



WEST SHORE
HOME

**NOTICE OF THE USE OF
PRIVATE PROVIDER**

In keeping with our Core Value of *Do the Right Thing Always*, West Shore Home has contracted with one or more Private Providers to perform any required inspection services on work performed in your home in accordance with s. 553.791. This allows us to provide our customers additional peace of mind by utilizing Independent verification that work meets all local and state requirements by using an approved Private Provider.

Any applicable permit applications, inspections, and close out will be performed by West Shore Home, LLC and the Private Provider. All documentation required to be submitted will be handled by both West Shore Home, LLC and the Private Provider as necessary. You, as the customer, will not need to do anything. These documents can be made available to you, the Customer, upon request.

By signing below, you are acknowledging that you have been made aware of the use of a Private Provider and that you allow both West Shore Home, LLC and CT Solutions of Florida, LLC to act as the Owners Agent, including permission to sign as Owners Agents when necessary for permitting.

CT Solutions of Florida, LLC

Customer Name: X Donald Anderson
Customer Signature: X Donald Anderson
Date: 12-19-2025 WSH Job Number: J-582020 Contractor #: CBC1265182

State / Commonwealth of FLORIDA, County of PINELLAS. The foregoing instrument was acknowledged before me on this the 19 day of DECEMBER by DONALD ANDERSON

Tatyana Franco
Notary Public

Stamp



Tatyana Franco
Comm.: HH 434643
Expires: Aug. 17, 2027
Notary Public • State of Florida

Form # 61G20-2.005-2002-01
Notice to Building Official of
Use of Private Provider
Effective January 1, 2025
61G20-2.005, F.A.C.

Project Name: ANDERSON

Parcel Tax ID: 28-3S-16-02372-605 (9182)

Services to be provided: Plans Review Inspections

Note: If the fee owner elects to use or authorizes the use of a private provider to provide plans review, the local building official may, at his or her discretion and subject to duly adopted local policy, require that a private provider be used to perform inspections as well, pursuant to section 553.791(2)(a), Florida Statutes.

I JONTE CURTIS HAWKINS - WEST SHORE HOME, LLC, the
 fee owner / fee owner's contractor, have entered into a contract with the Private Provider indicated below to conduct the services indicated above.

Private Provider Firm: CT SOLUTIONS OF FLORIDA, LLC

Private Provider: TIMOTHY HUNT

Address: 10602 NW 149TH PLACE ALACHUA, FL 32615

Telephone: 386-361-0208

Email Address: THUNT@CTSOLUTIONSFL.COM

Florida License, Registration or Certificate #: BU2174, PX3903, BN7162

I have elected to use one or more private providers to provide building code plans review and/or inspection services on the building or structure 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 or structure 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, or within 2 business days before the next scheduled inspection, 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 prevention, firesafety, 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. A certificate of insurance as required by section 553.791(18), Florida Statutes.

Individual

Print name

Address (line 1)

Address (line 2)

Telephone Number

Email Address

Signature

Date

Corporation

WEST SHORE HOME, LLC

Print name

JONTE CURTIS HAWKINS

Representative name

3845 GATEWAY CENTRE BLVD SUITE 300 PINELLAS PARK, FL 33782

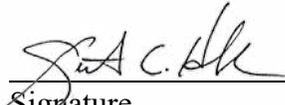
Address (line 1)

Address (line 2)

Telephone Number

JHPERMITTING@WESTSHOREHOME.COM

Email Address



Signature

12/19/2025

Date