



STEPHENS COUNTY
BUILDING INSPECTIONS AND PERMITTING
706-898-5750

RESIDENTIAL ONLY

Building Permit Number: _____

Subdivision: _____ Lot: _____

Jobsite Address: _____

General Contractor: _____

This is to certify that I am responsible for the (PLEASE CHECK ONE) ___ Electrical ___ Plumbing ___ HVAC

YOU WILL NEED TO ATTACH A COPY OF YOUR STATE CARD

Please check below for the type of license you hold and are using for this job:

___ Electrical Contractor Class I (Restricted to Single-Phase, not exceeding 200 amps)

___ Electrical Contract Class II (Unrestricted)

___ Master Plumber Class I (Restricted to S-F, 1 Level Duplex and Commercial up to 10,000 sq. ft.)

___ Master Plumber Class II (Unrestricted)

___ Conditioned Air Contractor Class I (Restricted to 60,000 ETU Cooling and 175,000 ETU Heating)

___ Conditioned Air Contractor Class II (Unrestricted)

In the event of any change in my status on this installation, I understand that I will be held responsible for this job until Stephens County Building Inspections has been notified, in writing, of any change.

Signature (original): _____

Printed Name: _____

State License Number (please include all letters): _____ Expires: ___/___/___

Company Name: _____

Company Mailing Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____

SUB-CONTRACTOR AFFIDAVIT