



# Town of Aberdeen

115 N. Poplar Street  
PO Box 785  
Aberdeen, NC 28315

Planning Department  
Building Inspections

Phone: 910-944-7024  
Fax: 910-944-7459

## CODE ENFORCEMENT CERTIFICATION AS TO STATUS OF LICENSURE: FOR THE OWNER/APPLICANT TO SIGN:

I understand that I am signing this document under oath. I certify that I am making a truthful statement. I have entered into a construction contract where the cost of the undertaking exceeds \$30,000.00. I have read G.S. Section 87.1 as amended July 6, 1992 which is printed on the back of this page. I certify that I am not allowing an unlicensed general contractor to perform the duties of a general contractor, which I understand from G.S. Section 87.0 on the back of this page, includes construction superintending and managing in addition to among other things, signing written contracts. I intend to retail the finished house (or other project) exclusively for my own use: I am not building a "speculation" project with the intention of selling the project once it is completed. I will occupy the property for at least one year following the completion of the construction. I understand that building a "spec" project without proper licensure is a violation of G.S. 87.1 and G.S. 87.13; this may be a criminal offense. Also, I understand that under G.S. Section 87.13.3 the "Homeowner's Recovery Fund", no homeowner acting as a general contractor has any right of recovery.

I have filled out the worksheet/affidavit regarding worker's compensation and I certify either that I am not required by law to carry such coverage or that I will agree to submit certificates of insurance coverage upon demand by the building inspector/code enforcement officer. I understand that I am responsible for ascertaining whether I am obligated by law to obtain worker's compensation insurance and to assure that our insurance coverage is adequate. I have made all reasonable inquiries of the appropriate authorities and/or sought private legal counsel to assure that I am providing all workers' compensation required by law.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Location of Property

Sworn to and subscribed before me this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public