

## **City of Miramar | Building Division**

Community Development Department 2200 Civic Center Place | Miramar, Florida 33025 Tel: 954.602.3200 | Fax: 954.602.3635 www.miramarfl.gov

## Affidavit of Identical Documents for Digital Submittal

Attention: All documents digitally submitted for permitting purpose shall be in True PDF format. Other formats, including pictures converted to PDF won't be accepted.

I, (print full name)	Architect/Engineer of
Record with registration number AR/PE #	with
the Architectural/Engineering Firm (Name)	

\_\_\_\_\_, hereby attest or

affirm that the electronic files submittal of the plans for project located at the location shown below are an exact and accurate duplicate of the complete hardcopy set of plans submitted to the Building Division.

Project Name\_\_\_\_\_

Property Address: \_\_\_\_\_

Folio No.: \_\_\_\_\_

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 application number. Previously reviewed plans and comments will be discarded. This affidavit will apply to all documents submitted electronically throughout the life of the project including initial submittal, re-works, revisions, shop drawings, etc.

Description of digitally signed & sealed documents: \_\_\_\_\_

	Designer of Re	cord Contact Phor	ne:	
	Contact Email:			
Architect/Engineer of Record Signal	ture & Seal			
If the above signature of Professional Engineer/Architect is in digital format, a notarization is required.				
Sworn to (or affirmed and sub	oscribed before me this	day of	20	<u>     .   .   .   .   .   .   .   .   .</u>
Personally known	$\Box$ Produced Identification _		ID #	
Notary Name:				
Notary Signature:				
			Notary Seal	