



WORK BY OWNER AFFIDAVIT

CITY OF HIGH POINT

211 S. Hamilton St., High Point, NC 27260, Suite 316

Phone 336-883-3151

GENERAL INFORMATION

PROPERTY OWNER INFORMATION (All fields in this section are required)

Property Owner: _____

Address: _____

City/State/Zip: _____

Phone: _____ Email (Optional): _____

ACKNOWLEDGEMENT

I understand that I am being issued a permit to do the following work based on acknowledgements below: (Check all that apply)

- Electrical
- Mechanical
- Plumbing

PLEASE ACKNOWLEDGE THE CONDITIONS LISTED BELOW BY INITIALING THE APPROPRIATE LINES

I further understand and shall adhere to the following conditions:

_____ **Mechanical, Plumbing:** Any person, firm, or corporation who constructs or alters systems on land owned by that person, firm, or corporation provided (1) the building is intended solely for occupancy by that person, firm or corporation after completion; and (2) the person, firm, or corporation complies with G.S. 87-14. If the building is not occupied solely by the person, firm or corporation for at least 12 months following completion, it shall be presumed that the person, firm or corporation did not intend the building solely for occupancy by that person, firm or corporation.

_____ **Electrical:** To the installation, construction, maintenance or repair of electric wiring, devices, appliances, or equipment by persons, firms or corporations, upon their own property when such property is not intended at the time for rent, lease, sale or gift, who regularly employ one or more electricians or mechanics for the purpose of installing, maintaining, altering or repairing of electrical wiring, devices or equipment used for the conducting of the business of said persons, firms or corporations.

_____ I will personally superintend and manage all aspects of the construction or alternation of the building and that duty will not be delegated to any person not duly licensed under the terms of Article 1 of Chapter 87 of the General Statutes of North Carolina;

_____ I will be personally present for all inspections required by the North Carolina State Building Code, unless the plans for the construction or alteration of the building were drawn and sealed by an architect licensed pursuant to Chapter 83A of the General Statutes of North Carolina;

AUTHORITY TO FILE

****Required****

I understand that it is a violation of State Law for another person to do the work either for free or for pay.
Applications will not be accepted without signature(s).

Print Owner Name

Owner Signature

Date

****Notary Public****

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____.

Printed Name of Notary Public

Signature of Notary Public

My Commission Expires: _____ (Notary Stamp or Seal)