



[www.JohnsCreekGA.gov](http://www.JohnsCreekGA.gov)

678-512-3200 ~ (fax) 678-512-3303

12000 Findley Road, Suite 400, Johns Creek, GA 30097

**RESIDENTIAL SUBCONTRACTOR AFFIDAVIT**

**NOTICE:** This form must be completed and submitted to the Community Development Department before a Certificate of Occupancy/Completion will be issued. **A Copy of your current Business License and State Trade License must be attached to this document and made a part hereof.** All information requested on this form is mandatory.

Permit Job ID #: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

General Contractor: \_\_\_\_\_

Sub-Contractor Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

State License Number: \_\_\_\_\_ Expiration: \_\_\_\_\_  
(ATTACH COPY - REQUIRED)

Business License Jurisdiction & Number: \_\_\_\_\_ Expiration: \_\_\_\_\_  
(ATTACH COPY - REQUIRED)

This is to certify that I am responsible for the:

- Electrical       Plumbing
- Mechanical       Low Voltage
- Gas       Other

I certify that I have and will comply with all codes and ordinances adopted by the City that pertain to the construction of this structure. In the event of any change in my status on this installation, I understand that I will be held responsible for all indicated work at this job until the Building Official has been notified, in writing of any change. I further agree to indemnify the City and its operator from any liability for damages and loss of property if the work performed by our firm has not been installed in accordance with these codes and ordinances.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me,

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
(Notary Public – Please notarize with official seal)