

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

Applicant Name: _____

Company Name: _____

Design Professional's License # : _____ Phone: _____

Email Address: _____

The email address listed above will be your **'Authorized Email Address.'**

Authorization. The Undersigned architect or engineer ("Undersigned") understands that (s)he is authorizing Lee County through its Permitting and Plan Review Departments to accept documents electronically using the seal and signature appearing below. Upon receiving **any documents through Lee County eConnect, uploaded by any eConnect user**, which have been authorized by the seal and signature below, Lee County will assume that the documents were authorized 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 authorized by the Undersigned.

Termination. If the Undersigned believes the security of the digital signature has been compromised or simply wishes to terminate the use of such signature, (s)he must file a written notice termination with the Lee County Permitting Office, P.O. Box 398, Fort Myers, FL. 33902, **OR** eConnect@leegov.com .

With good cause and without notice, Lee County at its discretion may terminate the Undersigned's authorization to electronically submit documents to Lee County eConnect.

Governing Law. The Undersigned understands that the electronic signing and sealing of documents is governed by Florida law, Electronic submissions must meet state law requirements as described in the Florida Statutes Chapter 471.025, 481.221, and 668.001-006. Specifically, with reference to Florida Statutes Chapter 481 and Florida Administrative Rule 61G1-16.005 for Architects, or Florida Statutes Chapter 471 and Florida Administrative Code Rule 61G15- 23.003 for Engineers.

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.

DIGITAL SIGNATURE WITH NAME, CERTIFICATION NUMBER (PE, AA, ETC.) and "STATE OF FLORIDA" VISIBLE

DIGITAL SIGNATURE SERIAL NUMBER or NAME OF CERTIFICATION AUTHORITY

VALIDITY END DATE OF DIGITAL SIGNATURE

PLACE APPLICANTS
RAISED, WET OR
ELECTRONIC SEAL IN THIS
AREA

Under penalties of perjury, I declare that I have read the foregoing document 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 electronically; however, the original hand signed document must be received in our office prior to any permits being issued.