NOTIFICATION OF CHANGE OF CONTRACTOR

City of Rockingham Inspection Dept.

Permit Number:		
Owner:		
Location:	A STATE OF THE STA	
Be it known to all men that (I) (We)		, being a duly licensed
North Carolina	Contractor, License #	, on this date
, he	ereby certify that I am acting as	
Contractor for the above described		and agree to
assume all duties and	obligations relative to that position.	
Contractor:	Witness:	·
Received By:	Date:	