



**CAMBRIDGE GUERNSEY COUNTY HEALTH DEPARTMENT**

**A Combined General Health District**

*"Established -1950"*

**Public Health**  
Prevent. Promote. Protect.  
**Cambridge-Guernsey County**

326 Highland Avenue  
Cambridge, OH 43725  
740.439.3577 Fax: 740.432.7463

State of Ohio:

: SS:

Guernsey County:

**Cambridge Guernsey County Health Department  
Homeowner Affidavit**

Now comes \_\_\_\_\_ herein and having been duly cautioned and sworn; states as follows:

That he/she is or will be a resident of Guernsey County, Ohio.

That he/she is the owner of the premises and is/will be the occupant of said residence located at:

\_\_\_\_\_

That he/she will perform the work himself/herself; that he/she has all equipment available to install the plumbing and everything needed to make proper tests; that he/she has the proper equipment; and ability to perform said work in accordance with the provisions of Ohio Plumbing Code, Ohio Administrative Code Chapter 4101:3 and the applicable rules of the Cambridge Guernsey County Health Department.

That this affidavit is made so that the Cambridge Guernsey County Health Department may issue a permit for the performance of this work to this affidavit according to the application filed.

Further affiant sayeth naught.

\_\_\_\_\_

Signature

Sworn to and subscribed in presence this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

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