

Chatham County Department of Building Safety & Regulatory Services P.O. Box 8161, Savannah, GA 31412-8161 912-201-4300 - Fax 912-201-4301



Gregori S. Anderson, CBO Director

Clifford Bascombe, CBO, CFM Assistant Director

GENERAL CONTRACTOR CHANGE FORM

Date	Permit Number:
Project Address:	
Owner:	
Name:	Phone No. ()
Address:	
City:	
Current General Contractor:	
Phone No. (
New General Contractor:	
Company:	
Address:	
Phone No. ()	
Local License #	
I hereby certify that I will perform the work descr valid State and local license.	ibed in the above referenced permit and that I have
General Contractor/Owner Signature	Date