

ELECTRICAL SELF CERTIFICATION AFFIDAVIT

Please check one box. Is a Certificate of Occupancy involved? Yes ☐ No ☐

Date of completion: _____ Date job started: _____

Electrical Control #: _____

Address: _____
(must be the same as the filing address on record)

Statement:

State of New York)
County of) ss.:

I, _____, hereby certify that the work under the above control number is complete in accordance with the New York City Electrical Code. I am aware that the Commissioner will rely upon the truth and accuracy of this statement. I hereby state that information is correct and complete to the best of my knowledge. I further realize that any falsification of any statement is a misdemeanor under Section 28-211.1 of the Administrative Code and punishable by a fine or imprisonment or both and that any such falsification may render me subject to legal and disciplinary action by the Department of Buildings and other appropriate authorities.

Licensee's Signature

Licensee's Number

Firm's Name

Firm's Number

Date of Statement

The Licensee's Seal: