

**Notice to Building Official**  
**Owner Authorization of Contractor for Use of Private**  
**Provider 553.791**



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

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

I \_\_\_\_\_ (fee owner):

\_\_\_\_ (Initial or N/A) Affirm I have entered into a contract with the Contractor indicated below to provide the construction services for project indicated above.

\_\_\_\_ (Initial or N/A) Acknowledge the tenant has entered into a contract with the Contractor indicated below to provide the construction services for project indicated above.

Contractor Name: \_\_\_\_\_

Florida Contractor License #: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Alternative plans review and inspection 553.791

\_\_\_\_ (Initial or N/A) **As the fee owner I have elected:**

\_\_\_\_ (Initial or N/A) **As the fee owner I acknowledge the tenant has elected:**

To use one or more private providers to provide building code plans and/or inspection services on the building that is the subject of the enclosed permit application, as authorized by s.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 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. The law requires minimum insurance requirements for such personnel, but I understand that I may require more insurance to protect my interests. By executing this form, I acknowledge that I have made inquiry regarding the competence of the licensed or certified personnel and the level of their insurance and am satisfied that my interests are adequately protected. I agree to indemnify, defend, and hold harmless the local government, the local building official and their building code enforcement personnel from any and all claims arising from my use of these licensed or certified personnel to perform building code inspection services with respect to the building that is the subject of the enclosed permit application.

**For an acknowledgment in an individual capacity:**

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zipcode \_\_\_\_\_  
Phone with Area Code: \_\_\_\_\_  
STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of 20\_\_\_\_, by \_\_\_\_\_ (name of person acknowledging.)  
(Seal)

Personally known: \_\_\_\_\_  
OR Produced Identification: \_\_\_\_\_ Type of Identification Produced: \_\_\_\_\_  
\_\_\_\_\_ Signature of Notary Public  
Print, Type/Stamp Name of Notary \_\_\_\_\_

**For an acknowledgement in a corporation capacity:**

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zipcode \_\_\_\_\_  
Phone with Area Code: \_\_\_\_\_  
STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of 20\_\_\_\_, by \_\_\_\_\_ (name of officer or agent) an authorized signer as \_\_\_\_\_ (title of officer or agent) of \_\_\_\_\_ (name of corporation) on behalf of the corporation.  
(Seal)

Personally known: \_\_\_\_\_  
OR Produced Identification: \_\_\_\_\_ Type of Identification Produced: \_\_\_\_\_  
\_\_\_\_\_ Signature of Notary Public  
Print, Type/Stamp Name of Notary \_\_\_\_\_

**For an acknowledgement for a partnership capacity:**

Signature \_\_\_\_\_  
Print Name \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City/State/Zipcode \_\_\_\_\_  
Phone with Area Code: \_\_\_\_\_  
STATE OF \_\_\_\_\_  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of 20\_\_\_\_, by \_\_\_\_\_ (name of acknowledging partner or agent), a partner on behalf of \_\_\_\_\_ (name of partnership), a partnership.  
(Seal)

Personally known: \_\_\_\_\_  
OR Produced Identification: \_\_\_\_\_ Type of Identification Produced: \_\_\_\_\_  
\_\_\_\_\_ Signature of Notary Public  
Print, Type/Stamp Name of Notary \_\_\_\_\_