



NOTICE TO INDUSTRY

Notice to Building Official - Private Provider Form

EFFECTIVE Wednesday, January 1, 2025

Due to ongoing efforts to streamline operations and ensure compliance with regulatory standards, the City of Cape Coral will be implementing a revised Notice to Building Official - Private Provider Form.

Beginning January 1, 2025, only the updated Private Provider Form will be accepted for submission. The current form will no longer be accepted after December 31, 2024. To ensure a seamless transition and avoid any delays to your permitting process, please review and adopt the new form ahead of the deadline.

The updated Private Provider form can be accessed in the Permit Document Center on Capecoral.gov.



F.S. 553.791
NOTICE TO BUILDING OFFICIAL FOR THE USE OF PRIVATE PROVIDER

CANNOT BE USED FOR FIRE INSPECTIONS OR ORDINANCE INSPECTIONS

Permit Number: Project Name: Parcel ID:

Property Address:

To be completed by the owner:

Services to be provided: Inspections Plan Review and Inspections Scope of work:

I, property owner (or authorized agent) of the above referenced property, hereby affirm that I have entered a contract with the Private Provider Firm identified below to conduct the services indicated above.

Private Provider Firm: Ph:

Address: Email:

Private Providers' Name: Florida License # (PE, AR, or BU):

Private Providers' Name: Florida License # (PE, AR, or BU):

Private Providers' Name: Florida License # (PE, AR, or BU):

Private Providers' Name: Florida License # (PE, AR, or BU):

Private Providers' Name: Florida License # (PE, AR, or BU):

To be completed by the Private Provider:

I, do hereby affirm that the Duly Authorized Representatives listed below are my employees, and are entitled to receive unemployment compensation benefits under Chapter 443 F.S. 553.791(8).

Please provide the minimum requirements for insurance: F.S Section 553.791(16)

- Comprehensive liability of \$1 million per occurrence and \$2 million in the aggregate for project cost of \$5 million or less.
Comprehensive liability of \$2 million per occurrence and \$4 million in the aggregate for project cost over \$5 million.

Duly Authorized Representative(s):

Table with 6 columns: Name, Building, Electrical, Mechanical, Plumbing, License#. Multiple rows for listing representatives.

If private provider plan review is performed, all required inspections must also be performed by the private provider, as well. When the private provider sends notification/results to the City (electric 001 only), they send it to LCEC (MaintenanceSchedulers@lcec.net) and copy the City (pprovider@capecoral.gov).

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.

If the fee owner or the fee owner's contractor makes any changes to the listed private providers or the services to be provided by those private providers, the fee owner or the fee owner's contractor shall, within 1 business day after any change or within 2 business days before the next scheduled inspection, update the notice to reflect such changes. A change of a duly authorized representative named in the permit application does not require a revision of the permit, and the building code enforcement agency shall not charge a fee for making the change.

Forms approved by the Building Official are provided as part of this package. Forms provided in this package must be used on each occurrence of the event identified by the forms. No substitute forms will be accepted.

Project Name: _____ Parcel ID: _____

Property Address _____

Complete and sign below by either Owner or Contractor. (Does not require both parties to sign)

Verification Pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Property Owner: Individual Corporation

Contractor:

Print Name

Print Name

Signature

Signature

Address

Address

Email

Email

Phone

Phone

Name:	FL License No:	Discipline
Bill Larder	BN6470	Building, Elec, Mech, Plumbing
Chris Barlow	BN8756	Building
Clyde Hady	BN6448	Electrical
David Green	PBI2793	Residential
David Lero	BN7830	Building, Residential
David Wilcox	BN4653	Building, Mechanical, Plumbing
Derek Baker	BN6592	Building
Gary Brevoort	BN2827	Building, Residential
Gary Lindsay	BN6536	Residential
Glenn Hall	BN5324	Building, Plumbing
Glenn Rossi	PBI2690	Building
Neal Burdick	BN5527	Electrical
Paul Cameron	BN4156	Electrical
Patrick Coughlin	BN4623	Residential
Philip Charnock	BN1114	Building, Elec, Mech, Plumbing
Robert Masula	BN6180	Building
Rune Lero	BN2284	Building, Residential
Russell Heiney	BN2944	Building, Mechanical, Plumbing
Timothy Moore	BN1026	Building, Residential
Tony Giardino	BN4125	Building, Residential