



ALLEN COUNTY, INDIANA BUILDING DEPARTMENT

200 E. Berry Street/Suite 180

FORT WAYNE, INDIANA 46802-1299

PHONE: (260) 449-7131

FAX : (260) 449-7596

JOHN E.CAYWOOD, Building Commissioner

AFFIDAVIT

“REGISTERED POOL INSTALLERS”

I certify with my signature for the project addressed below that I have read and understand the memo received regarding homeowner permits attached to my permits as a Registered Pool Installer. I also understand that I am responsible for ensuring that all codes set forth by the state of Indiana are adhered to and all inspections are completed and passed for each permit related to my permit.

Check all that apply:

_____ I will be hiring a licensed contractor to pull permits and complete any trade work checked below associated with my permit for the address herein.

_____ Electrical _____ Non-Sanitary _____ Gas Line

_____ I will be allowing the qualified homeowner to pull permits and complete any trade work checked below associated with my permit for the address herein.

_____ Electrical _____ Non-Sanitary _____ Gas Line

Project Address: _____ (print)

Company Name: _____ (print)

Authorized User Name: _____ (print)

Authorized User Signature: _____ Date: _____