



Trade Affidavit

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|---------------------------|
| OFFICIAL USE ONLY: |
| UDO Number: _____ |
| Date Filed: _____ |
| Received By: _____ |

CAMDEN COUNTY BUILDING INSPECTIONS DEPARTMENT

P. O. BOX 74, CAMDEN, NC 27921
 PH: 252-338-1919 EXT 227 ❖ FAX: 252-333-1603
 Email: Permits@camdencountync.gov

NO Rough-In Inspection will be performed UNLESS ALL TRADE CONTRACTORS HAVE SUBMITTED FORMS.

Use this form *ONLY* for work done in conjunction with existing projects having a master permit where the cost of the trade contractors has been included in the master permit fees.

Select Trade:

- General Contractor
 Electrical
 Gas
 Set up Contractor
 Plumbing
 Mechanical

CONTRACTOR INFORMATION (REQUIRED)

BUSINESS NAME: _____
 NAME OF TRADE CONTRACTOR: _____
 Business Address: _____

 Business Phone: _____
 Email Address: _____

LICENSE INFORMATION (REQUIRED)

NC State License #: _____
 License Classification: _____
 License Expiration Date: _____

PROJECT INFORMATION (REQUIRED)

Property Owner: _____
 Project Address (REQUIRED - Job Location): _____
 Building Permit #: _____
 Contract Cost: \$ _____

I hereby affirm or swear that I am Licensed and Qualified to assume all responsibility and liability as a Contractor on this project. If I resign or am no longer affiliated with this project, I will notify the local Inspection Office immediately by phone or in person AND in writing within three (3) working days.

Signature: _____

Date: _____