

Design Professional for Milestone InspectionsPlease email form to MilestoneInspections@colliercountyfl.gov

Reference Number(PL): _____

Association Name: _____

Structure Address: _____

I, _____, a licensed Professional Engineer / Architect will be performing the Milestone Inspections for the above referenced structure per F.S. 553.899.

You must be [preregistered](#) with the [GMCD portal](#) before submitting this form.

Please provide the name and email used during registration.

Portal account registered name: _____

Portal account email address: _____

All future correspondence will be via email to the design professional and association contact.

Condo/Co-op Association contact email: _____

Digital signature with seal