



**Building Department  
CITY OF GOSHEN**

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**PLAN CERTIFICATION**

Date: \_\_\_\_\_

State Release # \_\_\_\_\_

I, \_\_\_\_\_, certify that these drawings  
(printed name)

submitted today are identical to those submitted for State Plan Review,  
for \_\_\_\_\_ and will be the Construction  
(address)

drawings used for the construction of this building. I also understand that,  
if it is determined that these plans are not identical, all permits obtained as  
as result of their submittal may be revoked.

\_\_\_\_\_  
(signature)

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_.

Notary Public: \_\_\_\_\_

County of Residence: \_\_\_\_\_

Commission Expires: \_\_\_\_\_