

**PRIVATE PROVIDER
PLAN COMPLIANCE AFFIDAVIT**

Process/Permit # _____ Address _____

Private Provider Firm: _____

Private Provider: _____

Address: _____

Phone: _____

Email: _____

Notice - A private provider may only perform building code plan review services that are within the disciplines covered by that person's licensure or certification.

I hereby certify that to the best of my knowledge and belief the plans submitted were reviewed for and are in compliance with the Florida Building Code and all local amendments to the Florida Building Code by the following affiant, who is duly authorized to perform plans review pursuant to Section 553.791, Florida Statute and hold the appropriate license or certificate.

Discipline(s) (check all that apply): Building Structural Electrical Mechanical Plumbing

Plan sheets: _____

Florida Architect or Engineer Certification #: _____

Signature of Private Provider: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____ 20____, by: _____

[] Personally known [] Produced Identification – Type of Identification _____

and who being fully sworn and cautioned, state that the foregoing is true and correct to the best of his/her knowledge or belief.

Signature of Notary Public

Seal