

**CITY OF EASTLAKE, OHIO
35150 LAKESHORE BOULEVARD
EASTLAKE, OHIO 44095
440-951-1416 FAX: 440-975-4280**

1309.10 HOMEOWNER'S EXEMPTION FORM

THE PROVISIONS OF THIS CHAPTER SHALL NOT APPLY TO A HOMEOWNER DESIRING TO PERFORM WORK ON HIS OWN PREMISES SO LONG AS SUCH WORK IS ACTUALLY PERFORMED BY THE HOMEOWNER OR MEMBERS OF HIS IMMEDIATE FAMILY AND THE WORK IS PERFORMED WITHOUT COMPENSATION AND ON PREMISES IN WHICH THE HOMEOWNER SHALL BE SUBJECT TO ALL THE PROVISION OF THE BUILDING CODE OF THE CITY OF EASTLAKE, AND TO ALL INSPECTIONS REQUIRED UNDER THE CODES, INCLUDING PERMITS AS OUTLINED IN SECTION 1301.01.

IN THE EVENT A HOMEOWNER HIRES ANYONE TO PERFORM ANY PORTION OF THE WORK, THE HOMEOWNER BECOMES THE GENERAL CONTRACTOR AND WILL BE HELD LIABLE. IN THE EVENT THE HOMEOWNER HIRES A SUB-CONTRACTOR, THAT SUB-CONTRACTOR MUST REGISTER WITH THE BUILDING DEPARTMENT PRIOR TO ANY WORK BEING PERFORMED. IN ADDITION, THE SUB-CONTRACTOR MUST FURNISH THE CITY BUILDING DEPARTMENT AND TAX DEPARTMENT WITH THE NAME AND FEDERAL I.D.# OR SOCIAL SECURITY NUMBER OF THE PERSON(S) HIRED. IF COMPLIANCE IS NOT MET, THE HOMEOWNER CAN BE HELD RESPONSIBLE OR ANY TAXES DUE TO THE STATE OF CITY.

ALL ELECTRICAL WORK MUST BE PERFORMED BY A LICENSED ELECTRICIAN OR INSPECTED AND APPROVED BY A LICENSED ELECTRICIAN HIRED FOR THAT PURPOSE.

THE GENERAL CONTRACTOR IS LIABLE FOR ALL INSPECTIONS TO GUARANTEE THE SAFETY OF THE WORK BEING DONE. ORD. NO. 1998-102 PASSED: 07-14-98.

I HAVE READ AND UNDERSTAND THE ABOVE – AND I UNDERSTAND IT IS MY RESPONSIBILITY TO COMPLY WITH THE CODIFIED ORDINANCES AS THEY WOULD APPLY TO MY APPLICATION.

IF WORK IS BEING PERFORMED BY A RELATIVE – PLEASE INDICATE BELOW HIS NAME AND ADDRESS.

LOCATION _____

NAME OF RELATIVE

APPLICANT'S SIGNATURE

ADDRESS OF RELATIVE

DATE

NAME OF ELECTRICIAN

STATE ID /CERTIFICATION

ADDRESS OF ELECTRICIAN

NOTIFICATION POLICY OF THE BUILDING DEPARTMENT: WE ALSO WANT TO INFORM THE HOMEOWNER THAT HE/SHE WILL BE HELD LIABLE FOR ANY INJURIES OCCURING ON SAID PROPERTY DURING THE CONSTRUCTION PERIOD.