

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

Permitting and Plan Review
P.O. Box 398
Fort Myers, FL. 33902
Phone (239) 533-8329
ePlan@leegov.com

Applicant Name:	
Company Name:	
Design Professional's License # :	Phone:
Email Address:	
The email address listed above will be your 'A	uthorized Email Address.'
<b>Authorization</b> . The Undersigned architect or engineer ("Undersigned County through its Permitting and Plan Review Departments to and signature appearing below. Upon receiving <b>any documents eConnect user</b> , which have been authorized by the seal and sign documents were authorized by the Undersigned. It is the Under a secure environment to ensure that all documents electronical Undersigned.	accept documents electronically using the seal through Lee County eConnect, uploaded by any nature below, Lee County will assume that the signed's obligation to maintain its information in
<b>Termination</b> . If the Undersigned believes the security of the digital signature, (s)he must file a written notice to P.O. Box 398, Fort Myers, FL. 33902, <b>OR</b> <a href="mailto:eplan@leegov.com">eplan@leegov.com</a> .	•
With good cause and without notice, Lee County at its discretion may electronically submit documents to Lee County eConnect.	terminate the Undersigned's authorization to
<b>Governing Law.</b> The Undersigned understands that the electron by Florida law, Electronic submissions must meet state law requestion that the electronic submissions must meet state law requestion to the Electronic Submissions of the Electronic State (a) and 668.001-006. Specifically, with reflorida Administrative Rule 61G1-16.005 for Architects, or Florida Administrative Code Rule 61G15- 23.003 for Engineers.	rirements as described in the Florida Statutes eference to Florida Statutes Chapter 481 and
By signing this document, you are not only agreeing to the forego 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 OF NAME OF CERTIFICATION AUTHORITY	PLACE APPLICANTS  RAISED, WET OR ELECTRONIC SEAL IN THIS
VALIDITY END DATE OF DIGITAL SIGNATURE	– AREA
Under penalties of perjury, I declare that I have read the foregoing of	locument and that the facts stated in it are true.
Signature of Design Professional	Date
This section must be hand signed; the document may be submitted electronic	

received in our office prior to any permits being issued.