



Building & Permitting Division 1100 Park Lane East, First Floor Oakland Park, FL 33334 Tel: 954-630-4350

Missed Inspection Affidavit

Address: _____

Application/Permit No: _____

STATE OF FLORIDA

COUNTY OF BROWARD

BEFORE ME, the undersigned authority, personally appeared _____
CONTRACTOR'S NAME

who, being duly sworn, deposes and says:

▪ I have missed receiving an inspection for _____
TYPE OF INSPECTION

However, as the certified contractor responsible for the construction or installation of the

(TYPE OF ITEM FOR WHICH INSPECTION WAS MISSED)

was personally inspected by me and found to be constructed or installed in full conformance with the Florida Building Code, the approved plans and the manufacturer's specifications. I fully understand that, by the Building Division's acceptance of this letter, I am responsible for the correction of any problems, which may arise at any time in the future.

▪ I agree to indemnify, and hold harmless, the City of Oakland Park from any and all claims, judgments, costs liabilities, damages and expenses, including reasonable attorney fees, whatsoever arising in connections with this missed inspection.

▪ I hereby acknowledge that the statements herein contained are true and correct.

FURTHER, AFFIANT SAYETH NAUGHT.

SIGNATURE OF CERTIFIED CONTRACTOR

CERTIFICATION NUMBER

STATE OF FLORIDA/COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____ 20____ by personally known by me _____ or produced _____ as identification.

Notary Signature

Notary Name/Seal



▪ I, Mr./Ms _____ of the above referenced property have reviewed this
Property Owner's Name

Missed Inspection Affidavit and understand that the City of Oakland Park Building Department did not perform this inspection. I request that this Missed Inspection Affidavit be accepted in lieu of having construction work demolished/removed to allow the covered over work to be inspected.

 SIGNATURE OF PROPERTY OWNER

 PRINT NAME

STATE OF FLORIDA/COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____ 20 _____ by personally known by me _____ or produced _____ as identification.

 Notary Signature

 Notary Name/Seal