



MUNICIPALITY OF ANCHORAGE
BUILDING SAFETY DIVISION



CONTRACTOR TRANSFER FORM

I, _____, of _____ agree to
(authorized name) (company)

relinquish permit # _____ to _____ I understand I will not
receive a refund of the fees paid for the original permit.

By: _____ Date: _____

Subscribed and sworn before me this _____ day of _____, 20____.

NOTARY PUBLIC in and for Alaska

My Commission Expires: _____

By: _____ Date: _____