

PORTAGE COUNTY COMBINED GENERAL HEALTH DISTRICT

DuWayne Porter, M.P.H., R.S.
Health Commissioner

Portage County Administration Building
449 South Meridian, 3rd Floor
Ravenna, OH 44266
Phone: 330-296-9919
Fax: 330-297-3597

E-Mail: pchd@portageco.com

I, _____, being first duly sworn to make the following statement in support of home owner exemption to registering for plumbing contractor's Section 3703.03 of the Ohio Revised Code, and providing for the registration of Plumbing Contractor's:

I am the owner and resident or intended resident of the vacant one-family dwelling located at:

_____ ADDRESS _____ TOWNSHIP _____

I will personally perform all plumbing work authorized by Permit # _____; and;
I intend to reside in said one-family dwelling for at least six months.

AFFIANT _____

ADDRESS _____

CITY _____

PHONE _____

**SWORN TO BEFORE ME AND SUBSCRIBED IN MY PRESENCE THIS _____
DAY OF _____, _____
YEAR**

NOTARY PUBLIC

MY COMMISSION EXPIRES