



HOMEOWNER NEW CONSTRUCTION PERMIT AFFIDAVIT

- INSTRUCTIONS: PLEASE TYPE OR PRINT (IN INK) ALL REQUESTED DATA –
(Note: An incomplete application may delay the approval process.)

STATE OF GEORGIA
County of Ware
City of Waycross

Permit Number: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_ BLOCK: \_\_\_\_\_ LOT: \_\_\_\_\_

The undersigned hereby applies for special consideration as a property owner desiring to alter his/her personal residence. In making this request for a “homeowner” permit, the undersigned states the following to be true:

- Applicant intends to reside in completed structure and does not plan to offer same for sale or rent.
• Property described in permit application is currently owned by the applicant.
• Applicant will serve as the general contractor and accept inherent responsibilities for the work authorized by the issued permit.
• Applicant agrees to hire properly licensed contractors for any work that is further sub-contracted. All electrical, mechanical and plumbing work will be separately permitted.
• Applicant agrees to perform work in accordance with all applicable codes and strictly adhere to the inspection schedule. Undersigned acknowledges that inspections must be performed in an established sequence and that work done in violation of the codes must be corrected or may be ordered removed.

Applicant acknowledges that he/she is aware that a permit issued under the provisions of the code may be revoked for false statements or misrepresentation as to the material fact in the application on which the permit was based.

Applicant further acknowledges that he/she is aware that any knowingly false statements made in the permit application will subject said applicant to possible prosecution. Georgia Criminal Code, Section 26-2402 (False Swearing) calls for a possible fine of not more than \$1,000.00 or imprisonment for not less than one (1) nor more than five (5) years, or both.

UPON SUBMISSION, THIS AFFIDAVIT BECOMES PART OF THE ACTUAL PERMIT.

Applicant’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public
State of Georgia

FOR OFFICE USE ONLY
Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_ Permit #: \_\_\_\_\_
After completion, make one copy for the Applicant, and attach a copy to the original Permit Application for the file.