

Form # 9B-3.053-2002-02
Private Provider
Plan Compliance Affidavit
Effective January 20, 2003

Private Provider Firm: NV5

Private Provider: David Conner

Address: 7020 AC Skinner Parkway, Suite 120, Jacksonville, Florida 32256

Phone: 352.331.1976 Fax: _____

Email: building.inspectionsnf@nv5.com

I hereby certify that to the best of my knowledge and belief the plans submitted were reviewed for and are in compliance with the Florida Building Code and all local amendments to the Florida Building Code by the following affiant, who is duly authorized to perform plans review pursuant to Section 553.791, Florida Statute and holds the appropriate license or certificate:

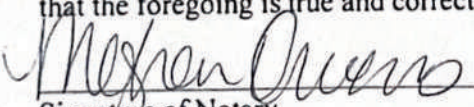
Name: Jason McClellan Plan Sheets: A.1-A4, S.1-S.4, Truss plans, Prod Approvals, E-calcs

Florida License/Registration/Certification #(s) and description:

RPX52I

Signature of Reviewer: 

SWORN AND SUBSCRIBED before me by Jason McClellan
being personally known to me ☒ or having produced as identification _____
and who being fully sworn and cautioned, state
that the foregoing is true and correct to the best of his/her knowledge or belief.


Signature of Notary

Meghan Owens
Print Name

Notary Public: NOTARY STAMP BELOW

My commission expires: 06/17/2026



Private Provider List

APPLICATION/PERMIT # 76761

JOB NAME Krisle Residence

THIS FORM MUST BE SUBMITTED BEFORE A PERMIT WILL BE ISSUED

Please list all private providers who will be responsible for plan review and/or inspections for this project. The Columbia County Building Department will verify that each listed private provider is properly registered and in good standing. Upon verification, each provider will be documented in the permit file as the designated private plans examiner and/or private inspector, as applicable.

This form must be submitted in addition to the required Notice to Building Official.

**PLANS
EXAMINER**

Printed Name: Jason McClellan
License #: RPX521

**PLANS
EXAMINER**

Printed Name: _____
License #: _____

**PRIVATE
INSPECTOR**

Printed Name: Jason McClellan
License #: BN5516

**PRIVATE
INSPECTOR**

Printed Name: _____
License #: _____

**PRIVATE
INSPECTOR**

Printed Name: _____
License #: _____

**PRIVATE
INSPECTOR**

Printed Name: _____
License #: _____

**PRIVATE
INSPECTOR**

Printed Name: _____
License #: _____