



Escambia County Building Inspections Division
 3363 West Park Place
 Pensacola, FL 32505
 Telephone: (850) 595-3550 Facsimile (850) 595-3575
INTERACTIVE VOICE RESPONSE (IVR): (850) 471-6640
 On the Web: www.myescambia.com

ROOFING INSPECTION AFFIDAVIT

Roofing Permit No. _____

I, _____, licensed as a(n) Contractor /
 (Please Print Name and CIRCLE License Type)
 Engineer / Architect / FS 468 Building Inspector; **License No.** _____

On or about _____, I did personally inspect
 (Date and Time)

the **roof deck nailing** work at _____.
 (Job Site Address)

Based upon that examination, I have determined that the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

 Signature

 Date

****General, Building, Residential, or Roofing Contractor or any individual certified under Florida Statute ¶ 468 to make such an inspection. (Include photographs of each plane of the roof, with the permit number or address number clearly shown.)**

Notary Section

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____

by _____ who is personally known to me or who has presented _____ as identification.

(Notary Seal)

 Signature of Notary

AFFIDAVIT MUST REMAIN ON JOB SITE