



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Department of Administration
Division of Capital Projects and Property Management
CONTRACTOR'S REGISTRATION BOARD
One Capital Hill
Providence, RI 02908-5859

Office (401)222-1270
FAX (401)222-2599
TDD (401)222-6334

AFFIDAVIT

The undersigned, being duly sworn, upon oath, depose and state as follows:

- 1) I _____, am the owner of the property
(print name)

Located at _____ Plat ____ Lot ____.
(street – city/town)

- 2) On _____, 20__, I applied for and received
(date)

permit, # _____ from Foster,
(number) (applicable city/town)
Building Official's Office.

- 3) I will perform all work relative to the above-mentioned building permit.
4) In the event that I decide to hire a contractor to perform work relative to the above-mentioned building permit, I will hire a registered contractor, and provide the registration number to the Building Official's Office for their record.

AGREED TO BY:

Owner's Signature

Received: _____
(date)

Signature of Building Official



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HOMEOWNER'S AFFIDAVIT

I, _____, hereby certify that I am the owner of the building for which the permit is being issued. I further attest that I will perform all work on the structure and do not intend to hire a builder(s). In the event that I decide to hire a builder(s), I will immediately notify the Building Official and will hire a Registered builder(s).

Telephone #: _____

Applicant's signature: _____

Do Not Write Below this Line

Subscribed and sworn to me this _____ day of _____, 20____.

Notary Public

My Commission Expires: _____