



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: 151 NW Heritage Dr. Lake City, FL 32055

I (Print Name) James Nichols, 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 \(columbiacountyfla.com\)](http://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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JOB ADDRESS: 151 NW Heritage Dr. Lake City, FL 32055

I (Print Name) James Nichols, licensed under Chapter 468, Florida Statutes as a(n):

(Check One) ☒ Contractor ☐ Engineer ☐ Architect

License Number: CCC1329912

On this (Date) 9/15/21, did personally examine the roof at the above address for regulatory compliance as required for: (Check all that apply)

☒ Roof Deck Attachment ☒ Secondary Water Barrier ☐ Roof to Wall Connection

Based on my examination, I have determined and affirm the installation is in accordance with the Florida Building Code 2020 7th Edition and 2020 Florida Statute (553.844).

[Signature]
(Affiant Signature)

STATE OF Florida
COUNTY Clay

The foregoing instrument acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 15th day of September 2021, by J. DOUGLAS NICHOLS, who is ☒ personally known to me or ☐ has provided the following identification _____.

Notary Public Signature Sherry D. Olmstead (Seal)

Notary Printed Name SHERRY D. OLMSTEAD



SHERRY D. OLMSTEAD
Commission # HH 027521
Expires November 13, 2024
Bonded Thru Budget Notary Services

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