



Sheathing Affidavit

Permit # _____ State Registration # _____

I, _____ of _____ am
(license holder's name) (company name)

a licensed _____ have personally inspected the
(type of contractor)

roof deck (sheathing)

at: _____
(site address)

On _____
(Date of inspection) (Time of inspection)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (based on 553.844 FS) and the Florida Building Code, Existing Building, Section 706

Print/Type Name Signature

* General, Building, Residential, or Roofing Contractor or any individual certified under 489 FS to make such an inspection.

STATE OF _____, COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____, by _____ who is personally known or produced _____ as identification.

NOTARY STAMP HERE

Exp. Date: _____ Commission Number: _____

Signature of Notary Public: _____
Printed name of Notary Public: _____