

Building Code Services Division **ELEVATOR SECTION** 1 North University Drive, Box #302 • Plantation, Florida 33324 • 954-765-4508 • broward.org/building

## Supervisor Affidavit for New Construction or Alteration

I,, do hereby attest that the	
constructed or located at under Permit	
Number	, was supervised by me and is in compliance
with the applicable provisions of Florida Statutes, Chapter 39	39, the American Society of Mechanical Engineers
Standard A17.1 and the Florida Administrative Code, Chapter	er 61 C-5.
I represent	as the supervisor of installation.
elevator company name as the supervisor of installation.	
SUPERVISOR'S SIGNATURE	DATE
Elevator Certificate of Competency No.:	
THIS ORIGINAL SIGNED DOCUMENT MUST BE RETURNED TO THE ELEVATOR INSPECTOR ON THE DAY OF THE FINAL INSPECTION IN ORDER TO ISSUE A CERTIFICATE OF OPERATION FOR THE ELEVATOR DESCRIBED HEREIN IF NEW	
CONSTRUCTION. THIS DOCUMENT WILL THEN BE RETURNED TO	
DIVISION BY THE ELEVATOR INSPECTOR.	
NOTARY PUBLIC	
STATE OF FLORIDA	
COUNTY OF BROWARD	
The foregoing instrument was acknowledged before me this	day of, 20,
by	
NAME OF PERSON ACKNOWLEDGING	
	SIGNATURE OF NOTARY PUBLIC-STATE OF FLORIDA
(NOTARY SEAL)	
-	PRINT, TYPE OR STAMP COMMISSIONED NAME OF NOTARY PUBLIC
Personally Known or Produced Identification	
Type of Identification Produced	