



**PLUMBING AFFIDAVIT**  
Development Services Department

STATE OF ILLINOIS  
COUNTY OF DUPAGE

I, the undersigned, am the owner of record of the property commonly known as \_\_\_\_\_, which is subject to Village of Lisle building permit \_\_\_\_\_.

I, the undersigned, do not wish to hire a plumbing contractor and intend to do all plumbing work at the above mentioned address as a homeowner.

I, the undersigned, affirm that the above address will be my primary residence for a minimum of six months after issuance of final occupancy in accordance with the Illinois State Plumbing Code.

DATED this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Owner of Record

\_\_\_\_\_  
Signature of Owner of Record

SUBSCRIBED AND SWORN TO BEFORE ME

this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

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