

Community Development Department
1776 Independence Lane, 2nd Floor
Maitland, FL 32751



PLAN COMPLIANCE AFFIDAVIT

§553.791(6), F.S.

Project name: _____ **Address:** _____

Check all permits: Primary Sub Trade

Stand-alone permit (Provide separate NTBO) Revision to permit no: _____

Use one Affidavit for each Review Discipline only.

Private Provider's Firm:

I HEREBY CERTIFY that, to the best of my knowledge and belief, the plans submitted for the above-referenced project comply with the Florida Building Code and all local amendments thereto. **I ALSO CERTIFY** that the plans were reviewed by myself personally or by my Duly Authorized Representative* identified below, both of whom being authorized to perform plans review under Section 553.791, F.S. and holding the appropriate license or certificate.

■ Private Provider: _____ FL Lic. #: _____ L _____

Discipline Reviewed: BLDG RES ELECT MECH PLUMB Seal/Signature/Date

(Select profession) Architect (Sign & Seal above) or Professional Engineer (Sign & Seal above) or

Building Code Administrator (Sign, Date and Notarize immediately below)

Signature: _____ Date: _____

STATE OF _____ COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____

Name of Notary Public: _____ Signature of Notary: _____

Personally known to me or Produced identification (type) _____ (NOTARY SEAL)

■ Duly Authorized Representative: *If utilized for the Plan Review, sign and notarize below.

Name of person reviewing the plans: _____ FL License #: _____

Signature of reviewer: _____ Date: _____

STATE OF _____ COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____

Name of Notary Public: _____ Signature of Notary: _____

Personally known to me or Produced identification (type) _____ (NOTARY SEAL)