



# PRIVATE PROVIDER INSPECTION PRE-PERMIT AFFIDAVIT 2010 FLORIDA BUILDING CODE

## Job Information

Permit #: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Legal Address of Site: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Contractor (Company Name): \_\_\_\_\_

## Contact Information

Private Provider Name / License #: \_\_\_\_\_

Private Provider Company Name: \_\_\_\_\_

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

Phone/Fax/E-mail: \_\_\_\_\_

## Job Description

Description of work that will be inspected, include inspections for electric, plumbing, mechanical, or fire related work : \_\_\_\_\_

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## Pre-permit Acknowledgement

A copy of all inspection reports will be submitted, at regular intervals, to the Building Services Division for review

A final certification letter will be submitted for review by the Building Services Division before completion of the permit. The letter will meet the following criteria:

The final certification letter shall state that the Design Professional has made all inspections personally, or a duly appointed representative that is employed by the design professional, has performed the inspections on their behalf. The letter shall bear the Design Professional's signature, date, seal and statement that all phases of the construction have been inspected under his/her supervision and the construction is consistent with the plans and specifications outlined on his/her sealed construction documents.

The City's "Private Provider Completion" form may be submitted in lieu of the final certification letter.

**Regulations and Information**

1. The City of Marco Island Building Services Division is regulated by the 2010 Florida Building Code. For more information about the code or to purchase the code visit <http://www.floridabuilding.org>
2. The City of Marco Island Building Services Division is further regulated by City of Marco Island Ordinance, Chapter 6, Article IV, Sec. 6-111.

**Private Providers Certification**

I certify that all the foregoing information is accurate and that all work must be done in compliance with all applicable laws.

\_\_\_\_\_  
Print Name of Licensed Inspector / License #

\_\_\_\_\_  
Signature of Inspector

\_\_\_\_\_  
Date

(Seal, if applicable)