HOMEOWNERS' AFFIDAVIT



CITY OF MIDDLEBURG HEIGHTS

Building Department 15700 Bagley Road

Middleburg Heights, OH 44130
Phone (440) 234-2218 • Fax (440) 234-9092
E-mail: building@middleburgheights.com



| Property Owner Name: | |
|--|---|
| Property Address: | |
| Permit Being Requested : | |
| I hereby certify that as property owner, I will personally perform the lieu of securing the services of a licensed contractor to perform the | • |
| Section 743.02 of the Codified Ordinances of the City of Middleburg | , , , |
| I understand that, as holder of the permit, it is my responsibility to: | |
| - Obtain all required permits and approvals | |
| - Comply with all applicable building codes, zoning codes, a | and specifications |
| - Obtain all required inspections | |
| Assume responsibility for correcting any deficiencies, assorting inspection by a building official | ociated with the work, that are detected upon |
| I further understand that any misrepresentations, or falsification, o | f any facts on this certification or the permit |
| application may cause the suspension or revocation of any permit i | ssued, as provided in Section 1303.11 of the |
| Middleburg Heights Building Code and may be subject to the penaltic | es provided in Section 1303.99 of the Building |
| Code. | |
| | |
| Property Owner Signature | Date |
| Received By | Date |