



Department of Inspection and Standards

Jorge O. Elorza, Mayor
Joseph M. Atchue, Director/Building Official

OWNER'S CONTRACTOR RELEASE FORM

To: Department of Inspections and Standards

Permit # _____

I, _____
Owner's name

Owner's address

Owner's phone number

For whom the Plumbing work was being performed at

Address where work is being performed

In the City of Providence, request your approval to substitute the following contractor

New contractor & License #

In Lieu of:

Previous contractor & license # who was originally doing the work

Owner's Signature

Date