APF	PLICANT/AGENT: PERMIT #:
ADI	DRESS:
AG	SANT CONTRICTOR OR OWNER/CONTRACTOR
I he	ereby ten and gree that all the provisions, whether herein specified or not, of the required building codes listed below and the zoning inances of Hamilton County with the provisions, whether herein specified or not, of the required building codes listed below and the zoning and completely complied with.
I fui Offic resu	orther agree to leaemnily and hold armless the building officials, their agents and employees, and the County of Hamilton, it's Commissioners, cials, Agents, and Empty eest against any claims, liabilities, judgments, cost and expenses which may in any way accrue against them as a full of the granting of a build respermit.
* *	• ♦ ♦ Building sharmot be set sed prior to final inspections and issuance of certificate of occupancy • ♦ ♦ ♦
1)	INSPECTIONS as sent or wher, I understand it will be my responsibility to verify that the required inspections have been approved prior to proceeding a next phase approved prior to proceeding.
2)	<u>SETBACKS</u> - all structules must more required setbacks. If verification of property lines and/or lot dimensions are needed, agent or owner must provide this information.
3)	<u>PERMITS</u> - all required permits for a securitical, physicing, gas and/or mechanical must be obtained by a properly licensed contractor within that field or the own when policable
4)	PRIVATE ROADS - as agent or owner, I understand that the property is located on a private road and/or access easement and does not have county road access, maintenance of the datacess to public street is my responsibility.
5)	<u>LICENSE REQUIRED</u> – as owner/applicant careeby swear or affirm that after being duly sworn, state that per T.C.A. § 62-6-103 (2) (A & B), the structure is not for ten desale, lease or other similar purpose and that I have not obtained a building permit to construct a residence in the past two (2) lears from this described by the State of Tennessee.
6)	CONDITIONS & RESTRICTIONS – It will be the solar so insibility of the applicant to abide by all conditions and restrictions shown by plat or deed for the property
7)	MECHANICAL – It is the responsibility of the applicational and/or mechanical contractor for the design and efficiency of the HVAC system.
8)	WORKMAN'S COMPENSATION INSURANCE — I, the undersigned sweet a first that after being duly sworn and in order to receive a building permit pursuant to the provision of T.C.A. § 3-7-211 which requires building officials to obtain verification of compliance with the workers' compensation provisions of Tennessee Law would state as follows:
	A) Attached with this affidavit is a copy of the certificate of empliance for my company; or
	B) After a review of T.C.A. § 50-6-104 thru 50-6-106, I hereby swear and the my company is exempt from the provisions of the Tennessee World's Compensation Act.
	C) After a review of T.C.A. § 13-7-211, I hereby swear or affirm that I am exact the from the provisions of the Tennessee Workers' Compensation Act because I am verforming and/or directly supervising work on my own property in my own county of reside the
	individuals signing this affidavit further waive the requirement of T.C.A. § 13-7-211, for Hamilton County to return a mail the Certificate of impliance or photocopy thereof within ten (10) working days from the completion of the project to the person variable that the permit.
Sigr	nature of Owner or Agent
Swo	orn and subscribed to before me by, applicant, on this the day of, of
	NOTARY PUBLIC, STATE AT LARGE or witnessed by AGENT FOR BUILDING ZONING

MY COMMISSION EXPIRES: