



BEACH
Building Division
904.247.6235

ALTERNATIVE PLANS REVIEW AND INSPECTION SERVICES PLAN COMPLIANCE AFFIDAVIT

Previous Form Number 9B-3.053-2002-02
11 North Third Street, Jacksonville Beach, FL 32250
building@jaxbchfl.net | www.jacksonvillebeach.org/PPP

Effective Date 1-1-2025

Private Providers performing plans review under FS §553.791 shall prepare and submit this form along with a 'List of Approved Construction Documents'.

PROJECT INFORMATION

Project Name _____ Parcel Tax ID _____

Job Address _____

PRIVATE PROVIDER IDENTIFICATION

Firm Name _____

Firm Mailing Address _____

Telephone No. _____ E-Mail Address _____

Firm Qualifier Name _____ Qualifier License No. _____

I, HEREBY CERTIFY UNDER OATH that to the best of my (the qualifying Building Code Administrator, Architect or Engineer) 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 other applicable codes, either by myself (the affiant) or by the Duly Authorized Representatives listed below who is(are) authorized to perform plan review pursuant to FS §553.791, and hold the appropriate licensure and/or certificates.

DULY AUTHORIZED REPRESENTATIVES (Pursuant to F.S. Ch. 468, 471 and/or 478)

Print Name	License Number(s)	Trade/Discipline	Plans Examiner Signature

NOTARIZED SIGNATURE OF PRIVATE PROVIDER

NOTARY SEAL/STAMP

Private Provider Signature _____ Date _____

STATE OF FLORIDA, COUNTY OF DUVAL

Before me personally appeared _____, known to be the [☐] individual owner(s) or as
_____ on behalf of _____ [☐] Corporation or [☐] Partnership, registered in

the state of _____, who [☐] is/are personally known to me or produced valid [☐] State-issued Driver License or [☐] Identification Card(s) [☐] Passport(s) and/or [☐] Branch of the US Armed Forces ID Card(s) who executed and acknowledged this instrument was performed under his/her free act and deed and/or of said entity.

WITNESS my hand and official seal this ____ day of _____, 20____, at Jacksonville Beach, County and State aforesaid.

NOTARY PUBLIC SIGNATURE, COMMISSIONED NAME AND STAMP

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A list of approved construction documents shall be submitted along with an executed 'Plan Compliance Affidavit'. when a Fee Owner or Fee Owner's Contractor elects to use a private provider to perform alternative plans review services. A new (updated) list shall be *required* in the event that subsequent reviews and submissions occur. Use multiple pages if necessary.

Permit Number	Job Address
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☐ **Initial** ☐ **Resubmittal** (response to deficiencies) ☐ **Revisions** (change to original scope) ☐ **Deferred**
☐ **Other** (Describe in detail)

[illegible]

WET OR DIGITAL SEAL

Date _____