



Design Professional Digital Signature Affidavit
(i.e. – engineers, architects, land architects, surveyors)

Design Professional Name: _____

Company Name: _____

Design Professional's License #: _____ Phone: _____

Email Address: _____

The email address listed above will be your 'Authorized Email Address'.

Authorization. The Undersigned architect or engineer ("Undersigned") understands that (s) he is authorizing Town of Fort Myers Beach through its Permitting and Plan Review Departments to accept documents electronically using the seal and signature appearing below. Upon receiving any documents through IWORQ, uploaded by any IWORQ user, which have been authorized by the seal and signature below, the Town of Fort Myers Beach will assume that the documents were authorized by the Undersigned. It is the Undersigned's obligation to maintain its information in a secure environment to ensure that all documents electronically submitted are in fact authorized by the Undersigned.

Termination. If the Undersigned believes the security of the digital signature has been compromised or simply wishes to terminate the use of such signature, (s) he must file a written notice termination with the Town of Fort Myers Beach Office, 2525 Estero Blvd, Fort Myers Beach, FL. 33931, OR permits@fmbgov.com.

With good cause and without notice, Town of Fort Myers Beach at its discretion may terminate the Undersigned's authorization to electronically submit documents to IWORQ.

Governing Law. The Undersigned understands that the electronic signing and sealing of documents is governed by Florida law, Electronic submissions must meet state law requirements as described in the Florida Statutes Chapter 471.025, 481.221, and 668.001-006. Specifically, with reference to Florida Statutes Chapter 481 and Florida Administrative Rule 61G1-16.005 for Architects, or Florida Statutes Chapter 471 and Florida Administrative Code Rule 61G15- 23.003 for Engineers.

By signing this document, you are not only agreeing to the foregoing but certifying that: Any willful falsification of any information contained herein is grounds for disqualification.

DIGITAL SIGNATURE WITH NAME, CERTIFICATION NUMBER (PE, AA, ETC) and "STATE OF FLORIDA" VISIBLE

DIGITAL SIGNATURE SERIAL NUMBER or NAME OF CERTIFICATION AUTHORITY

VALIDITY END DATE OF DIGITAL SIGNATURE

PLACE APPLICANTS RAISED, WET OR ELECTRONIC SEAL IN THIS AREA

STATE OF _____ COUNTY OF _____

The foregoing instrument was certified and subscribed before me by means of __ physical presence

OR online notarization, this ____ day of _____, 20__, by _____, __ who is

personally known to me OR __ who has produced _____ as identification.

(SEAL)

Notary Public Signature

This notarized document may be submitted via email to buildingpermits@fmbgov.com