



Change of Architect/ Engineer Hold Harmless Form

Provide the following information along with a new set of drawings replacing the existing approved design documents signed and sealed by the new architect or engineer of record. The replaced set of drawings may be submitted as a reference showing no change to the drawings.

Property Information	
Property Address:	
Property Owner Name:	Owner Phone #:
Property Owner Address:	
Current Architect/Engineer of Record	
Name:	License #:
Address:	Phone #:
Partial Inspection performed by Architect/Engineer of Record: <input type="checkbox"/> Yes, Date: _____ <input type="checkbox"/> No	
New Architect/ engineer of Record	
Name:	License #:
Address:	Phone #:

I agree to hold the City of Naples, Florida, its agents and authorized personnel, harmless and relieve them from any responsibility or liability for any legal action or damage, cost or expense, including but not limited to attorney's fees resulting from substituting the design professional. I furthermore assume responsibility for corrections, if required, of work performed under the permit for which I am requesting substitution of the design professional. In the event there has been a change of ownership of the property, the new owner assumes the responsibility for notifying the previous owner of his and/or her intent to substitute the design professional. I am also certifying that I understand and fully comply with the requirements of Chapter 61G15-27.001 (Engineers) and 61G1-18.002 (Architects)

New Architect/Engineer of Record Signature: _____	Property Owner Signature: _____
State of Florida, County of _____	State of Florida, County of _____
The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this ___ day of _____, 20___ by _____ (name of person)	The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this ___ day of _____, 20___ by _____ (name of person)
who is <input type="checkbox"/> personally known to me, or <input type="checkbox"/> who has produced _____ as identification.	who is <input type="checkbox"/> personally known to me, or <input type="checkbox"/> who has produced _____ as identification.
Notary Signature: _____	Notary Signature: _____
Notary Seal:	Notary Seal:

CBO Approval: _____ Date: _____