



SUBCONTRACTOR AFFIDAVIT

NOTICE: This form must be completed, signed and submitted to the Community Development Department before a Certificate of Occupancy will be issued. **A Copy of your current Business License and State Trade License must accompany all affidavits.** All information requested on this form is mandatory.

Building/Pool Permit #: _____

Job Site Address: _____

Subdivision: _____ **Lot/Bldg/Ste:** _____

General Contractor: _____

This is to certify that I am responsible for the:

_____ **Electrical**

_____ **Plumbing**

_____ **Mechanical/HVAC**

_____ **Low Voltage**

_____ **Other**

_____ **Gas**

I certify that I have and will comply with all codes and ordinances adopted by the City of Milton 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 Building Inspections has been notified, in writing of any change. I further agree to indemnify the City of Milton 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.

Signature: _____ Date: _____

State License: _____ Expiration: _____

Business License & Jurisdiction: _____ Expiration: _____

Sub-Contractor Name: _____

Address: _____

Telephone Number: _____

E-mail completed form to permits@miltonga.gov

