

County of Volusia
BUILDING DEPARTMENT

RE: Permit # _____

3/16/17

Roof Deck Nailing Affidavit

Affidavit(s) from contractors will only be accepted when an in progress inspection has been scheduled the prior working day.

I _____, licensed as a Contractor*
(please print name and circle license type) /Engineer/Architect,

License #: _____

(This is to be completed by the person that has signed below after their inspection is complete, this area of the affidavit is to remain blank if notarized at time of permit issuance.)

On or about (Date) _____ (Time) _____, I did personally inspect the **roof deck nailing** work at:

(Job Site Address)

Based upon that examination I have determined the installation was done according to the current Florida Existing Building Code, sections 606.3.2 & 611.7.1

Signature

STATE OF FLORIDA
COUNTY OF

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

By _____.

Notary Public, State of Florida

(Print, type or stamp name)

Commission No.: _____

Personally known _____ or

Produced Identification _____

Type of identification produced. _____

* **General, Building, Residential or Roofing Contractor.**