

**CITY OF EDGEWATER
BUILDING DEPARTMENT**

104 North Riverside Drive
Edgewater, Florida 32132

Phone: (386) 424-2400 X 1514

FAX: (386) 424-2423



NAILING INSPECTION AFFIDAVIT

FOR LICENCED ROOFING CONTRACTORS ONLY

Permit Number _____ Project Address _____

I _____, THE QUALIFIER AND A LICENSED ROOFING CONTRACTOR LICENSE # _____. ON THIS DATE _____, HAS PERSONALLY INSPECTED THE ROOF DECK NAILING AT THE ADDRESS STATED ABOVE. BASED UPON THAT EXAMINATION I HAVE DETERMINED THE EXISTING NAILING AND / OR THE SUPPLEMENTAL NAILING HAS BEEN INSTALLED IN ACCORDANCE WITH THE FLORIDA BUILDING CODE – EXISTING BUILDING SECTION 708.7.1.

Signature: _____ Print Name: _____

NOTARY of the State of Florida County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____,

by _____ who is personally known to me or who has produced _____ as identification.

Signature of Notary Public, State of Florida SEAL: