



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

## **ROOFING UNDERLAYMENT AFFIDAVIT**

[www.columbiacountyfla.com](http://www.columbiacountyfla.com)

### **REQUIRED FOR WALK-IN OR PAPER SUBMITTALS**

**Job Address:** 2118 SW Loncala Loop Fort White, FL 32038

I (Print Name) Daniel Dufresne, as a Florida license Roofing Contractor or an Owner Builder, I understand to comply with the 2020 Florida Building Code 7<sup>th</sup> 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

A handwritten signature in black ink, appearing to read "DD", is written over a horizontal line.

✓

### **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:** 2118 SW Loncala Loop Fort White, Florida 32038

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

(Check One) ☒ **Contractor** ☐ **Engineer** ☐ **Architect**

**License Number:** CCC1332763

On this (Date) 09/08/2021, 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 7<sup>th</sup> Edition and 2020 Florida Statute (553.844).

(Affiant Signature)

STATE OF Florida

COUNTY Duval

The foregoing instrument acknowledged before me by means of ☐ physical presence or ☐ online notarization, this 8th day of September 20 21, by Daniel Dufresne, who is ☒ personally known to me or ☐ has provided the following identification \_\_\_\_\_.

Notary Public Signature Carrie Dees (Seal)

Notary Printed Name Carrie Dees



Carrie Dees  
Notary Public  
State of Florida  
Comm# HH155917  
Expires 7/20/2025

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