



COUNTY OF DUPLIN
BUILDING INSPECTIONS DEPARTMENT
PO BOX 950
KENANSVILLE, NC 28349
PHONE: (910) 296-2124 FAX: (910) 296-2166

HOMEOWNER CERTIFICATION

This is to certify that I, _____ ,
Print Name

personally own and reside in the residence located at:

Street Address: _____

City: _____

I wish to perform the work on my personal residence as noted below:
(Check any that are applicable)

___ Electrical ___ Plumbing ___ Mechanical

I understand I am responsible for obtaining all inspections, making any corrections and paying any reinspection fees. Any such fees must be paid in full prior to final inspections.

I further understand that if I decide not to perform the work myself and choose to hire someone else, that individual must be properly licensed and must obtain their own permit in accordance with North Carolina General Statutes. Failure to comply with these Statutes may result in action by the appropriate Licensing Board. It may further result in my permit(s) being revoked.

Attested to, this date _____, 20 _____

Applicant: _____