

# INDIAN RIVER COUNTY

## BUILDING DIVISION

### After the fact Roof Certification Inspection Affidavit

(Approval to use this form is at the discretion of the Building Official)

RE: Permit # \_\_\_\_\_ Job Site Address \_\_\_\_\_

I \_\_\_\_\_, licensed as:  
(Please print qualifier's name and check the box next to the License Type)

- Contractor\*  
 Engineer  
 Architect  
 FS 468 Bldg. Inspector\*

License #: \_\_\_\_\_

On or about \_\_\_\_\_, did personally inspect the following items on this roof: \_\_\_\_\_  
(Date & time)

**The roof deck fastening**

I hereby certify the roof deck fastening is done in accordance with: (check one)

- Florida Existing Building Code Table 611.7.1.2  
 Roof material's Miami Dade N.O.A  
 Roof material's Florida Product Approval

**The underlayment**

I hereby certify the underlayment is installed in accordance with: (check one)

- Florida Existing Building Code section 611.7.2  
 Underlayment's Miami Dade N.O.A  
 Underlayment's Florida Product Approval

**The flashing, roof covering and final installation**

I hereby certify the flashing, roof covering, and final are installed in accordance with: (check one)

- Florida Building Code Residential chapter 9  
 Roof covering's Miami Dade N.O.A  
 Roof covering's Florida Product Approval

\_\_\_\_\_  
Qualifier's Signature

Personally known or  Produced Identification

Type of identification produced. \_\_\_\_\_

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_ 201\_\_

By \_\_\_\_\_.

Notary Public, State of Florida

Commission No.: \_\_\_\_\_

\_\_\_\_\_  
(Print, type or stamp name)