

*Shelby County Building Inspector's Office  
25 West Polk Street, Room 201  
Shelbyville, IN 46176  
(317) 392-6480 Fax (317) 421-8365*

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**HOMEOWNER AFFIDAVIT**

I, \_\_\_\_\_, do hereby affirm, under the penalty of perjury, that I am the rightful owner AND occupant of the single-family dwelling located at \_\_\_\_\_ in Shelby County, for which I am obtaining a building permit.

I also understand that if I employ a subcontractor to perform any of the work covered under Building Permit # \_\_\_\_\_ issued by the Shelby County Building Department, that (1) Shelby County has no mechanism to guarantee the faithful execution of said work by the subcontractor, and (2) The Shelby County Building Department cannot insure that the subcontractor has obtained proper General Liability Insurance.

I furthermore agree to hold Shelby County harmless in the event of any accident, injury or any other situation arising due to any action of any subcontractor that I employ. I furthermore agree to comply with all building codes and ordinances as they relate to the work covered in the aforementioned permit.

\_\_\_\_\_  
Homeowner Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date