



Form # 9B-3.053-2002-01
Notice to Building Official of
Use of Private Provider
Effective January 20, 2003

Project Name: Duffany - 324 Southeast Colburn Ave, Lake City, FL 32025

Parcel Tax ID: 33-3S-17-13083-000 (41595)

Services to be provided: Plans Review _____ Inspections X

Note: If the notice applies to either private plan review or private inspection services the Building Official may require, at his or her discretion, the private provider be used for both services pursuant to Section 553.791(2) Florida Statute.

I Adam Duffany, the fee owner, affirm I have entered into a contract with the Private Provider indicated below to conduct the services indicated above.

Private Provider Firm: Coastal Code Services, INC

Private Provider: Christopher Tyson Scott

Address: 1942 Hwy 2297 PANAMA CITY, FL 32404

Telephone: 850 832-5742 Fax: _____

Email Address (Optional): coastalcodeservices@gmail.com

Florida License, Registration or Certificate #: BN4963, BU1927, PX2534

I have elected to use one or more private providers to provide building code plans review and/or inspection services on the building that is the subject of the enclosed permit application, as authorized by s. 553.791, Florida Statutes. I understand that the local building official may not review the plans submitted or perform the required building inspections to determine compliance with the applicable codes, except to the extent specified in said law. Instead, plans review and/or required building inspections will be performed by licensed or certified personnel identified in the application. The law requires minimum insurance requirements for such personnel, but I understand that I may require more insurance to protect my interests. By executing this form, I acknowledge that I have made inquiry regarding the competence of the licensed or certified personnel and the level of their insurance and am satisfied that my interests are adequately protected. I agree to indemnify, defend, and hold harmless the local government, the local building official, and their building code enforcement personnel from any and all claims arising from my use of these licensed or certified personnel to perform building code inspection services with respect to the building that is the subject of the enclosed permit application.

I understand the Building Official retains authority to review plans, make required inspections, and enforce the applicable codes within his or her charge pursuant to the standards established by s. 553.791, Florida Statutes. If I make any changes to the listed private providers or the services to be provided by those private providers, I shall, within 1 business day after any change, update this notice to reflect such changes. The building plans review and/or inspection services provided by the private provider is limited to building code compliance and does not include review for fire code, land use, environmental or other codes.

The following attachments are provided as required:

1. Qualification statements and/or resumes of the private provider and all duly authorized representatives.
2. Proof of insurance for professional and comprehensive liability in the amount of \$1 million per occurrence relating to all services performed as a private provider, including tail coverage for a minimum of 5 years subsequent to the performance of building code inspection services.

Individual
e-Signed by Adam Duffany

(Signature)
Adam Duffany

(Print)
Name: Adam Duffany
Address: 324 Southeast Colburn Ave., Lake City, FL 32026

Telephone# (386) 984-8141

Corporation

Print Corporation Name

(Signature)

(Print)
Name: _____
Address: _____
Telephone# _____

Please use appropriate notary block.

STATE OF

COUNTY OF

Individual
Before me, this 24 day of May, 2022, personally appeared Adam Duffany who executed the foregoing instrument, and acknowledged before me that same was executed for the purposes therein expressed.

Corporation
Before me, this _____ day of _____, 20____, personally appeared _____ of _____, a _____ corporation, on behalf of the state corporation, who executed the foregoing instrument and acknowledged before me that same was executed for the purposes therein expressed.

Personally known ____; or Produced identification X

Type of identification produced

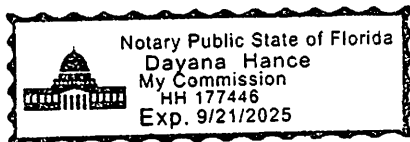
FLDL DISO-016-82-223

Signature of Notary

Dayana Hance

Print Name

Notary Public: NOTARY STAMP BELOW



My commission expires:



OneSpan Sign Electronic Evidence Summary

Signing Ceremony ID:

ID: 8NmXfJ81ZspwI46m8GwziGxv7dA=
Name: Sinclair Construction - NBO - Unsigned - Duffany
Created: 2022-May-12 12:18:39 (GMT-05:00) CDT
Completed: 2022-May-24 09:55:32 (GMT-05:00) CDT
Summary document generated: 2022-May-24 09:55:42 (GMT-05:00) CDT

Sender:

Name: AccuLynx Software
esign@acculynx.com

Documents:

Electronic Disclosures and Signatures Consent	1 page
nbo_-_unsigned_-_duffany	2 pages
OneSpan Sign Electronic Evidence Summary	2 pages

Recipients:

Name:	AccuLynx Software
Email:	esign@acculynx.com
Role:	Owner
ID:	vtd9fpMcjB89
Name:	Adam Duffany
Email:	adamduffany@gmail.com
Role:	6aba769085e64512a5a18745c0a50302
ID:	6aba769085e64512a5a18745c0a50302
Electronic Disclosures and Signatures Consent	1 accept
nbo_-_unsigned_-_duffany	1 signature (1 required, 0 optional)

Audit Trail:

Date and Time	Recipient	Action	Document	IP	Other
2022-May-24 09:52:15 (GMT-05:00) CDT	Adam Duffany	Login	N/A	12.226.184.162	
2022-May-24 09:52:16 (GMT-05:00) CDT	Adam Duffany	Signing Session For Recipient	N/A	12.226.184.162	Signing session for recipient: adamduffany@gmail.com(Adam Duffany)

2022-May-24 09:52:37 (GMT-05:00) CDT	Adam Duffany	Accept	Electronic Disclosures and Signatures Consent	12.226.184.162	Approval: 139a5a13-51c5-486d-ac8b-bc5c605ad630
2022-May-24 09:52:37 (GMT-05:00) CDT	Adam Duffany	Confirm	Electronic Disclosures and Signatures Consent	12.226.184.162	
2022-May-24 09:52:29 (GMT-05:00) CDT	Adam Duffany	View	nbo_-_unsigned_-_duffany	12.226.184.162	
2022-May-24 09:55:20 (GMT-05:00) CDT	Adam Duffany	Click To Sign	nbo_-_unsigned_-_duffany	12.226.184.162	Approval: At8lsZqBTosF
2022-May-24 09:55:32 (GMT-05:00) CDT	Adam Duffany	Confirm	nbo_-_unsigned_-_duffany	12.226.184.162	