

CITY OF MOULTRIE
 PLANNING AND COMMUNITY
 DEVELOPMENT DEPARTMENT
 P. O. Box 3368
 Moultrie, Georgia 31776
 (229) 890-5405 FAX (229) 985-9495



Owner Permit Affidavit

I _____ hereby verify that I own and reside in the single family dwelling located at _____. I attest that the work to be performed as permitted by the City of Moultrie Planning and Community Development Department under Permit(s) # _____ will be physically performed by me as the owner and occupant of the residence. I understand if I employ anyone to perform work, aid or assist in the installation of the aforementioned construction trades that they are required by law to have a Georgia State license issued by the Construction Industry Licensing Board and said work shall be permitted and inspected by the City of Moultrie. I accept full and complete responsibility for my actions in the installation of said Construction trades and shall hold harmless the City of Moultrie or any one of their employees from any and all claims resulting from said Permit action.

Initial those that apply

- | | |
|---------------------------------|--------------------------------|
| _____ New Construction/Addition | _____ Plumbing Installation |
| _____ Alteration/Remodel | _____ HVAC (package unit only) |
| _____ Electrical Installation | _____ Low Voltage Installation |

Applicant further deposes he/she is aware that any knowingly false statement made in the Permit application will subject said applicant to prosecution for violation of Georgia Criminal Code, Section 26-2402 (false swearing) and a possible fine of not more than \$1,000.00, or imprisonment for less than one year, nor more than five years, or both.

I have read and understand the statement above.

Witness our hand and seals this _____ day of _____, 20 ____.

 Print Name

 Notary of Public

 Signature

 Signature (Notary Block)