



Planning & Development

PRIVATE PROVIDER

Compliance Affidavit

City of Tampa Permit No.: _____

Project Address: _____ Project Folio No.: _____

Private Provider Firm: _____ License No.: _____

Office Phone: _____ Cell Phone: _____

Email: _____

Select all that apply:

- Construction Plans
 Resubmittals (Response to deficiencies)
 Revisions (changes to original scope)

I HEREBY CERTIFY that to the best of my knowledge and belief, the documents submitted for the above referenced project were reviewed according to, and are in compliance with, the Florida Building Code and all local amendments thereto, either by myself or by the affiant identified below, who is duly authorized to perform plans review pursuant to Section 553.791, Florida Statutes, and holds the appropriate license or certificate:

Printed or Typed Name of Private Provider

Signature of Private Provider

NOTARY

STATE OF FLORIDA
COUNTY OF _____

SWORN TO (OR AFFIRMED) AND SUBSCRIBED before me this _____ day of _____,

20____, by _____ (name of person making statement).

(NOTARY SEAL)

Signature of Notary Public – State of Florida

Printed or Typed Name of Notary Public