



CERTIFIED INSPECTOR APPLICATION AFFIDAVIT

NOTICE: This affidavit must be submitted by all prospective inspectors to apply for approval as a certified building inspector in the Multi-Family Residential Inspection Program. All information requested on this form is mandatory.

This is to certify that I am applying to be approved by the City of Doraville to perform inspections pursuant to the process established by the Multi-Family Residential Inspection Ordinance, Sec. 5-72 of the City Of Doraville Code of Ordinances.

This is to certify that I meet the minimum requirements and possess the required credential(s) for being a certified building inspector, as established by the City of Doraville. At a minimum, a certified building inspector shall be an architect or engineer licensed in the State of Georgia or shall hold one of the following ICC certifications: Property Maintenance & Housing Inspector, Building Inspector, or Commercial Combination Inspector.

I certify that I have and will comply with all codes and ordinances adopted by the City of Doraville and the State of Georgia that pertain to the inspection of multi-family rental dwellings and multi-family rental units, or other facility that is leased to a residential tenant or tenants for use as a home, residence, or sleeping unit, within the incorporated limits of the City of Doraville. In the event of determining that further work is necessary to comply with the minimum standards set forth in the code, I will recommend in writing to the property owner, with copy to the Building Official of the City of Doraville, that an acceptable work plan shall be submitted to the Building Official of the City of Doraville outlining the time and scope of work necessary to bring units into compliance.

APPLICANT INFORMATION

Name: _____ Phone: _____

Certification Held: _____ # _____ Exp. _____

GA License Held: _____ # _____ Exp. _____

Company: _____

Address: _____ (no P.O. Boxes) Suite.: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Business License Jurisdiction: _____ # _____ Exp. _____

Applicant Signature: _____ **Date:** ____ / ____ / ____

SUSCRIBED AND SWORN BEFORE ME
ON THIS THE ____ DAY OF _____, 20 ____

NOTARY PUBLIC
My commission expires: ____ / ____ / ____

Submit legible copies of ICC Certificate and/or State License, business license, and photo ID. Applicant must be approved as a certified building inspector PRIOR to conducting any inspections.