



**Contractor Letter Of Intent  
 Sign-Off**

Contractor Signing Off \_\_\_\_\_

Contractor Phone Number \_\_\_\_\_

Project Number \_\_\_\_\_ Project Name \_\_\_\_\_

Project Address \_\_\_\_\_

Real Estate Number \_\_\_\_\_

I, the undersigned, request to be removed as the contractor of record and release liability for the project listed above:

\_\_\_\_\_  
 Print Name of Qualifier

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Signature of Qualifier

<b>NOTARY STATE OF</b> _____	
<b>COUNTY OF</b> _____	
Before me, this ____ day of _____, 20____, personally appear _____	
Who executed this foregoing instrument, and acknowledged before me that same was executed for the purposes therein expresses.	
<input type="checkbox"/> Personally Known or <input type="checkbox"/> Produced ID: _____	
_____ Signature of Notary Public – State of _____	_____ My Commission Expires:

Please provide the above information by 1) Bringing it directly to City Hall (notary services are available), 2) Mailing it to the address listed below, or 3) Email to [inspections@ci.marathon.fl.us](mailto:inspections@ci.marathon.fl.us)  
*Note: Form must be notarized prior to mailing or emailing.*