



CHANGE IN SUBCONTRACTOR AFFIDAVIT

SECTION 1: IDENTIFICATION

PROJECT ADDRESS: _____ PERMIT # _____

GENERAL CONTRACTOR: _____

I, the General Contractor, hereby confirm the trade change of: _____

From: _____ To: _____

Effective: _____ / _____ / _____

PRINTED NAME OF GENERAL CONTRACTOR

SIGNED NAME OF GENERAL CONTRACTOR

SECTION 2: SUBCONTRACTOR AFFIDAVIT

SUBCONTRACTOR BUSINESS NAME: _____

BUSINESS MAILING ADDRESS: _____

Phone #: _____ E-Mail # _____

WORK PERFORMED _____

WINFIELD CONTRACTOR REGISTRATION # _____

The undersigned subcontractor verifies:

1. The subcontractor is a registered contractor in the Town of Winfield and the information in this document is true.
2. The subcontractor is performing their work personally and/or through their employees.
3. The subcontractor hereby agrees to abide by and comply with the conditions of all building codes and health laws of the State of Indiana, furthermore, understands that any variations or violations from the provisions of these laws and ordinances or conditions as stated herein shall constitute a cause for revocation of this permit.

PRINTED NAME OF SUBCONTRACTOR

SIGNED NAME OF SUBCONTRACTOR

STATE OF INDIANA) SS:
COUNTY OF LAKE)

SEAL:

NOTARY SIGNATURE: _____

RESIDENT OF COUNTY OF: _____ STATE OF _____

MY COMMISSION EXPIRES: _____