



Application # _____

Change of Contractor Hold Harmless Agreement

EXISTING PERMIT NUMBER # _____ PERMIT TYPE _____

JOB ADDRESS _____ CITY _____ ZIP _____

OWNER NAME _____

NAME OF ORIGINAL CONTRACTOR _____

NAME OF NEW CONTRACTOR _____

REASON FOR CHANGE _____

THE UNDERSIGNED AGREES TO INDEMNIFY AND HOLD FREE AND HARMLESS THE CITY OF SUNRISE, ITS OFFICIALS, EMPLOYEES AND AGENTS FROM AND AGAINST ANY AND ALL SUITS, ACTIONS, OR CLAIMS ARISING FROM THE ISSUANCE OF THIS CHANGE OF CONTRACTOR OR WHICH ARE INCIDENTAL TO OR ARE IN ANY WAY CONNECTED WITH THE CHANGE OF CONTRACTOR, REGARDLESS OF ANY ERROR, OMISSION OR NEGLIGENT ACTION OR INACTION OF THE CITY OF SUNRISE, ITS OFFICIALS, EMPLOYEES OR AGENTS.

THE UNDERSIGNED FUTHER AGREES TO INDEMNIFY AND DEFEND THE CITY OF SUNRISE, ITS OFFICIALS, EMPLOYEES AND AGENTS AT HIS/HER OWN EXPENSE OR TO PROVIDE FOR SUCH DEFENSE (AS DETERMINED BY THE CITY OF SUNRISE), FOR ANY AND ALL CLAIMS OF LIABILY AND ALL SUITES, ACTIONS, OR CLAIMS THAT MAY BE INCURRED BY THE CITY OF SUNRISE, ITS OFFICALS, EMPLOYEES, OR AGENTS IN CONSEQUENCE OF ACTIONS OR INACTIONS RELATING TO THE CHANGE OF CONTRACTOR.

BY EXECUTION OF THIS HOLD HARMLESS AGREEMENT, THE UNDERSIGNED AGREES TO COMPLY WITH THE FOREGOING PROVISIONS OF INDEMNIFICATION AND THAT ALL INTERESTED PARTIES HAVE BEEN NOTIFIED PRIOR TO THE CHANGE OF CONTRACTOR APPLICATION.

Owner – Print Name

Owner – Signature

State of Florida
County of _____

The foregoing instrument was acknowledged before me this _____ day of _____,
20 _____, by _____.

Personally known ____ or produced identification ____ Type of Identification Produced: _____

Notary Public – Signature

My Commission Expires:

Notary Public – Print Name