



**City of Cornelia**  
 Planning / Building / Code Enforcement  
 Post Office Box 785  
 181 Larkin Street  
 Cornelia, Georgia 30531  
 Phone: 706/778 – 8585  
 Fax: 706/778 – 2234

**SELF – WORK PERMIT AFFIDAVIT**

*This affidavit must be completed in full, signed, initialed and submitted to the Building Permit Department of the City of Cornelia **BEFORE any work may commence.***

**Signatures must be ORIGINAL. We will only accept a faxed copy if signature is visibly notarized.**

Property Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

I, \_\_\_\_\_, do hereby certify that I am the owner of the premises referenced above and that I will obtain all required permits. I will do all work in conformity with the provisions of all state laws, ordinances of the City of Cornelia and the Georgia State Energy Code. I will properly obtain all required inspections and I understand that my family and I **must live on the premises a minimum period of 24 (twenty-four) months** as mandated by O.C.G.A. § 43 – 41 – 17(h)

I am requesting "Self-Work Permits" on the following:

**EACH APPLICABLE TRADE MUST BE INITIALED, ANY OTHER "MARK" WILL NOT BE ACCEPTED**

- |                         |                         |                      |
|-------------------------|-------------------------|----------------------|
| _____ Building Permit   | _____ Mechanical Permit | _____ Grading Permit |
| _____ Electrical Permit | _____ Gas Permit        |                      |
| _____ Plumbing Permit   | _____ Insulation Permit |                      |

By my signature below, I, as the owner of the property identified herein and planning to do the above identified work myself, do hereby attest that the information contained herein is true to the best of my knowledge. I further attest that I will do the above identified work for the entirety of the job and in the event there are any changes to the status on this application, I will notify the City of Cornelia Permitting Office in writing of the change.

★★ Signatures hereon indicate understanding that the issuance of a Certificate of Completion (COC) or Certificate of Occupancy (COO) requires that all inspections must have passed for compliance with all applicable codes & code requirements. ★★

**Property Owner's Printed Name:** \_\_\_\_\_

**Property Owner's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*False or untrue statements shall be punishable pursuant to O.C.G.A. § 16-10-20*

Sworn to and Subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ and year of \_\_\_\_\_.

\_\_\_\_\_  
 Notary Public

**A copy of a Picture I.D. (such as a Driver's License, etc.) Must be attached to this form **BEFORE** it can be Notarized!**