

AFFIDAVIT OF AUTHORIZED CONSTRUCTION (COVID-19)



City of Bothell™

AFFIDAVIT OF COVID-19 SAFETY COMPLIANCE

PROJECT INFORMATION

1. Permit Number(s): _____ 2. Project Name: _____

AFFIDAVIT

The undersigned, being first duly sworn on oath, deposes and says:

- A. I am over the age of eighteen (18) years and competent to be a witness herein.
- B. I am authorized to provide this affidavit for the referenced permit.
- C. I attest I have read and implemented all requirements of the Washington State Governor's Phase 2 Construction Restart [COVID-19 Job Site Requirements](#).
- D. I, or my designee, have posted written compliance with the Phase 2 COVID-19 Job Site Requirements prior to performing any work. I will ensure that all requirements will remain in affect while work is occurring.

I certify under penalty of perjury under the laws of the State of Washington that the information presented herein in this affidavit and project form is accurate and true.

Affiant's Name and Title
(printed): _____

Affiant's Signature(s): _____

Company: _____

Date: _____

Place (City/State): _____

In order to have the City conduct inspections on your project, you must complete this affidavit form, submit it to permitsvcs@bothellwa.gov, and receive confirmation of acceptance prior to your inspection request.