

## NOTICE TO BUILDING OFFICIAL FOR USE OF PRIVATE PROVIDER

The building plans review and/or inspection services provided by the Private Provider is limited to building code compliance and does not include the applicable review for fire protection and fire safety codes, site work, public works, land use, zoning, floodplain, environmental and architectural (ARB), or other codes.

Permit Number: \_\_\_\_\_

Project Name: \_\_\_\_\_

Parcel Tax ID: \_\_\_\_\_

By checking this box, I hereby request to utilize the concierge service, which means my permit will be issued as quickly as possible, my job will not be audited and my CO/CC will be issued as soon as the final paperwork is received. Additionally, I will receive a Dedicated Support Specialist who will be available by cell phone and+ email should I encounter any delays in the process outlined above. Furthermore, by checking this box, I am gladly forfeiting any reduction of fees outlined in 553.791 because I understand the extra value of this added service.

By checking this box, I am not interested in the concierge service above, and am aware of the requirements and minimum inspection requirements of the jurisdiction. Additionally, I understand that I will be required to submit a survey that must be approved by Zoning and Engineering prior to pouring my slab. Additionally, per F.S. 553.791(9), I must hold up my job so the local jurisdiction may audit after my private provider has performed their inspection. Additionally, any deficiencies found must be inspected by the private provider and then a re-audit performed after the private provider has performed their reinspection.

Services to be provided: Plans Review: \_\_\_\_ Inspections: \_\_\_\_

Note: If the notice applies to either private plan review or private inspection services the Building Official may require, at his or her discretion, the private provider be used for both services pursuant to Florida Statute Section 553.791(2).

If Private Provider has not chosen the concierge service above, a survey must be submitted and approved by Zoning and Engineering prior to the pouring of the slab. If the concierge service above has been selected above, our inspection team will perform a pre-pour inspection to verify the location and elevation of the slab.

I, \_\_\_\_\_, the fee owner of the property, affirm that I have entered into a contract with the Private Provider indicated below to conduct the services indicated above. I also agree to the terms listed above regarding concierge services. I am certifying by signing the document below that I am authorized to sign this form.

Private Provider Firm: \_\_\_\_\_

Private Provider (Qualifier for the Firm): \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address : \_\_\_\_\_

Florida License, Registration or Certificate number: \_\_\_\_\_

I have elected to use one or more Private Providers to provide building code plans review and/or inspection services for the building or structure that is the subject of the enclosed permit application, as authorized by Section 553.791, Florida Statutes. I understand that the local building official may not review the plans submitted or perform the required building inspections to determine compliance with the applicable codes, except to the extent specified in said law. Instead, plans review and/or required building inspections will be performed by licensed or certified personnel identified in the application.

**Oath or Affirmation:**

Pursuant to Section 117.05(13)(a), Florida Statutes, the following notarial certificate is sufficient for an oath or affirmation:

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me by means of [  ] physical presence or [  ] online notarization, this (numeric date) this (numeric date) day of (month), (year), by (name of person making statement)..

(NOTARY SEAL)	(Signature of Notary Public-State of Florida) (Name of Notary Typed, Printed, or Stamped)
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Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_