

CITRUS COUNTY OCCUPANCY AFFIDAVIT

NOTE: THIS FORM MUST BE SUBMITTED TO THE BUILDING DIVISION PRIOR TO CALLING FOR YOUR FINAL INSPECTION!!!

Owner _____ Building Permit # _____

Lot _____ Block _____ Subdivision _____

Project Address _____

The following information represents a true, accurate and complete list of all licensed subcontractors, and / or other individuals, who have Performed work, or provided services, in the construction of the above described improvement.

Name/ Address:

Concrete Placement - _____

State License/Citrus Competency # _____ Phone # _____

Masonry - _____

State License/Citrus Competency # _____ Phone # _____

Carpentry - _____

State License/Citrus Competency # _____ Phone # _____

Plumbing - _____

State License/Citrus Competency # _____ Phone # _____

Electrical - _____

State License/Citrus Competency # _____ Phone # _____

Air Cond/ Heat - _____

State License/Citrus Competency # _____ Phone # _____

Insulation - _____

State License/Citrus Competency # _____ Phone # _____

Drywall - _____

State License/Citrus Competency # _____ Phone # _____

Roofing - _____

State License/Citrus Competency # _____ Phone # _____

Ceramic Tile - _____

State License/Citrus Competency # _____ Phone # _____

Stucco - _____

State License/Citrus Competency # _____ Phone # _____

Aluminum - _____

(Excluding soffit / fascia)

State License/Citrus Competency # _____ Phone # _____

Lawn Irrigation - _____

State License/Citrus Competency # _____ Phone # _____

Burglar / Fire Alarm - _____

State License/Citrus Competency # _____ Phone # _____

Dock / Seawall - _____

State License/Citrus Competency # _____ Phone # _____

Solar Water Heat - _____

State License/Citrus Competency # _____ Phone # _____

Structural Steel - _____

State License/Citrus Competency # _____ Phone # _____

Fire Sprinkler - _____

State License/Citrus Competency # _____ Phone # _____

The following are not required to have Contractor's Licenses:

Name Address:

Elevator _____

Windows _____

Garage Door _____

Painting _____

Well _____

Septic _____

Pilings _____

I hereby request occupancy for the above permit. All subcontractors, where applicable, are currently properly Licensed with the Citrus County Building Division, as required per F.S. Statutes 489 and local adopted building Ordinance.

General Contractor / Corporate Officer _____

State License # _____

Owner / Builder (if applicable) _____

STATE OF FLORIDA, COUNTY OF CITRUS)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State of Florida, County of Citrus to Take acknowledgments, personally appeared _____ who is

Personally known to me, or who has produced _____ as

Identification, and who did/ did not take an oath. WITNESS my hand and official seal this _____ day of _____.

NOTARY PUBLIC