

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

Private Provider Firm: My Amelia, Inc DBA Inspected.com

Private Provider: Spencer Moore

Address: 1250 S. Pine Island Rd Suite 400 Plantation, FL 33324

Phone: 954-820-4874 Fax: _____

Email: Permits@inspected.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:

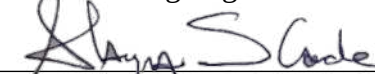
Name: Robert D. Bitgood Plan Sheets: FL41990-R3 - WINDOWS
PRODUCT APPROVAL SPECIFICATION FORM
FLOOR PLAN

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

PX4036

Signature of Reviewer: 

SWORN AND SUBSCRIBED before me by Robert D. Bitgood
being personally known to me X 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.

 Alayna S Cade
Signature of Notary Print Name

Notary Public: NOTARY STAMP BELOW

My commission expires:

