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.