HOMEOWNER'S AFFIDAVIT

☐ Electrical - Permit #: _____

☐ Plumbing - Permit #: _____

☐ HVAC - Permit #: _____

☐ Other - Permit #: _____

Date: _____

Property Address: _____

*_____ I certify that I am the owner of the property listed above and it is my homestead.

*_____ I will perform all work myself and will not hire or compensate others. If work is substandard, I will hire a licensed contractor registered with the City of Whitesboro.

*_____ I understand violations may result in citations, permit suspension, or other legal action.

Printed Homeowner Name: _____

Homeowner Signature: _____

Phone Number: _____

Email: _____

Driver License #: _____

*- Initials Required

City of Whitesboro • Building Department •903-564-4003 •permits@whitesborotexas.org