



ROOF INSPECTION AFFIDAVIT

Phone: (239) 321-7925 ~ E-Mail: e-permits@cityftmyers.com

Re: Permit # _____

I, _____, License # _____
(Please print name) (Input as N/A if Owner-Builder)

hereby certify that based on my examination on _____, the roof deck nailing and
(Date and Time)

secondary water barrier for the work located at:

(Job Site Address)

was installed according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.).

(Signature of Person Making Statement)

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this ____ day of _____,
_____ by _____ (printed name of person making
statement), who is Personally Known ____ OR Produced identification ____, type of identification ____
_____.

Signature of Notary Public

(SEAL)

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