



**CITY OF OKEECHOBEE
BUILDING DEPARTMENT
55 SE THIRD AVENUE
OKEECHOBEE, FL 34974**

Tele: 863-763-9821 Fax: 863-763-1686

ELECTRICAL CONTRACTOR AFFIDAVIT

Building Permit Number: _____

Job Address: _____

Homeowner Name: _____

Contractor License Number: _____

Contractor Name: _____

I, _____, am an electrical contractor duly licensed by the State of Florida. I hereby certify that all electrical work (repair and/or replacement) has been performed at the above address in accordance with the regulations required by the Florida Building Code and National Electric Code.

I fully understand that, by the City of Okeechobee Building Official's acceptance of this certification, I am totally responsible for the correction of any problems (at the site of repair, installation, or replacement) which may arise at any time in the future. I agree to indemnify, and hold harmless, the City of Okeechobee, Florida from any, and all claims, judgments, cost, liabilities, damages, and expenses, including attorney fees, whatsoever arising in connection with the work performed.

I hereby acknowledge that the statements herein contained are true and correct.

Qualifier Signature

Date



STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this ____ day of _____, 20 __, by _____.
Personally known OR produced identification. (Name of Person)

Type of Identification Produced:

Signature of Notary

(seal)

