Broward County Board of Rules and Appeals

Certification for Chief Plumbing Inspector

For the Building Department of:					
Name:					
Home Address:					
City:		State:	Zip:		
Phone:		Email Address:			

All applicants shall sign the attached affidavit to ensure compliance with Chapter 71-575, Paragraph 4(b), Laws of Florida. (BORA Policy #14-02, Effective March 17, 2025)

Please mark in each corresponding box to indicate compliance with appropriate Code Sections:

104.7 Certification of the Chief Plumbing Inspector. To be eligible for appointment as a Chief Plumbing Inspector, such person shall be certified as required by BCAIB as a Plumbing Plans Examiner and as a Plumbing Inspector. Engineers are exempt from BCAIB certification only.

104.7.1 Such person shall be certified by BORA and shall meet at least one of the following qualifications:

104.7.1.1 A Plumbing Plans Examiner serving for a minimum of one (1) year for an AHJ or school board within the State of Florida and who complies with at least one (1) of the qualifications of Section 104.10.4.1.

104.7.2 Each of the applicants shall possess a current Certificate of Competency or a Professional License in the discipline requested as a Master Plumber or Plumbing Contractor or Engineer issued by at least one of the following entities:

- A. Florida Construction Industry Licensing Board
- B. Broward County Central Examining Board of Plumbers
- C. Miami-Dade County Construction Trades Qualifying Board
- D. Florida Board of Professional Engineers

Broward County Board of Rules and Appeals

Note:	All	applications shall include the required information listed below, failure to include these items may result in a rejection of this application.			
	 This application is to be signed by the Building Official, Chief Executive Officer, Human Resources Director, or other duly authorized representative. For Building Official or Assistant Building Official, the CEO (City Manager, Acting City Manager or Mayor) shall sign. 				
	2.	Provide a clear copy of a current photo ID.			
	 Provide a copy of all Florida State certifications and/or provisional licenses for each BCAIB certification, also copies of appropriate Certificate of Competency. 				
	4.	Provide detailed résumé of experience and licensure.			
	5.	Provide verifiable evidence of employment such as, IRS forms, tax returns, W-2 forms or notarized written statements (affidavit) including contact information attesting to employment from former employers, partners, or design professionals knowledgeable of the applicant professional or trade experience.			
	6.	OPEN PERMIT AFFIDAVIT: At the time the applicant submits application for certification to BORA, all outside free enterprise shall cease. The applicant is required to provide a notarized affidavit including a detailed list of all open and ongoing projects currently under construction which will include information such as the municipality they are located within, the existing permit number and the time frame in which the project will be completed. This time frame shall not exceed a six-month period from the time the application for certification was submitted to BORA. If no open permits exist, provide a notarized affidavit stating such. Please see BORA Policy #18-02 for all specific requirements of open permits.			
BORA	\ sta	ff is authorized to request additional information to verify employment and/or experience			
Note:	by	120-day temporary staff approval will be issued to a qualified applicant after his/her application for a Provisional License has been accepted DBPR. A certification card will be mailed to the endorsing Building Official after the applicant has received his/her Standard License from PR and approved by the Board of Rules and Appeals.			
Please li	st be	low all jurisdictions and positions of Building Official, Assistant Building Official and/or Chiefs for which you are currently serving.			
Jurisdic	tion	B.O. A.B.O. Chief (Discipline)			
		B.O A.B.O Chief (Discipline)			
Jurisdic	tion	B.O. A.B.O. Chief (Discipline)			
	-	affixing his/her signature belowXType/Print Name of Applicant Signature of Applicant FLORIDA, COUNTY OF			
		affirmed) and subscribed before me by means of physical presence or online notarization, this day of, 20 by			
		Type/Print or Stamp Notary's Name X Notary's Signature as to Applicant's Signature			
Perso	nally	Known Produced Identification			
Туре о	f Ide	ntification Produced			
The unde	ersig	ned attest for the truth and accuracy of all statements and answers herein contained by affixing his/her signature below.			
		X X Name of Building Official, Chief Executive Officer, Human Signature of Building Official, Chief Executive Officer, Human Director or other duly authorized representative Resources Director or other duly authorized representative			
STATE	OF	FLORIDA, COUNTY OF			
Sworn to	or a	affirmed) and subscribed before me by means of physical presence or online notarization, this day of, 20 by			
		Type/Print or Stamp Notary's Name X Notary's Signature as to Applicant's Signature			
Perso	nallv	Known Produced Identification			
		ntification Produced			
		BORA on the day of, 20			

Policy/Affidavit to Ensure Compliance with Chapter 71-575, Section 4(b), Laws of Florida

NOTICE

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

THE UNDERSIGNED HEREBY VOLUNTARILY AND KNOWINGLY STATES AS FOLLOWS:

The undersigned has read Chapter 71-575, Section 4(b), Laws of Florida, and has had the opportunity to have the same reviewed and explained by legal counsel. Undersigned understands the terms of same and that their Certificate of Competency shall not be used to engage in free enterprise within Broward County, thereby competing against persons or firms that may do business within Broward County whose work they may also inspect, nor may they allow their 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. The undersigned applying for certification or recertification, affirms compliance with the aforementioned Code Section, and vouches for the truth and accuracy of all statements and answers herein by affixing their signature below. The undersigned agrees that failure to comply with the requirements of Chapter 71-575 shall be considered a material breach of the terms of certification and may result in decertification/denial of certification.

Printed Name and Sig	gnature of Applicant		
State of Florida	SS		
County of Broward			
			_, personally appeared before me the above- aring same to be true to his knowledge and
Notary-Public:	(Printed Name	and Signature	of Notary Public, State of Florida)
Personally Known	or Produced Identif	ication	
Type of Identification	Produced		

Broward County Board of Rules and Appeals Voluntary Open Permit Affidavit

Certification Application Date



* Per Florida Statute 71-575 (4)b, commencing with the time of application submission, provide the 180-day period from the time that the application for certification was submitted to the Broward County Board of Rules and Appeals:

Please list all active and/or inactive permits under construction:

If this is not applicable, please check this box.

EXISTING PERMIT NUMBER	MUNICIPALITY	ESTIMATED DATE OF COMPLETION

* If this 180-day time frame is required to be extended, a written request shall be submitted to the Director of the Broward County Board of Rules and Appeals no later than 30 days prior to the expiration of the 180-day period.

This affidavit must be notarized regardless of open permit status.

X	Type/Print Applicant Name	X	Signature of Applicant
STATE OF FLORIDA COUNTY OF			
Sworn to (or affirmed) and subscribed b	before me by means of	physical presence or	online notarization, this
day of	20 by		
X Type/P	rint or Stamp Notary's Name	X]	Notary's Signature as to Applicant's Signature
Personally Known Produc	ed Identification		
Type of Identification Produced		-	