



LAS ANIMAS COUNTY
**BUILDING AND ZONING
ENFORCEMENT**

200 East First Street Room 110
Trinidad, Colorado 81082

lasanimascounty@yahoo.com

CERTIFICATION FOR OWNER GENERATED PERMITS

BY SIGNING THIS CERTIFICATION, I ACKNOWLEDGE AND STATE THAT I WILL PERFORM ALL CONSTRUCTION WORK AS AN "OWNER" TO LAS ANIMAS COUNTY ON THE PROPERTY LOCATED AT:

_____ UNDER

PERMIT NUMBER: _____.

I FURTHER ACKNOWLEDGE AND STATE THAT I PLAN TO DO ALL THE WORK MYSELF. I FULLY UNDERSTAND THAT IF I SHOULD EMPLOY ANY PERSON OR ENTITY TO ASSIST ME IN THE WORK, THAT I MAY BE REQUIRED, UNDER COLORADO STATE LAW, TO OBTAIN WORKMANS COMPENSATION INSURANCE TO PROTECT SUCH EMPLOYEES, AND THAT I MAY BE EXPOSING MYSELF TO POTENTIAL SEVERE LIABILITY AND/OR PENALTIES IF I DO NOT COMPLY WITH SAID LAW.

I FURTHER UNDERSTAND THAT IF I RETAIN A COMPANY TO PERFORM SOME OF THE WORK, I WILL INSURE THAT THE COMPANY POSSESSES A VALID CONTRACTOR'S LICENSE ISSUED BY THE LAS ANIMAS COUNTY BUILDING DEPARTMENT. IF I HIRE AN INDIVIDUAL TO PERFORM ANY OF THE WORK I WILL INSURE THAT SUCH PERSON POSSESSES THE APPLICABLE CRAFTSMAN LICENSE.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE FOREGOING DOCUMENT AND AGREE TO COMPLY WITH ITS CONTENTS.

DATE

SIGNATURE OF APPLICANT