



Town of Redding
Building Department

10 Lonetown Road
Redding Center, CT 06875
Mail: P.O. Box 1161, Redding Center, CT 06875

Tel: (203) 938-2558

Fax (203) 938-4063

Affidavit

The under signed, being duly sworn, deposes and says;

1. That he/she is the owner of the building or structure described on the demolition permit application.
2. That the below said agent is duly authorized for and on behalf of the owner to execute and complete the application.
3. That the work described in the said application is duly authorized by the owner.
4. That the under signed agent is hereby designated as the owner's representative, with whom the Building Department may deal with in respect to the work described in the application.
5. That this authorization shall continue unless revoked by the owner, giving written notice of revocation to the Building Department.
6. That as owner and agent, we hereby accept responsibility for compliance with the State of Connecticut Building Code and The State of Connecticut General Statutes as related to demolition.

Project Address: _____

We hereby certify, under oath, that all information on this form is true and correct.

Owner _____

Agent _____

Subscribed and sworn to,

Subscribed and sworn to,

before me this _____ day of

before me this _____ day of

_____ 20__

_____ 20__

Notary Public/Commissioner of the Superior Court

Notary Public/Commissioner of the Superior Court