



VIOLET TOWNSHIP
ZONING & BUILDING DEPARTMENTS
10190 Blacklick-Eastern Rd NW
Pickerington, Ohio 43147
(614) 575-5559 Fax (614) 575-5562

Permit No. _____

AFFIDAVIT FOR BUILDING PERMIT

PROPERTY OWNER OF RECORD

Name (Please Print) _____

Mailing Address _____

City/State/Zip _____ Telephone # _____

Email Address _____ Fax # _____

AGENT FOR OWNER

- CONTRACTOR TENANT ARCHITECT/ENGINEER
- ATTORNEY PLAN SERVICE FIRM OTHER _____

Name (Please Print) _____

Mailing Address _____

City/State/Zip _____ Telephone # _____

Email Address _____ Fax # _____

AFFIDAVIT (please check one)

I am the owner contractor agent of this 1-, 2-, or 3-Family Residential
Or Other Structure _____

Which is located in Violet Township, Fairfield County, Ohio at: _____ (please specify)

NUMBER	STREET	CITY	ZIP
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- I understand that additional permits may be required in order to perform work in the road right-of-way
- I understand that all work will comply with the currently adopted building codes
- I understand that the placement of all structures and their uses will comply with the regulations specified in the Violet Township Zoning Resolution
- I understand that this affidavit is important and I have told the truth on it and all attached papers.
- Name and signature below must match applicant information on the attached Building Permit Application form.

PRINT NAME	SIGNATURE
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Notary Seal Here

NOTARY PUBLIC OR ZONING & BUILDING
DEPARTMENT OFFICIAL