



**GROWTH AND RESOURCE MANAGEMENT**

Building and Zoning  
123 West Indiana Avenue  
Deland, FL 32720  
(386) 736-5929 Fax (386) 943-7096

To: The County of Volusia  
Building Activity

Permit #: \_\_\_\_\_

**ARCHITECT/ENGINEER AFFIDAVIT**

Before me, the undersigned authority, personally appeared \_\_\_\_\_,  
(Architect or Engineer)

License Number \_\_\_\_\_, who being duly sworn, deposes and says:

I did personally inspect and examine the Roof Installation constructed at  
\_\_\_\_\_. Based upon my examination, I have  
determined that the construction was done according to the plans, specifications, and design and  
meets the requirements of the current edition or \_\_\_\_\_ edition of the Florida Building Codes  
and amendments thereto.

Further affiant saith not.

\_\_\_\_\_  
Affiant – Signed and Sealed

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by  
\_\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Florida signature

\_\_\_\_\_  
(Print, type or stamp name)

Personally known \_\_\_\_\_ or  
Produced Identification \_\_\_\_\_  
Type of identification produced \_\_\_\_\_

Commission No.: \_\_\_\_\_