



HOMEOWNER AGREEMENT

Building Division • 100 N. Wilcox St., Castle Rock, CO 80104
720-733-3527 • buildingcounter@CRgov.com

PERMIT NUMBER: _____ OWNER'S NAME: _____

JOB ADDRESS: _____

PHONE NUMBER: _____ EMAIL: _____

Electrical and plumbing contractors are licensed by the State of Colorado to help ensure that they are competent and capable of meeting the relevant technical and safety standards for your project. Each license type has a defined set of competence criteria that contractors must meet to achieve and maintain a license. The Town of Castle Rock requires electrical and plumbing contractors to be registered prior to doing any work within its boundaries.

General, mechanical and roofing contractors are not licensed by the State of Colorado. The Town of Castle Rock Building Division requires that these contractors be registered through the town prior to doing any work within its boundaries.

The Town of Castle Rock Building Division requires that contractors show proof of current workman's compensation and liability insurance, and current state licensing when required. Using an un-licensed, un-registered or un-insured contractor may lead to unintended consequences. Each contractor should have proof of licensing, registration, insurance and warranty information available to you.

Please initial the numbers below that are applicable for your permit regarding the general contractor and sub-contractors for mechanical, electrical, and plumbing. We cannot accept check marks or exes on a legal form.

- _____ 1. I affirm, as the homeowner, I will be acting as my own **General Contractor**.
I understand how to manage the project and when to request inspections.
- _____ 2. I affirm, as the homeowner, I will do all of my own **mechanical** work.
I understand the correct way to do mechanical work and when to request inspections.
- _____ 3. I affirm, as the homeowner, I will do all of my own **electrical** work.
I understand the correct way to do electrical work and when to request inspections.
- _____ 4. I affirm, as the homeowner, I will do all of my own **plumbing** work.
I understand the correct way to do plumbing work and when to request inspections.

By signing below, I certify that all the work indicated above will be personally performed by me, the homeowner. I will have work inspected prior to covering and upon completion of the project prior to occupancy. All work will be done in accordance with all building codes and ordinances adopted by the Town of Castle Rock.

_____ _____

HOMEOWNER SIGNATURE DATE FOR STAFF USE ONLY

THIS FORM MUST BE SIGNED IN PERSON OR NOTARIZED.

WITNESS MY OFFICIAL HAND AND SEAL.

MY COMMISSION EXPIRES: _____

(SEAL) _____
NOTARY PUBLIC