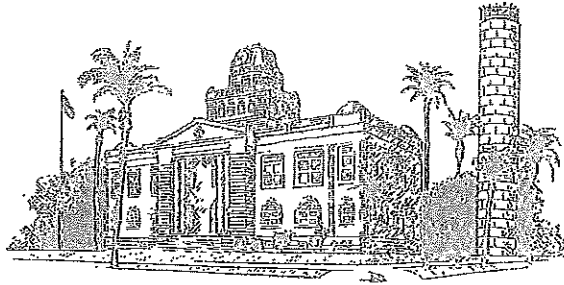


# Board of County Commissioners Madison County, Florida



MADISON COUNTY BUILDING DEPARTMENT  
Phone 850-973-6785 • Fax 850-973-6727  
madisonbldg@earthlink.net  
www.madisoncountyfl.com

Madison County is an Equal Opportunity Employer

## Roofing Inspection Affidavit

RE: Permit# \_\_\_\_\_  
Contractor: \_\_\_\_\_ License Number \_\_\_\_\_  
Contractor Type (Check One): \_\_\_\_\_ Registered / Certified  
\_\_\_\_\_ Engineer  
\_\_\_\_\_ Architect  
\_\_\_\_\_ Building Inspector

Property Owner: \_\_\_\_\_  
First Middle Last

Job Site Address: \_\_\_\_\_  
Street City State Zip

Parcel ID#: \_\_\_\_\_  
\*\*\*\*\*

**By signing this affidavit, I am acknowledging that I personally conducted an inspection on the roof deck nailing and / or secondary water barrier of the above 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.).**

\_\_\_\_\_  
**Contractor's Signature** **Date**

**STATE OF FLORIDA  
COUNTY OF MADISON**

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D.  
by \_\_\_\_\_.

**Notary Public, State of Florida:**

\_\_\_\_\_  
(Print, Type, or Stamp Name) (Commission No.)  
\_\_\_\_\_ Personally Known  
\_\_\_\_\_ Produced Identification • Type of Identification Produced \_\_\_\_\_

**\*\*General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit number or address number clearly shown marked on the deck for each inspection.\*\***