

# Monroe County Growth Management Division - Building Department PRIVATE PROVIDER INFORMATION For OWNER AND CONTRACTOR

Effective 7/1/2017

In 2002 House Bill 1307 became law to allow a building owner to hire a private service ("provider") to provide plans review and/or inspection services. The "provider" can review the construction documents and certify them as being in compliance with the applicable building codes. In addition, the "provider" could perform code inspections during the construction of the building. The primary purpose for this alternate plan review and/or inspection process was to expedite the permitting and inspection process.

#### Permit Application Submission Procedures where Private Provider Services Employed:

- Private Provider must be registered with Contractor Licensing in the Building Department
- Building Permit Application Requirements:
  - a. Building Permit Application, noting Private Provider services (Plan Review and/or Inspections)
  - b. Required Monroe County form "Notice to Building Official of Use of Private Provider"
  - c. Provide "Plan Review Executed Affidavit" by Private Provider (if plan review services were performed)
  - d. Two (2) sets of plans with all required outside agency approvals. The following outside approvals may be required:
    - i. U.S. Fish & Wildlife
    - ii. Florida Keys Electric Co-op
    - iii. Florida Keys Aqueduct Authority (for Commercial only; not applicable for Residential)
    - iv. Health Department (HRS) or wastewater treatment provider
    - v. Department of Environmental Protection
    - vi. Army Corps of Engineers
  - e. Building Permit Application fee according to Fee Schedule
- If all items listed above are complete and verified the application will be assign a building permit number.
- Plan Review will be performed by the following departments as required: Planning and Environmental Resources, Fire Marshal, County Engineer, Floodplain Management (FEMA).
- If Private Provider is performing plan review and all approvals have been issued by the appropriate departments listed above the building department will review for permit fee determination specific to the job, in accordance with FS 553.791(7)(a). When Private Provider is performing only inspection services, the Building department will perform plan review and determine permit fees, in accordance with FS 553.791(7)(a).
- The contractor's contractual or legal obligations are not relieved by any action of the "private provider".

#### Adding Private Provider Services Employed After Permit Issuance:

- Private Provider must be registered with Contractor Licensing in the Building Department
- Submit the "Notice to Building Official of Use of Private Provider", indicating inspection services will be provided, no less than seven (7) business days prior to first scheduled Inspection (per FS 553.791(4)).
- If all items listed above are complete and verified the permit will be reissued

#### PERMITTING TIME FRAME ACKNOWLEDGMENT

I am applying for a Monroe County building permit under the "Private Provider" section FS 533.791(7)(a)-(d). I understand that my complete application package will be submitted at the building department. At that time, my application will receive a tracking number so that plan review can be performed by Planning, Environmental Resources, Floodplain Management, Fire Marshal and County Engineer as applicable. Upon approval of the LDR Compliance Review, this application will be submitted to the Building Department for review. At this time, I further understand that under the Florida Building Code the <u>Building Department</u> has thirty (30) days to complete their review and issue the requested permit.

| Date           | Print Name  |
|----------------|-------------|
| Acknowledged   |             |
| <b>5</b> ————— | (Signature) |



### Monroe County Growth Management Division Building Department

## Notice to the Building Official of Use of Private Provider (Required Two Page Form)

Effective 7/1/2017

NOTE: FS 553.791(4)"A fee owner or the fee owner's contractor using a private provider to provide building code inspection services shall notify the local building official at the time of permit application, or no less than 7 business days prior to the first scheduled inspection..."

| Permit #  | Date:  |                      |
|---|--|----------------------|
| Site Address:   |  |                      |
| Site RE #:  |  |                      |
| Owner Name :  |  |                      |
| Contractor:   |  |                      |
| may require, at his or her discretion, the private 553.791(2)(a) Florida Statute. | eview Only Inspections Only Both review and/or private inspection services the Building e provider to be used for both services pursuant to Se ith the Private Provider indicated below to conduct the | g Official<br>ection |
| indicated above.  |  |                      |
| Private Provider Firm:  |  |                      |
| Private Provider:   |  |                      |
| Address:  |  |                      |
| Telephone: ()Email A  | Address:   |                      |
| Florida License, Registration or Certificate #                                    | #:   |                      |

#### Notice To The Building Official Of Use Of Private Provider - Owner Affidavit

I, the fee owner, have elected to use one or more private providers to provide building code plans review and/or inspection services on the building that is the subject of the enclosed permit application, as authorized by s. 553.791, Florida Statutes.

- I understand that the local building official may not review the plans submitted or perform the required building
  inspections to determine compliance with the applicable codes, except to the extent specified in said law. Instead, plans
  review and/or required building inspections will be performed by licensed or certified personnel identified in the
  application.
- The law requires minimum insurance requirements for such personnel, but I understand that I may require more
  insurance to protect my interests. By executing this form, I acknowledge that I have made inquiry regarding the
  competence of the licensed or certified personnel and the level of their insurance and am satisfied that my interests are
  adequately protected.
- I agree to indemnify, defend, and hold harmless the local government, the local building official, and their building code enforcement personnel from any and all claims arising from my use of these licensed or certified personnel to perform building code inspection services with respect to the building that is the subject of the enclosed permit application.
- I understand the Building Official retains authority to review plans, make required inspections, and enforce the applicable codes within his or her charge pursuant to the standards established by s. 553.791, Florida Statutes.
- For new construction or elevated additions, upon approval of the inspection which establishes the lowest floor elevation
  in AE flood zones or the bottom of the lowest horizontal structural member in VE zones, I understand I must notify the
  Building Department liaison/staff member and submit within 21 days of this passed inspection a Preliminary Certificate
  of Elevation. I understand no further inspections will be allowed to be scheduled after 21 days unless a Preliminary
  Certificate of Elevation has been received and approved by the Floodplain Management Department.
- If I make any changes to the listed private providers or the services to be provided by those private providers, I shall, within 1 business day after any change, update this notice to reflect such changes.
- The building plans review and/or inspection services provided by the private provider is limited to building code compliance and does not include review for fire, engineering, land use, environmental, flood or other codes.

| INDIVIDUAL   | CORPORATION                                  | PARTNERSHIP                              |  |
|--|--|--|--|
|  | (Print Corporation Name)                     | (Print Partnership Name)                 |  |
|  | By:  | By:                                      |  |
| (Signature)  | (Signature)                                  | (Signature)                              |  |
| Print  | Print  | Print                                    |  |
| Name:  | Name:  | Name:                                    |  |
|  | Its:   | Its:                                     |  |
| Address:   | Address:                                     | Address:                                 |  |
| Telephone No.:   | Telephone No                                 | Telephone No.:                           |  |
| STATE OF   | COUNTY OF                                    | ,  |  |
| Before me, this day of, 20,  | Before me, this day of, 20 personally        | Before me, this day of, 20, personally   |  |
| personally appeared  | appeared                                     | appeared,                                |  |
| who  | of,  | partner/agent on behalf of               |  |
| executed the foregoing instrument, and                             | acorporation, on                             | ,  |  |
| acknowledged before me that same                                   | behalf of the state corporation, who         | a <b>partnership</b> , who executed the  |  |
| was executed for the purposes therein                              | executed the foregoing instrument,           | foregoing instrument and acknowledged    |  |
| expressed.   | acknowledged before me that same             | before me that same was executed for the |  |
|  | executed for the purposes therein expressed. | purposes therein expressed.              |  |
| Personally known; d Produced identification Type of identification |  |  |  |
|  | <br>Print Name                               | My commission expires:                   |  |
| Notary Public: NOTARY STAMP  |  |  |  |