

TOWN OF CALLAHAN

Post Office Box 5016 Callahan, Florida 32011

ROOFING CONTRACTOR INSPECTION AFFIDAVIT

I,	,the Contrac	tor/Qualifie	r do affirm and certify the roofing	system
installed under permit number	and located at			
compliance with Chapter 9 of the Florida Buildi Code - Existing Building, and the appropriate Pr described in the following sections:	ng Code - Resi	dential, Cha	er my supervision; and the roofing syn pter 6, Section 611 of the Florida Bu e 9N-3. The roofing system as install	ildin o
	Roof Peri	nit Type		
	(Check all t			
O Replacement Roofing	O Recovering		O Repair / Maintenance	
Roofin	g Category Sco	pe of Roofi	ng Work	
(0	Check / Complet	e all that app	oly)	
O Asphalt Shingles		O Flat Roof (membrane, built-up, etc.)		
O Mechanically Fastened Tile			r / Adhesive Set Tile	
O Metal Panels / Shingles			Shingles / Shakes	
O Other:				
Flat Roof Area (<2"/12"):s.f.		Low Slop	pe Roof Area (>2" to 4"/12"):	s.f.
Steep Slope Roof Area (>4"/12"):	s.f.	Total Ro	of Area Under This Permit:	s.f.
	Roof Sheathin	Evaluation	1	
as the roof sheathing evaluated for insufficient con	nections or any	deterioration	?	
id any of the roof sheathing need replacement?		Appro	x. square footage:	
hat type of material was used to replace the deficien	at roof sheathing	?		
as the roof sheathing been fastened to Code?		Type of i	fastener:	
hat is the fastener spacing? Field:	Perimet	er:		

Telephone: 904-879-3801 • Fax: 904-879-6151 • admin@townofcallahan-fl.gov

Website: www.townofcallahan-fl.gov

Roof Underlayment / Roof Covering Information

Underlayment

Notary Signature

Type of underlayment / secondary water barrier installed: Lapping of head joints & side joints provided in inches: Fastener spacing for underlayment product (if applicable): Field: Perimeter: Laps: Drip edge materials, size, gauge, fastener type & spacing: Valley materials, size, gauge, fastener type & spacing: Other installed flashing material, size, gauge, fastener type & spacing: Ridge vent material, fastener type, spacing & strapping: Roof Covering Roof Covering Product Approval #: Roof Covering Type:____ Roof Covering Manufacturer: Roof Covering Attachment Method: Fastener Type & Quantity: This affidavit must be kept with the permit documents for the Building Inspector to review at every INSPECTION. I affirm and certify the information provided in this affidavit is true and correct. The work was completed under my supervision and complies with the applicable sections of the Florida Building Code. Contractor / Qualifier Signature Date State of Florida County of Nassau The foregoing instrument was acknowledged before me this day of by who is personally known to me or (name of person) who has produced ___ (type of Identification) as identification.

(Seal)