

Design Professional Digital Signature Affidavit

(Engineers, Architects, Land Architects, and Surveyors)

Design Professional Name:		
Company Name:		
Design Professional License #:		
Email Address & Phone:		
Mailing Address:		
Authorization. The Undersigned architect or engineer ("Un Island through its Building Services Division	ndersigned") understands that (s)he is a	authorizing the City of Marco
Termination. If the Undersigned believes the security of the terminate the use of such signature, (s)he must file a written		
Governing Law. The Undersigned understands that the electronic submissions must meet state law requirements as 668.001-006. Specifically, with reference to Florida Statutes Architects, or Florida Statutes Chapter 471 and Florida Adm	described in the Florida Statutes Chaptes Chapter 481 and Florida Adminstrative	ter 471.025, 481.221, and re Code Rule 61G1-16.005 for
Digital Signature Serial Number		
By signing this document, you are not only agreeing to the for information contained herein is grounds for disqualification.		ul falsification of any
Print Name of Design Professional	Signature of Design Professiona	al
State of County of		
The foregoing instrument was acknowledged before me this	day of	, 20,
by, who is □personal	lly known to me, or □has produced	as
identification, by means of □physical presence or □ online		
Signature, Notary Public – State of Florida	(Seal)	
Printed, Typed, or Stamped Name of Notary		