City of College Station
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Permission Request to Change Sub-Contractor

Property Address: _____

Business Name: _____

General Contractor Information:

Contact Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email Address (Required): _____

1st Sub-Contractor Information:

Contact Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email Address (Required): _____

2nd Sub-Contractor Information:

Contact Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Mobile: _____ Fax: _____

Email Address (Required): _____

I, the General Contractor, am requesting to replace the subcontractor listed under 1st SubContractor with the subcontractor listed under 2nd SubContractor, as the 1st SubContractor is no longer associated with this permit.

General Contractor Signature: _____

Printed Name: _____ Date: _____

Building Department Representative: _____ Date: _____

Comments: _____

_____