

PLUMBING CONTRACTOR PERMIT AFFIDAVIT

Town of Lowell  
Building Department

License No.: \_\_\_\_\_ Date: \_\_\_\_\_ Permit No.: \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Project Address or Location \_\_\_\_\_

Owner \_\_\_\_\_

General Contractor \_\_\_\_\_

The following work will be performed by the above-mentioned plumbing contractor:

\_\_\_\_\_  
\_\_\_\_\_

The information contained in the completed affidavit is to the best of my knowledge and belief true and correct. I fully understand that any variations or false statements made in this affidavit shall constitute a cause for revocation of this permit and create the potential for legal action.

Contractor's Signature.....To be signed by the License Holder ONLY!  
\_\_\_\_\_

SEAL:

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_ DAY OF \_\_\_\_\_, 20\_\_\_\_

MY COMMISSION EXPIRES: \_\_\_\_\_

\_\_\_\_\_  
(SIGNATURE/NOTARY PUBLIC)