City of Pompano Beach
Department of Development Services
Building Inspections Division

100 W. Atlantic Blvd Pompano Beach, FL 33060
Phone: 954.786.4670 **Fax:** 954.786.4677

Sworn Statement of Account

F.S. 553.791

(11) Upon completion of all required inspections, the private provider shall prepare a certificate of compliance, on a form acceptable to the local building official, summarizing the inspections performed and including a written representation, under oath, that the stated inspections have been performed and that, to the best of the private provider's knowledge and belief, the building construction inspected complies with the approved plans and applicable codes. The statement required of the private provider shall be substantially in the following form and shall be signed and sealed by a private provider as established in subsection (1):

To the best of my knowledge and belief, the building components and site improvements outlined herein and inspected under my authority have been completed in conformance with the approved plans and the applicable codes.

***F.S. 117.03 Administration of oaths.**--A notary public may administer an oath and make a certificate thereof when it is necessary for the execution of any writing or document to be published under the seal of a notary public. The notary public may not take an acknowledgment of execution in lieu of an oath if an oath is required.*

1. **For an oath or affirmation:**

_____
Signature
STATE OF FLORIDA COUNTY OF

_____
Sworn to and subscribed before me this

_____ day of _____, _____,

by _____,
(**Print** Name of Person Making Statement)
who signed with a mark in the presence of these witnesses:

_____
Signature of Notary Public - State of Florida

_____
Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known _____ OR Produced

Identification _____

Type of Identification Produced:

_____

2. **For an acknowledgment in an individual capacity:**

_____
Signature
STATE OF FLORIDA COUNTY OF

_____
The foregoing instrument was acknowledged before me

this _____ day of _____, _____,

by _____,
(**Print** Name of Person Making Statement)
who signed with a mark in the presence of witnesses:

_____
Signature of Notary Public - State of Florida

_____
Print, Type, or Stamp Commissioned Name of Notary Public

Personally Known _____ OR Produced

Identification _____

Type of Identification Produced:

_____