

DEFECTIVE CHINESE DRYWALL AFFIDAVIT

Please be advised that the permit application and documents submitted for the property located at ______ under process number ______ is for the repair and replacement of defective Chinese drywall. The existing drywall was confirmed by testing (documentation attached) to be defective Chinese Drywall and the scope of the permit application is limited to its replacement and does not include additional improvements or alterations.

Check and initial if the following applies to the application:

□ _____ The primary structure on the property is a Single Family Residence for my own use and occupancy. These repairs are not covered under my homeowner's insurance policy and/or any builder's warranty or liability insurances. Therefore, I am paying all costs associated with the repairs without any reimbursement and I ______, property owner, am requesting that this permit be issued at no charge.

I certified that all the forgoing information is accurate.

Signature of Property Owner

Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE

| Sworn | to | and | subscribed | before me | this | |
|-------|----|-----|------------|-----------|------|--|
| | | | | | | |

day of _____, 20____,

By _____

| Personally Known | |
|------------------|--|
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