



MACON-BIBB COUNTY BUILDING AND FIRE SAFETY

3661 Eisenhower Pkwy, Ste MB105
Macon, GA 31201
(478) 803-0466

HOMEOWNER-OCCUPANT AFFIDAVIT

THIS FORM MAY ONLY BE USED BY THE OWNER OF A SINGLE-FAMILY RESIDENCE RESIDING IN THE RESIDENCE

NOTICE: This form must be completed, signed, and submitted to the Department of Building and Fire Safety before a permit or Certificate of Occupancy is issued. All information requested on this form is mandatory.

Project Address: _____

This is to certify that I am responsible for the following Trades:

☐

Electrical

☐

Plumbing

☐

Mechanical

☐

Low Voltage

☐

Building

I certify that I have and will comply with all codes and ordinances adopted by Macon-Bibb County that pertain to the construction/renovation of this structure. I further agree to indemnify Macon-Bibb County and its operator from any liability for any damages and loss of property if the work performed has not been installed in accordance with these codes and ordinances. I hereby affirm that I am conducting this work on property that I own and upon completion, this building/structure will be occupied solely by myself and my family, firm, or corporation and its employees, and not for use by the general public and not offered for rent, sale or lease. I will not rent, lease, or sell this property within 24 months.

Further, I hereby affirm that I have not sold or transferred a building or structure that I have constructed while acting as a contractor within the prior 24 months. I further understand that any falsification of the above statements may constitute fraud and result in the cancellation of this permit and other possible penalties.

Please note if you are not able to safely construct your project, you will be required to hire a licensed contractor to complete the project.

Homeowner Address: _____ **City:** _____ **St:** _____

Homeowner-Occupant Acting as Contractor (Print Name): _____

Homeowner-Occupant Signature: _____ **Date:** _____

This _____ day of _____, 20____

NOTARY PUBLIC

MY COMMISSION EXPIRES

FOR OFFICE USE ONLY

Processed By:

Date:

Building Permit #:



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**HOMEOWNER
BUILDER CERTIFICATION**

Project Address: _____

I hereby affirm that I am the legal owner of the property mentioned above and upon completion of the construction or renovation of my residential structure, it will be occupied solely by myself and my family. I will not rent, lease, sell, or transfer this property into any other name within 24 months after the completion of this project.

In addition, I hereby affirm that I have not sold or transferred a residential structure that I have constructed or renovated while acting as a contractor within the prior 24 months.

I further understand that any falsification of the above statements may constitute fraud and result in the cancellation of this permit and other possible penalties. If the permit is canceled, a refund or transfer of permit fees will not be granted.

Legal Homeowner's Address: _____

Legal Homeowner's Printed Name: _____

Legal Homeowner's Signature: _____ Date: _____

This _____ day of _____, 20_____

NOTARY PUBLIC

My Commission Expires