
fcbuilding@townofforestcity.com

Contractor/Subcontractor Change Form

This form is used to advise the Town of Forest City Code Enforcement Department that the original contractor listed on the permit referenced below has been replaced, and to reflect that the permit be amended to reflect this change. This is also used to advise the City that the new contractor, who has signed below, agrees to assume all responsibility for any portion of the project that may have been installed by the original contractor.

INSTRUCTIONS: Please complete one form per permit, per contractor, per permit. Forms are processed within two business days of receipt. This form can be submitted via email to FCBuilding@TownofForestCity.com or via e-fax at 828-245-6143.

GENERAL INFORMATION			
Project Address:			
Requested By:			Date:
Address:			
City:	State:	Zip Code:	Phone #:

PERMIT NUMBERS		
NOTE: Provide only the # for the permit(s) associated with a contractor change.		
Building #:	Electrical #:	Plumbing #:
Mechanical #:	Fire Sprinkler#:	Zoning #:
Other (specify):		
Name of Original Contractor:		
Name of New Contractor:		State Contractor License #:
Address:		
City:	State:	Zip Code:
License Holder Name (PRINT):		Title:
License Holder Signature:		

Explanation for change in contractor:

The last Inspection for clarification of definitive distinction between contractors:

OFFICE USE ONLY
The request to amend the above referenced permit was approved. Completion of this form constitutes amendment of the permit.
Approved By: _____ Date: _____