

OWNER REFUSAL FORM

DATE: _____

COMPANY NAME: _____

RE: Permit #: _____

Construction Address: _____

I, _____, license # _____,
have attempted to contact _____ on three separate occasions,
one of which was by certified, return receipt requested mail (copies of letters and receipt attached). The
owner refuses to arrange a time to make the property accessible for inspection by Pinellas County Building
Development Review Services inspectors. I hereby also certify that the installation covered by this permit
was done in full compliance with the Florida Building Code and any applicable local amendments. I am
therefore requesting that the permit be closed subject to the Uncooperative Owner Policy.

(This letter must be signed by the license holder, and the signature must be properly notarized.)

Print License Holder Name

Signature of License Holder

Mail this form, along with copies of all
letters and mail receipts to:

**Pinellas County Building and
Development Review Services
310 Court Street
Clearwater, FL 33756**