

## COVID-19 TEMPORARY RELIEF MEASURE

### INSPECTION BY AFFIDAVIT FOR BUILDING TRADE PERMITS (BTR RECORDS)

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#### PROJECT INFORMATION

Project Number: \_\_\_\_\_

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

Scope of Work: \_\_\_\_\_

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### VERIFICATION

I hereby verify that I am a (check one of the following):

- Licensed Contractor of Record
- Registered Architect or Engineer in the State of Florida of Record

I hereby certify that I personally inspected the premises at the project address listed above on the date of this statement. In my professional opinion, based on my knowledge, information, and belief, I have determined the work performed meets the minimum requirements set forth in the Florida Building Code. I also understand that I will only use this affidavit during the COVID-19 Emergency period.

I have uploaded photo documentation of the items inspected.

Date: \_\_\_\_\_

License No.: \_\_\_\_\_

\_\_\_\_\_  
License Holder Name (Printed)

\_\_\_\_\_  
License Holder Name (Signature)

\_\_\_\_\_  
License Holder Phone Number

\_\_\_\_\_  
License Holder Email Address