

Broward County Board of Rules and Appeals

Certification for Plumbing Plans Examiner

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 May 9, 2014)

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

104.10.4 Certification of the Plumbing Plans Examiner. To be eligible for appointment as a Plumbing Plans Examiner, 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.

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

104.10.4.1.1 An Engineer in the discipline requested and having practiced for a minimum of five (5) years within the State of Florida.

104.10.4.1.2 A Plumbing Inspector 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 104.14.3.1.

104.10.4.2 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.

- 1. 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.
- 3. 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 staff is authorized to request additional information to verify employment and/or experience*****

Note: A 120-day temporary staff approval will be issued to a qualified applicant after his/her application for a Provisional License has been accepted by DBPR. A certification card will be mailed to the endorsing Building Official after the applicant has received his/her Standard License from DBPR and approved by the Board of Rules and Appeals.

The undersigned submitting this application for certification, indicates compliance and vouches for the truth and accuracy of all statements and answers herein 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 _____

The undersigned attest for the truth and accuracy of all statements and answers herein contained by affixing his/her signature below.

_____ X _____
 Type/Print Name of Building Official, Chief Executive Officer, Human Resources Director or other duly authorized representative Signature of Building Official, Chief Executive Officer, Human Resources Director or other duly authorized representative

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 _____

Approved by BORA on the _____ day of _____, 20____.

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.

