



City of Minneola Building Department

Re-Roof Inspection Mitigation Affidavit

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

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)
Roof deck nailing Secondary water barrier
at the following location: _____; ALT Key: _____.

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 clearly shown, and as marked on the deck for each inspection.

Licensed Professionals Signature Date

State of Florida
County of _____

The forgoing instrument was acknowledged before me this _____ day of _____,
20____, by _____, who is:

Personally know to me
Has produced _____ as identification

SEAL: _____
Signature of Notary Public