



**Madison County  
Building and Zoning Department**

**State Licensed Contractor Affidavit  
P.O. Box 1138 Danielsville, GA 30633  
Phone: (706) 795-6350 Fax: (706) 795-5176**

**Permit # \_\_\_\_\_**

An affidavit is required for each permitted job performed, within Madison County, for the Contractor, Manufactured Home Installer, Electrical, Heating & Air and Plumbing trades.

**Property Owner** \_\_\_\_\_

**Location at which work will be performed:**

\_\_\_\_\_  
**Street Address**

**Type of work to be performed: (Circle applicable)**

Contractor    Electrical    Electrical – Generator Room    HVAC    Plumber    Manufactured Home Installer

**State Licensed Contractor Information:**

Name \_\_\_\_\_

State License Number \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Phone (\_\_\_\_) \_\_\_\_\_ or (\_\_\_\_) \_\_\_\_\_

**By signing this affidavit you are verifying the following:**

- \*You are the state licensed contractor listed above.
- \* You will be performing the type of work listed above.
- \* Work will be performed at the above listed location.
- \* All of the above information you have given is correct.

\_\_\_\_\_  
**State Licensed Contractor Signature**

\_\_\_\_\_  
**Date**

**By signing below Home Owner takes full responsibility for the work indicated above.**

\_\_\_\_\_  
**Home Owner Signature**

\_\_\_\_\_  
**Date**