



**CITY OF OKEECHOBEE  
BUILDING DEPARTMENT  
55 SE THIRD AVENUE  
OKEECHOBEE, FL 34974  
Tele: 863-763-9821      Fax: 863-763-1686**

RE: Permit # \_\_\_\_\_

## Roofing Affidavit

I, \_\_\_\_\_, licensed as a(n) Contractor\*  
(please print name) /Engineer/Architect, FS 468 Building inspector\*

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

On or about \_\_\_\_\_, I did personally inspect the roof deck nailing  
(Date & time)  
and/or secondary water barrier work at \_\_\_\_\_,  
(Job Site Address)

Based upon that examination I have determined the installation was done according to the current Edition of the Florida Building Code.

\_\_\_\_\_  
Signature

**This signed and notarized affidavit must be provided at the job site at the time of the final roofing inspection along with digital photographs of each plane of the roof with the permit number or address number clearly marked on the deck for each inspection. The photographs must include a ruler or measuring device to confirm nail spacing and overlaps.**

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

The foregoing instrument was acknowledged before me, by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_, by \_\_\_\_\_.

Personally known OR produced identification.

(Name of person)

Type of Identification Produced:

\_\_\_\_\_  
Signature of Notary

(seal)

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection.