



City of Statesboro
Department of Planning and Development

P.O. Box 348
Statesboro, Georgia 30459

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912.764.0664 (Fax)

STATE OF GEORGIA
CITY OF STATEBSORO

AFFIDAVIT FOR SELF CONTRACTORS

I, _____, certify that this is my primary residence and will be the self-contractor for the job located at _____. I am aware that if I hire an employee to supervise this job site that he/she must be State licensed and any trade employee on this job site must be covered by a license. I also understand that all inspections will be requested by me.

I understand that all work on this job site must adhere to the Code of Ordinances of the City of Statesboro, including setback distances. It is my responsibility to provide proof of my property boundary lines if requested. Any work completed after the date below must adhere to those boundaries and the associated setbacks. If a setback is violated, it will be my responsibility to bring the property into conformance.

Signature/Date

Sworn and subscribed before me this ____ day of _____, 20____, in Statesboro, Georgia.

Notary Public

My Commission Expires: _____