



Broward County Board of Rules and Appeals

1 N. University Drive Suite, 3500B, Plantation, FL 33324

broward.org/CodeAppeals | 954-765-4500 | rulesboard@broward.org

Please check any of the following item(s) that pertain:

Recertification

Change of City

Upgrade

Downgrade

Please complete and return before your current certification expires.

Name:

Home Address:

Phone:

City:

State:

Zip:

Name of the Department Employed by:

Please answer all of the following questions:

1. Current Broward County Board of Rules and Appeals certification held:

2. Please check one:

I am

I am not

Currently certified as a Fire Inspector under F.S. 633 (State Certification).

3. State Certification Number:

Expiration Date:

4. Please check the certification applying for herein (Checks Payable to: Broward County Commissioners)

Fire Code Official

Fire Plans Examiner

Fire Inspector

Assistant Fire Marshal

Individuals being considered for recertification will be required to complete an affidavit of compliance with 71-575 (See Board Policy 14-02).

I hereby certify that the above information and any document regarding 60 points toward recertification is true and correct.

Signature

Date

I hereby certify that the above individual is currently employed by the above-named Fire Department and has the hours required.

Fire Chief (Printed Name):

Signature of Fire Chief:

Date:

Subject: Policy/Affidavit to ensure compliance with Chapter 71-575, paragraph 4(b), Laws of Florida

POLICY/AFFIDAVIT

The requirements below have been adopted by vote of the Broward County Board of Rules and Appeals on April 10, 2014, to help ensure compliance with Chapter 71-575, paragraph 4(b), Laws of Florida.

NOTICE

All applicants for certification or re-certification are required to execute the following statement and to have same notarized by a duly authorized Notary. Failure to execute and have this statement notarized will prevent the certification/re-certification process from proceeding to completion.

THE UNDERSIGNED HEREBY VOLUNTARILY AND KNOWINGLY STATES AS FOLLOWS:

The undersigned has read Chapter 71-575, paragraph 4(b), Laws of Florida and has had the opportunity to have same reviewed and explained by legal counsel. Undersigned understands the terms of same and that any Inspector (such as and including but not limited to structural, engineering, plumbing, mechanical, or electrical) or other building official charged with enforcing or otherwise supervising or inspecting any work covered under any section of the Florida Building Code as applicable to Broward County pursuant to Chapter 71-575, Laws of Florida, and who is required to hold or who otherwise holds a Certificate of Competency in any area of construction shall not use his/her Certificate of Competency to engage in free enterprise thereby, competing against persons or firms that may do business within Broward County whose work he/she may also inspect, nor may he/she allow his/her Certificate of Competency to be used by another person or firm. This includes any activity, such as, but not limited to bidding, contracting, code consulting, design, employment, plan review, special building inspections, etc., regardless of compensation. The undersigned makes application for certification or re-certification, affirms compliance with aforementioned Code Section, and vouches for the truth and accuracy of all statements and answers herein contained by affixing his/her signature below. The undersigned agrees that failure to comply with the requirements of chapter 71-575, Laws of Florida, shall be considered a material breach of the terms of certification and may result in decertification/ denial of certification.

A copy of a legal opinion with respect to Chapter 71-575, Laws of Florida, is available upon request.

The undersigned submitting this application for certification, acknowledges and indicates compliance with all statements contained by affixing his/her signature below.

_____ X _____
Type/Print Name of Applicant Signature of Applicant

STATE OF FLORIDA, COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____ by

_____ X _____
Type/Print or Stamp Notary's Name Notary's Signature as to Applicant's Signature

Personally Known _____ Produced Identification _____

Type of Identification Produced _____

Editor's Note: Affidavit was authorized by BORA vote on May 8, 2014, and was issued by the Board Chair on May 9, 2014.