

## **Private Provider Program**

## **BUILDING DEPARTMENT**

Revision Date: 10/01/2025 Form I.D. Number: 098.A4

## FEE OWNER'S AUTHORIZATION TO USE PRIVATE PROVIDER

FSS 553.791(4)

This form is required whenever a property owner grants authority to their **tenant** or **general contractor** to use a Private Provider for building code plan review and/or inspection services in lieu of the City of Coral Springs Building Department. Specifically, this includes authorization to sign and submit the Notice to Building Official (NTBO). This form must be submitted together with the NTBO. **NOTE**: If Authorized Signatories cannot be verified through FL Division of Corporations (sunbiz.org), submit corporate documents.

Property Address:	Permit Number:
Description of Work:	
Select one of the following:	
1) Fee Owner Name:	Individual
2) Fee Owner Name*:	CorporationPartnershipOther
*Authorized Signatory:	Title:
	, the Owner (or Authorized tuthorize the following person* to file the Notice to Building
Official (NTBO) in accordance with FSS 55	53.791(4) and use a Private Provider for building code plan nection with the project described above.
*Authorized Person:	Company:
Address:	Phone:
I declare under penalty of perjury that I opersonally filled out the above information  Fee Owner/Authorized Signatory Name	am the fee owner for the address listed above and I on and certify its accuracy.  Signature
	signature
STATE OF FLORIDA COUNTY OF BROWARD	
Sworn to (or affirmed) and subscribed before me	by means of physical presence or online notarization, this
•	<u>'</u> ,
personally known or by I.D	·
	Signature of Notary Public - State of Florida
	Print, Type, or Stamp Commissioned Name of Notary Public