



TOWN OF INDIAN RIVER SHORES
BUILDING DEPARTMENT
6001 N. HWY A1 A. Indian River Shores. FL
32963
772- 231-4453

ELECTRICAL SERVICE CHANGE AFFIDAVIT

Building Permit Number: _____

Job Address: _____

Electrical Contractor: _____

Qualifier: _____

License Number: _____

I, _____, DO HEREBY AFFIRM:
Print qualifier name

That I take full responsibility for the electrical work performed under the above permit. I also affirm that I have read and understand the enclosed cover sheet "ELECTRICAL SERVICE CHANGE PROCEDURES FOR ELECTRICAL CONTRACTORS" and agree to fully abide by them. All work will be performed to the requirements of the CURRENT NATIONAL ELECTRICAL CODE and the FLORIDA BUILDING CODE (latest addition)

I further understand that:

This procedure is a *privilege* being granted to licensed Electrical Contractors only and may be revoked by the Authority Having Jurisdiction at anytime for just cause.

By signing the enclosed affidavit the Electrical Contractor is taking full responsibility for the work performed.

IF ANY UNSAFE OR POTENTIALLY LIFE THREATENING DEFFICIENCIES ARE FOUND AT INSPECTION THE INSPECTOR WILL NOTIFY THE UTILITY FOR IMMEDIATE DISCONNECTION AND YOUR PRIVILEGES WILL BE REVOKED!

_____ Q	
Qualifier Signature	Date
Sworn to and subscribed before me this _____ day of _____, 20 _____	
By _____,	
Notary Public, State of Florida	
Personally known to me or Produced Identification _____	