



Columbia County
BUILDING DEPARTMENT

Fouraker

49

Inspection Affidavit

RE: Permit Number: 30333

I Don Reed, licensed as a(n) Contractor* /Engineer/Architect,
(please print name and circle Lic. Type) FS 468 Building Inspector*

License #: RC 0055399

On or about 9.11.12, I did personally inspect the
(Date & time)

☐ roof deck attachment ☐ secondary water barrier ☐ roof to wall connection

work at 450 Zack Dr. LC
(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

Don Reed
Signature

STATE OF FLORIDA
COUNTY OF

Sworn to and subscribed before me this 18 day of September, 2012

By [Signature], 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 with the permit number clearly shown marked on the deck for each inspection. Place a tape measure next to the nailing pattern to show distance between nails.**

*** Photographs must clearly show all work and have the permit number indicated on the roof.**

*** Affidavit and Photographs must be provided when final inspection is requested.**