CITY OF MINNEOLA, FLORIDA
Building Department

Permit No._____

Re-Roof Inspection Mitigation Affidavit

I, _____, am duly licensed by the State of Florida as a:
(Printed name)

[Please check one]

☐ Class A Contractor (General)	License No. _____
☐ Class B Contractor (Building)	License No. _____
☐ Class C Contractor (Residential)	License No. _____
☐ Roofing Contractor	License No. _____
☐ Professional Engineer	License No. _____
☐ Registered Architect	License No. _____
☐ Building Inspector	License No. _____

I hereby affirm that on _____ at _____, I did personally inspect the:
(Date & time)

[Please check all that apply]

☐ ***Roof deck nailing*** ☐ ***Secondary water barrier***

at the following location: _____; ALT Key#_____
(Job Site Address)

Based upon that examination, I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Section 553.844, F.S.), and further that the installation is in accordance with any/all manufacturer's installation instructions.

Attached hereto are photographs of each plane of the roof with the permit number or street address number clearly shown and as marked on the deck for each inspection.

_____ _____
Licensed Professional's Signature **Date**

STATE OF FLORIDA

COUNTY OF _____

*The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who ☐ is personally known to me, **or** ☐ who has produced _____ as identification.*

_____
Signature of Notary Public

SEAL: