

**Statement of FACT
By Owner Desiring To Construct
His Own Residence**

State of Florida

County of Highlands

Before me this day personally appeared _____ who, being duly sworn, deposes and say's as follows, "**I have read and fully understand the provisions of this instrument.**"

1. That the Owner and he alone shall act as the contractor for all phases of construction.
2. That the owner will comply with all provisions of the Florida Building Code pertinent to the building.
3. That in the event various phases of construction are subcontracted, he will personally supervise such work.
4. That in the event the Building Inspector shall require corrections to be made, the owner will assume full responsibility to insure they are made, and upon completion will call for a re-inspection before proceeding with the building.
5. That the owner shall assume full responsibility for the construction and will not expect supervision of his work from the Highlands County Building Department.
6. That prior to final inspection any additional fee's, including re-inspection fee's, must be paid in full. A verbal request from this office, by phone or in person, shall constitute an official notice to pay additional fees.
7. That the Owner shall comply with all municipality, state and federal laws in regard to Social Security, Workman's Compensation, General Liability, Etc., where applicable.
8. That the Owner shall comply with all safety codes issued by the Florida Industrial Commission.
9. The Owner hereby states that he has not constructed a home for his own use and occupancy Within {1} year. **The Owner hereby states the home is not being constructed with the intent to rent, sell, or lease,** but rather is being constructed for his own use and occupancy.

The undersigned further agrees that he shall, should he be unable to comply with above requirements, hire a licensed, insured Building Contractor to take over and complete the job in strict compliance with the Florida Building Code.

Sworn to an subscribed before me,
this ____ day of _____ A.D., 20____ by _____
Who is personally known to me or who has produced
_____ as identification.

Owner Signature

Print Owner Name

Notary Public State of Florida