LAPORTE COUNTY BUILDING DEPARTMENT
COUNTY COMPLEX, SUITE 503-A
LAPORTE, INDIANA 46350

OFFICE (219) 326-6808 EXT. 2563

HOME OWNER SIGN OFF

Please note: This office must have the completed sign off sheet at the time the building permit is issued or we will not be able to schedule a rough-in inspection.

JOB SITE INFORMATION:

Homeowner name:_____

Permit number:_____

Address:_____

I am the installer of the following:

_____Foundation &/or Framing _____Insulation

_____Electrical System _____Drywall

_____Plumbing System _____Roof

_____Heating/Air Conditioning System _____Siding

I will not employee contractors for the above mentioned work on this project. The work will be completed by myself, a relative or other non-compensated volunteer(s). I understand hiring an unregistered contractor is a violation of Ordinance 2001-3, which provides for the registration and bonding of contractors in La Porte County, for which I, and the contractor, can be liable for penalties. If I hire a licensed contractor, I agree to notify the La Porte County Building Department and properly update the project file. All applicable Indiana and La Porte County Codes will be followed in this installation and I agree to call for inspection(s) at the appropriate times.

_____ _____
Signature Date