



Building Department
 104 S. Church Ave Mulberry, FL 33860
 P.O. Box 707, Mulberry, FL 33860-0707
 Phone: (863) 425-1125 ♦ Fax: (863) 425-0188
www.cityofmulberryfl.org

BUILDING CANCELLATION FORM

Permit Number **Parcel/Folio #**

Site Address

Permit Description

Form Completed by: Owner-Builder Contractor Design Professional

Contractor Information

Name: _____ Phone #: _____

Email: _____

Property Owner Information **Property owner contact information is required*

Owner: _____ Phone #: _____

Property Address: _____

Email: _____

Status of Work

Has Work Commenced: Yes No

Reason for Cancellation

Prior to canceling my permit, I understand applicable fees are required to be paid in full and failure to pay may result in my license being placed on hold.

Signature: _____ Printed Name: _____

STATE OF FLORIDA
 COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____

20____, by _____

Who Is or Is Not personally know to me. Identified By: _____
(Type of Identification)

 NOTARY PUBLIC SIGNATURE

 PRINT NOTARY NAME

My Commission Expires: _____

(SEAL)