



700 Belvoir Rd.
 Plymouth Meeting, PA 19462
 610-277-4100 (Ph.)
 610-277-4335 (FX.)
 www.plymouthtownship.org

Plymouth Township Change of Contractors

Please type or print clearly

I. Location		
Address:	Suite:	Date:
Permit #:		

II. General Contractor	
Name:	E-Mail:
Address:	Phone #:
City, State, Zip:	Fax #:

III. Old Sub Contractor	
Name:	E-Mail:
Address:	Phone #:
City, State, Zip:	Fax#:

IV. New Sub Contractor	
Name:	E-Mail:
Address:	Phone #:
City, State, Zip:	Fax#:

V. General Info					
Building []	Electrical []	Mechanical []	Plumber []	Fire Alarm []	Fire Sprinkler []

Due to the Pennsylvania Workman Compensation Insurance regulation, all change in subcontractors must provide proof of liability insurance and a copy of their Workers Compensation Certificate, with this change of application.

Owners Signature: _____ Date: ____/____/____

General Signature: _____ Date: ____/____/____

New Sub. Signature: _____ Date: ____/____/____