

City of Hialeah

501 Palm Avenue, 2nd Floor

Hialeah, Florida 33010

Office: 305.883.5825

www.hialeahfl.gov



CHANGE OF ARCHITECT / ENGINEER

The following is required to be submitted to the Building Department for a Change of Architect/Engineer of Record:

- Submit a Change of Architect/Engineer Form (*original signatures*)
- Copy of the certified letter sent to the original Architect/Engineer of Record and proof of delivery of certified letter.
- Two new sets of drawings, replacing the existing drawings, signed and sealed by new Architect/Engineer of Record
 - The title block, seal and signature of the original design professional must be removed and replaced by the title block, seal and signature of the new Architect/Engineer of Record
 - All changes to original plans must be clouded and a letter explain each change must be attached to each set of plans

PLEASE NOTE:

- The new drawings shall be re-reviewed by all applicable trades and/or departments.
- Revision fees will apply per discipline for the re-review of plans and any revisions as pursuant to the applicable City of Hialeah, Building Fee Schedule (see <https://www.hialeahfl.gov/DocumentCenter/View/10602/Building-Department-Fee-Schedule-Effective-2-1-19>)
- The new Architect/Engineer of record must comply with the requirements of Florida Statutes :
 - Florida Statute. 481 CH. 61G1-18.002 Procedures for a Successor Architect Adopting as His Own the Work of Another Architect.
 - Florida Statute 471. CH. 61G15-27.001. Procedures for a Successor Professional Engineer Adopting As Their Own the Work of Another Engineer.



City of Hialeah
CHANGE OF ARCHITECT / ENGINEER
HOLD HARMLESS LETTER

As legal owner of the subject property, I request the replacement of the Architect/Engineer of record

PERMIT NUMBER: _____

DATE: _____

Job Address: _____

Owner's Name: _____ **Phone #:** _____

Address, City, Zip code: _____

EXISTING ARCHITECT / ENGINEER INFORMATION

Name: _____ **LICENSE #:** _____

Address, City, Zip code: _____

Phone #: _____ **Email:** _____

NEW ARCHITECT / ENGINEER INFORMATION

Name: _____ **LICENSE #:** _____

Address, City, Zip code: _____

Phone #: _____ **Email:** _____

I agree to hold the City of Hialeah, its agents and authorized personnel, harmless and relieve them from any responsibility or liability for any legal action or damage, cost or expense, including but not limited to attorney's fees resulting from substituting the design professional. I furthermore assume responsibility for corrections, if required, of work performed under the permit for which I am requesting substitution of the design professional. In the event, there has been a change of ownership of the property, the new owner assumes the responsibility for notifying the previous owner of his and/or her intent to substitute the design professional. I am also certifying that I understand and fully comply with the requirements of F.S. 471 Ch. 61G15 and/or F.S. 61G1.

Signature of Owner

STATE OF FLORIDA - COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this ____ day of _____
20____ by means of __ physical presence or __ personally known
or by I.D. _____

Notary Signature: _____

Notary Stamp: _____

Signature of New Architect/Engineer

STATE OF FLORIDA - COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this ____ day of _____
20____ by means of __ physical presence or __ personally known
or by I.D. _____

Notary Signature: _____

Notary Stamp: _____

Building Official or Designee Approval: _____

Date: _____