



190 Malabar Road S.E. Ste 105, Palm Bay, FL 32907 • Phone: (321) 953-8924 • Fax: (321) 953-8925

RE: Permit #

ROOF SHEATHING / WATER BARRIER INSPECTION AFFIDAVIT

I _____, licensed as a (n) Contractor*/Engineer/Architect,
(Please print name and circle license type) FS468 Building Inspector*

License #; _____ . On or about _____ .
(Date and Time)

I did personally inspect the **roof deck nailing and secondary water barrier work at:**

(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.).

Signature

STATE OF FLORIDA
COUNTY OF Brevard

Sworn to and subscribed before me this _____ day of _____, 20

By _____ .

Personally Known OR Produced Identification

Type of Identification Produced

Signature of Notary Public, State of Florida

(Print, type or stamp name)

Commission No.:

* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection.