



**City of Miami**  
BUILDING DEPARTMENT

**REVOCATION OF PERMIT**

(Only the Owner or Contractor may request revocation of the permit)

This is a request for revocation of the following permit:

Permit Number: \_\_\_\_\_ Job Address: \_\_\_\_\_

**CURRENT OWNER / CONTRACTOR'S AFFIDAVIT**

**OWNER'S INFORMATION:**

**CONTRACTOR'S INFORMATION:**

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City & Zip Code: \_\_\_\_\_

Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
City & Zip Code: \_\_\_\_\_

**REASON FOR REVOCATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I / We certify that the information given above is a true and accurate representation of facts. Further, I / We agree to hold the City of Miami, its agents and authorized personnel harmless, and relieve them from any responsibility for damages, costs or expenses, including but not limited to attorney's fees resulting from the cancellation of this permit or issuance of a new permit.

\_\_\_\_\_  
Owner's Signature or Contractor's Signature

\_\_\_\_\_  
Owner's Name (print) or Contractor's Name (print) & License Number

State of Florida )  
County of Miami-Dade )

SWORN AND SUBSCRIBED before me by \_\_\_\_\_, being personally known to me ( )  
or having produced as identification \_\_\_\_\_, and who being fully sworn and  
cautioned, states that the foregoing is true and correct to the best of his/her knowledge and belief.

\_\_\_\_\_  
Signature of Notary Print Name Date

Notary Public: NOTARY PUBLIC STAMP BELOW My Commission Expires: \_\_\_\_\_