CITYOF ST. AUGUSTINE
PLANNING & BUILDING DEPARTMENT

Hurricane Damage Mitigation Provisions (HB 7057)
Roofing Inspection Affidavit

I, _____, duly licensed by the State of Florida under

☐ Florida Statute 468, Building Inspector ☐ Florida Statute 471, Engineer

☐ Florida Statute 481, Architect ☐ Florida Statute 489, Contractor

hereby affirm that on _____, 2007, I personally inspected
(Date & time)

installation of the following roofing and structural retrofit components required pursuant to F.S. 553.844 and Rule 9B-3.0475 FAC.

_____

_____

_____

_____

_____
(Job Site Address)

Based upon my inspection I have determined the installation was completed in compliance with the provisions of the **Hurricane Mitigation Retrofit Requirements pursuant to 553.844 F.S.)**

_____ License No. _____
Signature

STATE OF FLORIDA
COUNTY OF ST. JOHNS
Sworn to and subscribed before me this ____day of _____. 200__

By _____. _____
Notary Public, State of Florida (Print, type or stamp name)

Personally known _____ or
Produced Identification____
Type of identification produced._____

INCLUDE PHOTOGRAPHS OF EACH PLANE OF THE ROOF AND A PHOTOGRAPH OF THE FRONT OF THE HOUSE CLEARLY SHOWING THE HOUSE ADDRESS NUMBERS.