



Planning & Development Department
100 S. Myrtle Avenue, Suite 210
Clearwater, FL 33756
Telephone: (727) 562-4567
www.myclearwater.com

Roofing Inspection Affidavit

General, Building, Residential or Roofing Contractors or any individual certified under Florida State Statute 468 to make such an inspection. Included PHOTOGRAPHS of each plane of the roof (sheathing and dry in / base sheet) with the permit # or address clearly marked with SPRAY PAINT on the deck of each inspection.

Permit Number – BCP _____ - _____

I, _____, licensed as a(n) Contractor*/Engineer/Architect, FS 468 Building Inspector*
(please print name and circle Lic. type)

License #: _____ Email _____

On or about _____, I did personally inspect the roof deck nailing and secondary water barrier
(Date & Time)

for work at _____
(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Base on 533.844 F.S.)

Signature

STATE OF FLORIDA
COUNTY OF PINELLAS

Sworn to and subscribed before me this _____ day of _____, 202_____

By _____

Notary Public, State of Florida

(Print, type or stamp name)

Commission No.: _____

Personally known _____ or Produced Identification _____

Type of identification produced _____