



## OWNER/BUILDER AFFIDAVIT

**NAME OF OWNER/BUILDER:** \_\_\_\_\_

**LEGAL DESCRIPTION/ADDRESS:** \_\_\_\_\_

Congratulations and good luck with your Owner/Builder project. Please feel free to call on us if the Building Department can be of assistance. This affidavit is designed to help you avoid some of the problems that Owner/Builders often encounter. Please read and initial each of the following items.

I do hereby certify that, as Owner/Builder, I understand and acknowledge the following:

- \_\_\_\_ 1) I am personally responsible for knowledge of all applicable laws and regulations.
- \_\_\_\_ 2) I will personally reside in the house after completion and the issuance of a Certificate of Occupancy. Property be primary residence once work has been completed.
- \_\_\_\_ 3) Neither I, nor any member of my immediate household family, have made an application for, or have been issued either an Owner/Builder permit or a Certificate of Occupancy based upon an owner/Builder permit (for a single-family residence) within the past three (3) years.
- \_\_\_\_ 4) I will be on the premises either supervising or performing the actual work at all times. I will submit an accepted form of identification upon request by the Building Department's agent.
- \_\_\_\_ 5) I understand that if an inspection is not approved after two attempts, the Inspector may place a Stop Work Order on the on the job; and require that a licensed contractor complete the work.
- \_\_\_\_ 6) I understand that any person whom I may wish to hire to aid me in the construction of my home, except common laborers, must hold a valid Miami-Dade County Certificate of Competency or be a Florida state licensed contractor. Workers Compensation Insurance shall cover all employees hired by me. (Typically, home-owner's insurance does not provide this coverage; please check with your insurance carrier)
- \_\_\_\_ 7) I understand all the requirements and responsibilities involved in obtaining an owner-builder permit. I have read and understood the foregoing disclosure, and I am aware of my responsibilities and liabilities under my application for a building permit on the above-described property. I further understand that failure to comply with all the required regulations may cause the revocation and /or denial of the permit and/or certificates of occupancy/completion.

X \_\_\_\_\_  
Owner's Signature

Print Name: \_\_\_\_\_

STATE OF FLORIDA COUNTY OF MIAMI-DADE  
Sworn to and subscribed before me on, \_\_\_\_ of  
\_\_\_\_\_ 20\_\_\_\_  
Personally know \_\_\_\_ or I.D. \_\_\_\_\_

Notary Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

(SEAL)