



# City of Kingsburg

1401 Draper Street, Kingsburg, CA 93631-1908  
(559) 897-5328

Holly Owen  
Community Development  
Director

AJ O'Connell  
Building Official

Alexander J. Henderson  
City Manager

## PERMIT TRANSFER FORM

Department of Building Safety staff must witness the signature of the original permittee, or this letter must be notarized by a Notary Public.

I, \_\_\_\_\_, HEREBY TRANSFER ALL MY INTEREST AND RIGHTS IN PERMIT  
**PRINT NAME**  
NUMBER \_\_\_\_\_, AT \_\_\_\_\_,  
**PERMIT #** **ADDRESS OF PERMIT**  
KINGSBURG, CA TO THE FOLLOWING:

NAME: \_\_\_\_\_

CSLB LICENSE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

THIS TRANSFER SHALL INCLUDE ALL FEES AND APPROVED PLANS.

SIGNED: \_\_\_\_\_

DATE: \_\_\_\_\_

**SIGNATURE OF ORIGINAL PERMITTEE**

WITNESSED BY: \_\_\_\_\_

DATE: \_\_\_\_\_