



Jefferson County Department of Development Services

LICENSED PROFESSIONAL REQUEST FOR WITHDRAWAL FROM A JOB

Request Date:
Permit Number:
Subject Property Address:
Effective Date of Change:

I, \_\_\_\_\_ (Licensed Professional), hereby request to be removed from the Jefferson County above referenced property and permit number.

License Type: (Select One)
[ ] Electrical Master
[ ] Plumbing Master
[ ] Gas Master - Natural
[ ] Gas Master - LP Class A
[ ] Gas Master - LP Class C

I acknowledge by my signature that I will hold the Jefferson County Department of Development Services harmless and relieve it from any responsibility or liability for any legal action or damage resulting from this request.

\_\_\_\_\_  
Licensed Professional Name License Number Licensed Professional Company Name

\_\_\_\_\_  
Licensed Professional Signature Date

(DO NOT WRITE BELOW THIS LINE. FOR COUNTY USE ONLY)

[ ] Approved [ ] Denied

Building Official/Designee Name & Signature: \_\_\_\_\_  
Name Signature