

Applicant Name: _____ Job Site Address: _____ Application No.: _____



Homeowner Permit Affidavit (For Single Family)

City of Columbus, Ohio ▪ Department of Development ▪ Building Services Division

757 Carolyn Avenue, Columbus, Ohio 43224 ▪ Phone: 614-645-7433 ▪ Fax: 614-645-7912 ▪ www.columbus.gov

State of Ohio, County of Franklin, SS

Date: _____

I, _____, do certify that I am, or will be, the occupying homeowner of a single-family residence of an R-4 Use Group, and do hereby submit application to undertake the following work located at:

Street Address

Zip

I WILL BE DOING THE FOLLOWING WORK: Please check all that apply. Separate permits shall be obtained for each item marked. For each item checked, provide information on who will perform the actual work on the line provided.

Work will be done by:

- Structural: _____
- Electrical: _____
- HVAC: _____
- Plumbing: _____
- Fireplace Pre-Fab or Fuel-Gas Piping: _____

I UNDERSTAND AND WILL ABIDE BY THE FOLLOWING STATEMENTS:

- I live in this residence with my family: Y ▪ N ▪ **OR** ▪ I will move into this residence with my own family on or before (date) _____
- I will only use this dwelling as the home for me and my family.
- I will not enter into a contract with an unlicensed contractor and I will do the work as required by the Columbus City Codes. It is understood that I may have assistance from other persons not licensed as contractors with the City of Columbus, providing no contract either verbal or written exists among the parties involved.
- I have attached the permit application & the proper fee. I know that I am responsible for the work meeting Columbus City Codes. I know that work done by someone other than myself requires permits by licensed contractors. I have told the truth on this affidavit and on the attached papers. I know there is a fine or imprisonment for violating the building code.

SPECIAL NOTE: Based on the licensing requirements of the City of Columbus, a homeowner may NOT obtain mechanical permits for new construction of a single family residence.

Name of Applicant (please print)

Signature of Applicant

Address of Applicant

(Area Code) Home Phone Number

(Area Code) Alternate Phone : Work Mobile Other: _____

Sworn to before me and signed in my presence this _____ day of _____, in the year _____

Notary Seal Here

Signature of Notary Public or Building Services Division Official

FALSIFICATION OF A PUBLIC DOCUMENT IS A VIOLATION OF THE OHIO REVISED CODE, SEC. 2921.13(A)(5), A MISDEMEANOR OF THE FIRST DEGREE, PUNISHABLE BY UP O SIX (6) MONTHS IMPRISONMENT & A FINE OF \$1,000 OR BOTH.

OFFICE USE ONLY:

Approved Denied By: _____ Date: _____

Comments: _____

**** Required Information: PLEASE NOTE:** Incomplete information will result in the rejection of this submittal.

For all questions regarding this form and fees please call: 614-645-6090

Please make checks payable to the Columbus City Treasurer