

City of Port Richey

Inspection Affidavit



THIS COMPLETED FORM MUST BE POSTED AT THE JOB SITE OR TURNED INTO THE BUILDING DEPARTMENT OFFICE PRIOR TO FINAL INSPECTION BEING COMPLETED

RE: Permit # _____

I, _____, licensed as a(n) Contractor/Engineer/Architect/Chapter 468, Florida

Statutes Building Inspector License # _____

On or about _____, did personally inspect the

Roof Deck Nailing or Secondary Water Barrier (Circle one and/or both)

At the following address: _____

(Job Site Address)

Based upon that examination, I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on Section 553.844, Florida Statutes)

Signature: _____

STATE OF FLORIDA COUNTY OF _____

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

By _____, who is personally known to me or produced

(Name of Person Making Statement)

_____ as identification.

(Print, type, or stamp name of Notary)

Commission No: _____

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