

Permit # _____

City of Venice
Development Services
Building & Code Enforcement Department
Fax: 941-486-2448

Roof Inspection Affidavit

I, (print) _____, licensed as a Contractor Engineer Architect
(License # _____) on or about (date and time), _____, did personally inspect the . . .

(Select sections that apply)

Required for all roof replacements on single-family residential structures built prior to March 1, 2002:

Roof deck nailing Secondary water barrier

The work must be inspected and by a Florida Professional Engineer, Registered Architect, Licensed General Contractor, Building Contractor, Residential Contractor, or Roofing Contractor. This work does not require a roof sheathing inspection.

Required for all roof replacements on single-family residential structures built before March 1, 2002 and having a value greater than \$300,000:

Additional roof to wall connections

The work must be inspected by a Florida Professional Engineer, Registered Architect, Licensed General Contractor, Building Contractor, or Residential Contractor. **This work does require a roof sheathing inspection – Inspection Code VRU# 122.**

Affidavit must be presented with permit at time of Final Inspection for job approval.

. . . for the work located at (job site address) _____

Based upon that examination, I have determined the installation was done according to the Hurricane Mitigation Retrofits Manual (Based on 553.844 F.S. and Rule 9B-3.0475 FAC).

Contractor License # _____

Qualifier Signature

STATE OF FLORIDA, COUNTY OF _____

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

By _____
Notary Public, State of Florida

Architect/Engineer Signed & Sealed

Print, Type or Stamp Name
 Personally known or Produced Identification

Type of Identification Produced _____

*Notary to be filled out only for contractor signature.