



Community Development Department
RESIDENTIAL SUBCONTRACTOR AFFIDAVIT

1500 Morrow Rd. Morrow, GA 30260 678.902.0924 (T) 770.960.3002 (F)

Date ____ / ____ / ____

MASTER PERMIT# _____

NOTICE: This form must be completed, signed, notarized and submitted to the Community Development Department prior to the issuance of a Building Permit. A copy of each subcontractor current Business License, State Trade License and Driver's License must accompany all affidavits. All information requested on this form is mandatory.

GENERAL CONTRACTOR INFORMATION

| | | | | | |
|---------------------|--|-------------------|--|--------------------------------|--|
| Property Address: | | Subdivision Name: | | Lot #: | |
| General Contractor: | | Address: | | State License: | |
| | | | | Expiration: ____ / ____ / ____ | |
| Phone: | | Email: | | Business License: | |
| | | | | Expiration: ____ / ____ / ____ | |

This is to certify that I am responsible for the (Check each trade that applies):

| | | |
|---|----------------------------|--------------------------|
| <input type="checkbox"/> Electrical | Sub-Contractor Name: _____ | State License: _____ |
| Expiration: ____ / ____ / ____ | Address: _____ | Ph #: ____ - ____ - ____ |
| <input type="checkbox"/> Mechanical/Gas | Sub-Contractor Name: _____ | State License: _____ |
| Expiration: ____ / ____ / ____ | Address: _____ | Ph #: ____ - ____ - ____ |
| <input type="checkbox"/> Low Voltage | Sub-Contractor Name: _____ | State License: _____ |
| Expiration: ____ / ____ / ____ | Address: _____ | Ph #: ____ - ____ - ____ |
| <input type="checkbox"/> Fire Sprinkler | Sub-Contractor Name: _____ | State License: _____ |
| Expiration: ____ / ____ / ____ | Address: _____ | Ph #: ____ - ____ - ____ |
| <input type="checkbox"/> Plumbing | Sub-Contractor Name: _____ | State License: _____ |
| Expiration: ____ / ____ / ____ | Address: _____ | Ph #: ____ - ____ - ____ |
| <input type="checkbox"/> Water Heater <input type="checkbox"/> Drinking Fountain <input type="checkbox"/> Sewer line (_____ feet) <input type="checkbox"/> Water Closet <input type="checkbox"/> Washing Machine <input type="checkbox"/> Septic Tank <input type="checkbox"/> Sink/Basin <input type="checkbox"/> Laundry Tub/Slop Sink <input type="checkbox"/> Urinals <input type="checkbox"/> Bath Tub/Shower <input type="checkbox"/> Floor Drain/Roof Drain <input type="checkbox"/> Lavatory <input type="checkbox"/> Dishwasher <input type="checkbox"/> Disposal <input type="checkbox"/> Gas Line <input type="checkbox"/> Water Line <input type="checkbox"/> Other _____ | | |

I certify that I have and will comply with all codes and ordinances adopted by the City that pertain to the construction of this structure. In the event of any change in my status on this installation, I understand that I will be held responsible for all indicated work at this job until the Building Official has been notified, in writing of any change. I further agree to indemnify the City and its operator from any liability for damages and loss of property if the work performed by our firm has not been installed in accordance with these codes and ordinances.

| | |
|--|--------------------------|
| Sworn to and subscribed before me this _____ day of _____, 20____. | |
| Notary Public (Signature) _____ | (SEAL) |
| General Contractor Signature: _____ | Date: ____ / ____ / ____ |