



**Alachua County Board of County Commissioners
Department of Growth Management**

10 SW 2nd Ave., Gainesville, FL 32601
Website: <https://growth-management.alachuacounty.us>

Submit Questions to: **Building Division**
Tel. 352.374.5243

Email: building@alachuacounty.us

ROOF INSPECTION AFFIDAVIT

Permit Number _____ Jobsite Address _____

I/We, _____, licensed as
 Contractor* FS 468 Building Inspector*
 Engineer
 Architect

License Number _____ on or about (Date & Time) _____

I did personally inspect the Roof deck nailing and/or work at address _____
 Secondary water barrier

Roof Deck: OSB _____ Thickness _____ Plywood _____ Thickness _____

Replaced any rotten wood per FBEC 602.2 and added crickets or saddles on ridge side of any chimney over 30 inches in width per FRBC 903.2.2.

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

Signature of Contractor/Contractor designee or FS 468 Inspector _____

STATE OF FLORIDA
COUNTY OF ALACHUA

The foregoing instrument was acknowledged before me by means of _____ physical presence _____, online notarization, this _____ day of _____, _____ (year)

by _____ (name of person) as _____ (type of authority, e.g. officer, trustee, attorney in fact) for _____ (name of party on behalf of whom instrument was executed).

(SEAL ABOVE)

NOTARY PUBLIC, STATE AT LARGE

*General, Building, Residential, or specialty Contractor or any individual certified under FS 468 to make such an inspection.