

# OWNER SUBTRADE EXEMPTION AFFIDAVIT



## PROJECT INFORMATION

Property Address: \_\_\_\_\_ Property Owner: \_\_\_\_\_  
Owner Phone: \_\_\_\_\_ Owner Email: \_\_\_\_\_

## HOMEOWNER SUBTRADE(S)

Select trade(s) homeowner is to perform: ☐ Electrical ☐ Plumbing ☐ Mechanical

## AFFIDAVIT

I, \_\_\_\_\_ (Print Full Name) \_\_\_\_\_, hereby claim an exemption from licensure for the above subtrades under G.S. 87-1 by **initialing** Paragraphs 1-5 below and attesting to the following:

1. \_\_\_\_\_ I must show proof of ownership of the above property for which permit is applied for. I understand I must show my name on the deed, or my name listed with the Avery or Watauga County Online Tax Search for the above property, along with a valid photo identification.
2. \_\_\_\_\_ I will personally occupy the building for at least 12 consecutive months following completion of construction and understand that if I do not do so, it creates the presumption under law that I fraudulently secured the permit under the terms of N.C.G.S. 87-1.
3. \_\_\_\_\_ This permit will allow me as the homeowner to PERSONALLY install my own electrical, plumbing, and/or mechanical work, as selected above, and that I will be the SOLE RESPONSIBLE PARTY INVOLVED IN PERFORMING ANY/ALL WORK UNDER THE APPLIED PERMIT.
4. \_\_\_\_\_ I understand that deviation of the scope of work from the approved permit or completion of work by a party other than myself SHALL RESULT IN REVOCATION OF THIS PERMIT.
5. \_\_\_\_\_ I understand that failure to adhere to any of the above statements can result in a Class F Felony pursuant to N.C.G.S. 14-209.

*I, the undersigned, have read and understand General Statute 87-1. As the owner of the land upon which a building permit was applied for, I hereby affirm or swear that I qualify under the exemptions to assume all responsibility and liability of a licensed tradesman upon this project.*

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

**PLEASE RETURN COMPLETED APPLICATIONS TO TOWN HALL IN PERSON OR BY EMAIL TO [permits@townofbeechmountain.com](mailto:permits@townofbeechmountain.com)**

## NOTARY SIGNATURE

SWORN TO AND SUBSCRIBED BEFORE ME, THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_.

Notary Public: \_\_\_\_\_ Signature: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

NOTARY  
STAMP HERE

DATE RECEIVED	PERMIT NUMBER	APPROVAL INITIAL	COMMENTS/CONDITIONS
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