



901 NW 66th Ave. Suite B
Margate, Florida 33063

Phone: 954-970-3004
Fax: 954-970-3412
Building@MargateFL.com

BUILDING DEPARTMENT **Digital Signature Affidavit**

The undersigned hereby certifies that (s)he will act only for him or herself or that (s)he is legally qualified to act on behalf of the business organization sought to be certified in all matters connected with its architect/engineering business as stated in F.S. 481.221 and F.S. 471.025.

Authorization. The Undersigned architect, engineer, or contractor (“Undersigned”) understands that (s)he is authorizing the City of Margate through its Building Department Division to accept documents electronically using the seal and signature appearing below. Upon receiving any documents authorized by the seal and signature below, the City of Margate will assume that the documents were sent 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 submitted by the Undersigned.

Suspension/Termination. If the Undersigned believes, the security of the digital signature has been compromised or simply wishes to terminate the use of the electronic signature, (s)he must file a written notice of suspension/termination with the Building Department, 901 NW 66th Avenue, Margate, Florida 33063. Within 15 days after the receipt of the notice of suspension/termination, the City of Margate will suspend and/or terminate this authorization for the electronic submission of documents based upon the Undersigned’s written notice. If the Undersigned believes the digital signature has been compromised, the City of Margate Building Department will take the necessary steps to help the Undersigned determine which documents were submitted improperly and may attempt to stop work authorized by a security compromise. The City of Margate does not have an obligation to stop any work in-progress or completed in the Undersigned’s name pursuant to a security compromise or to take any action against the person/entity that improperly used the Undersigned’s electronic seal and signature. The Undersigned, not the City of Margate, will ultimately be responsible for protecting its interests if a security compromise occurs. If the City of Margate takes any action to force a third party who has improperly used the Undersigned’s electronic signature and seal to stop work associated with the improper use of the seal/signature, then the Undersigned agrees to indemnify the City of Margate for all expenses, costs, and fees associated with that action including court costs and attorney’s fees.

With good cause and without notice, the City of Margate at its discretion may temporarily suspend or terminate the Undersigned’s authorization to electronically submit documents.

Liability Resulting from Use. The Undersigned understands and agrees that the City of Margate, it’s officers, agents, and employees will not be liable for any damages, harm, or injury that result from the use of the electronic seal or signature regardless of how the harm, damage, or injury occurred. If any dispute arises from the use of an electronic seal or signature, that matter may be resolved by a court of law. Nothing within this provision is intended to waive or enlarge the provisions of F.S. 768.28.

Governing Law. The Undersigned understands that the electronic signing and sealing of documents is governed by Florida law, specifically but not limited to F.S. 481.221 and F.S. 471.025, The Electronic Signature Act of 1996 (F.S. 668.01-668.006) and F.A.C. sections 61G1-16.005 and F.A.C. 61G15-23.003. The City of Margate has attempted to create an electronic signature process in compliance with Florida law but shall not be liable in any manner for any violations of professional licensure regulations. It is the Undersigned’s responsibility to ensure compliance with all laws, regulations, and ordinances that govern his/her professional license.



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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.

APPLICANT NAME (Please print)

NAME OF COMPANY

Contact Phone Number

APPLICANT SIGNATURE

Sample of Digital Stamp

FLORIDA JURAT
FS 117.05(13) – Effective January 1, 2020

State of Florida
County of _____

The foregoing instrument was acknowledged before me **by means of** **physical presence** or **online notarization**, this ____ day of _____, 20__ (year), by _____ (name of person acknowledging), and is personally known to me or has produced identification.

NOTARY PUBLIC, STATE OF FLORIDA

My Commission Expires:

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____