



CITY OF MIAMI SPRINGS

BUILDING DEPARTMENT

201 Westward Drive, Second Floor Miami Springs, FL 33166

Office: 305-805-5030 Fax: 305-805-5036 www.miamisprings-fl.gov



AFFIDAVIT AUTHORIZING SUBMITTAL OF SCAN PLANS AND CONSTRUCTION DOCUMENTS IN LIEU OF DIGITAL SIGNED AND SEALED SET.

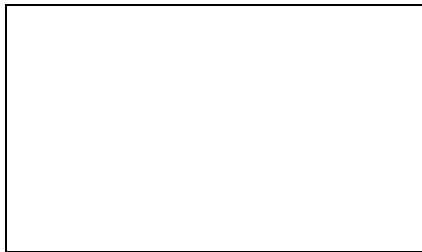
JOB ADDRESS: _____

PROJECT NAME: _____

PLAN REFERENCE/JOB IDENTIFICATION NUMBER FROM NUMBER FROM TITLE BLOCK:

I, (print full name) _____ Design Professional of Record with license number # _____ with the Firm (Name) _____, hereby authorize the submittal of scanned plans and construction documents in lieu of a digital signed and sealed set. I affirm that the scanned files submitted for project referenced above are an exact and accurate duplicate of the complete hardcopy set of plans signed and sealed by the undersigned. I understand that I am the custodian of all original records and must make the documents available for inspection upon request of the Building Official or his designee.

I also hereby acknowledge that if there are any discrepancies between the two versions, the review process for said project will be terminated, become null and void, and require re-application under a new permit number. This affidavit will apply and must be submitted throughout the life of the project including initial submittal, re-works, revisions, shop drawings, etc. during this emergency period.



Designer Professional of Record Signature: _____

Designer Professional of Record Name: _____

Designer Professional of Record Phone: _____

Design Professional of Record Email: _____

Architect/Engineer of Record Signature & Seal

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____ day of _____, 20____,

by _____

Signature of Notary Public _____

Print Name _____

(NOTARY SEAL)

Personally known _____ or Produced Identification (TYPE) _____