



**Contractor's Affidavit: Substantial Improvement or
Repair of Substantial Damage**

Property Address: _____

Parcel Tax ID Number: _____

Owner's Name: _____

Owner's Address/Phone/Email: _____

Contractor: _____

Contractor's Address/Phone/Email: _____

Contractor's License Number: _____

Date of Contractor's Estimate: _____

I hereby attest that I have personally inspected the building located at the above-referenced address and discussed the nature and extent of the work requested by the owner, including all improvements, rehabilitation, remodeling, repairs, additions, and any other form of improvement.

At the request of the owner, I have prepared a cost estimate for all of the improvement work requested by the owner and the cost estimate includes, at a minimum, the cost elements identified by the St. Mary's County Department of Land Use & Growth Management that are appropriate for the nature of the work. If the work is repair of damage, I have prepared a cost estimate to repair the building to its pre-damage condition.

I acknowledge that if, during the course of construction, the owner requests more work or modification of the work described in the application, that a revised cost estimate must be provided to the St. Mary's County Department of Land Use & Growth Management, which will re-evaluate its comparison of the cost of work to the market value of the building to determine if the work is substantial improvement.

Such re-evaluation may require revision of the permit and may subject the property to additional requirements.

I also understand that I may be subject to enforcement action and/or fines if inspection of the property reveals that I have made or authorized repairs or improvements that were not included in the description of work and the cost estimate for that work that were the basis for issuance of a permit.

IN WITNESS the hand and seal of the Contractor.

Print Name

STATE OF MARYLAND COUNTY OF ST. MARY'S, to wit:

Sworn to and subscribed before me by _____ (affiant)

on this _____ day of _____, 20____.

(Notary Seal)

Signature of Notary Public: _____

Notary Public Name: _____

My Commission expires: _____