Columbia County, Florida
Building Department
135 NE Hernando Avenue
Lake City, Florida 32055
Phone: 386-758-1008
www.columbiacountyfla.com

ROOFING UNDERLAYMENT AFFIDAVIT

REQUIRED FOR WALK-IN OR PAPER SUBMITTALS

Job Address: 148 SW PLATEAU GLN LAKE CITY, FL 32024

I (Print Name) Deliana Rojas Munoz, as a Florida license Roofing Contractor or an Owner Builder, I understand to comply with the 2020 Florida Building Code 7th Edition underlayment requirements, I must select an option for sealing the roof deck.

The options are summarized below...

☐ **a self-adhering polymer-modified bitumen underlayment complying with ASTM D1970 applied over the entire roof.**

☐ **a minimum 4-inch wide strip of selfadhering polymer-modified bitumen complying with ASTM D1970 or a minimum 3 ¾ - inch wide strip of selfadhering flexible flashing tape complying with AAMA 711, applied over all joints in the roof decking. A felt underlayment complying with ASTM D226 Type II, ASTM D4869 Type III or IV, or ASTM D6757, or a synthetic underlayment meeting the performance requirements specified, is required to be applied over the strips/tape over the entire roof.**

☑ **two layers of felt underlayment comply ASTM 0226 Type II or ASTM D4869 Type III or IV, or two layers of a synthetic underlayment meeting the performance requirements specified, lapped and fastened as specified.**

☐ **Other (explain)** _____

Contractor/Owners Signature _____

FINAL INSPECTION & CERTIFICATE OF COMPLETION:

This completed form and photographs must be uploaded to your permit via online at the Application Submission login (link) Welcome to Columbia County Online (columbiacountyfla.com).

Clearly visible in the Photographs must be the permit number or address and must include a ruler or measuring device to confirm nail spacing and overlaps including drip edge and valley flashing.

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I Deliana Rojas Munoz, Licensed as a ☑ Contractor, ☐ Engineer, or ☐ Architect, with License # CCC1331690 do hereby affirm that all of the information provided to obtain this permit is true and accurate and that the sheathing, nailing, dry-in, venting and flashings at the above referenced address will be installed in accordance with the applicable codes, Florida product approval installation instructions and standards set forth in the most current edition of the Florida Building Code- Residential and the Florida Building Code- Existing Building.

(Affiant Signature)

STATE OF Florida
COUNTY Columbia

The foregoing instrument acknowledged before me by means of ☑ physical presence or ☐ online notarization, this 19 day of April 2022, by Deliana Rojas Munoz, who is ☑ personally known to me or ☐ has provided the following identification _____.

Notary Public Signature _____ (Seal)
Notary Printed Name DeLisa Nelson

Notary Public State of Florida
DeLisa Mara Nelson
My Commission HH 118916
Expires 04/19/2025

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