



CITY OF DIXON  
600 EAST A ST.  
DIXON, CA 95620-3697  
PHONE (707) 678-7000  
Building Info [Building@cityofdixonca.gov](mailto:Building@cityofdixonca.gov)

## Change of Contractor/Permit Holder

**Contractor of Record for Permit Number:** \_\_\_\_\_, hereby authorizes the transfer of this Permit. Any fees paid by either party are a private matter not to be addressed by the City of Dixon Community Development Department.

**Project Location or Address:** \_\_\_\_\_

**Current Contractor of Record (Print):** \_\_\_\_\_

**Current Contractor of Record CSLB License#** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Authorized Agent Transferring Permit (Print)** \_\_\_\_\_

**X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of the Authorized Agent Transferring Permit**

*Note:* Authorizing signature must be verifiable via California State License Board (CSLB) personnel listing. Contractor of Record may also be 'Owner-Builder' (If Owner-Builder, provide a copy of the Title Deed or Grant Deed)

**New Contractor of Record (Print):** \_\_\_\_\_

**New Contractor of Record's CSLB License #:** \_\_\_\_\_

**Phone #** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Owner's Name (Print):** \_\_\_\_\_

**X** \_\_\_\_\_

**Owner's Signature authorizes this permit holder change.**

**THIS FORM MUST BE HAND-DELIVERED TO**  
**THE COMMUNITY DEVELOPMENT DEPARTMENT BY THE NEW**  
**CONTRACTOR. NEW CONTRACTOR MUST SIGN FOR PERMIT**