



Columbia County
BUILDING DEPARTMENT

Inspection Affidavit

RE: Permit Number: 000031984

I, [Signature] Licensed as () Contractor* Engineer Architect
print your name and title (see Note) FS 468 Building Inspector*

License # 113 [Signature]

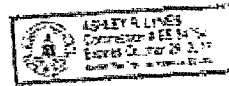
On or about 8/13/14 I did personally inspect the
date

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

at 5111 S. [Address] [Address]
see Note

Based upon that examination I have determined the installation was done according to the
 Hurricane Mitigation Retrofit Manual (Based on ASCE 7-10 F.S.)

[Signature]
 Signature



STATE OF FLORIDA
 COUNTY OF SCOTT

Sworn to and subscribed before me this 8 day of August 2014

[Signature] Notary Public, State of Florida

[Signature]
 (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

o/k
 10
 8-13-14