COUNTY OF NEVADA
COMMUNITY DEVELOPMENT AGENCY

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Trisha Tillotson, Community Development Agency Director

Agricultural Commissioner | Building Department | Environmental Health | Planning Department | Dept. of Public Works

AFFIDAVIT FOR PERMISSION TO COPY OFFICIAL RECORD(S)

Requestor Name: _____ Phone: _____

Address: _____
Street City State Zip

DESCRIPTION OF RECORD(S) REQUESTED

SITE ADDRESS: _____
Street *City* *State* *Zip*

PERMIT #: _____ APN #: _____

PORTION OF RECORD(S) TO BE COPIED: _____ PURPOSE: _____

DECLARATION

I, _____, declare as follows:
(Name of person making request)

1. That I have requested a copy of the above described building record.
2. The copy of the record shall only be used for the maintenance, operation and use of the building/system.
3. I acknowledge that drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed or registered professional of record.
4. I have been informed that subdivision (a) of Section 5536.25 of the Business and Professional Code states that a licensed professional who signs plans, specifications, reports or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports or documents where the subsequent changes or uses, including changes and uses made by State or local governmental agencies, are not authorized or approved by the licensed professional who originally signed the plans, specifications, reports or documents, provided that the professional service rendered by the professional who signed the plans, specifications, reports or documents was not also a proximate cause of the damage.

I declare under penalty of perjury under laws of the State of California that the foregoing is true and correct, and that if called upon to do, I could and would testify competently thereto.

_____	_____	_____
Print Name	Signature	Date

I agree to give permission for the above mentioned record(s) to be copied:

_____	_____	_____
Design Professional – Print Name	Signature	Date
Property Owner – Print Name	Signature	Date