Cleveland



Personally known ____ or

Columbia County BUILDING DEPARTMENT

RE: Permit Number: 3039 **Inspection Affidavit** I Don Reed _____, licensed as a(n) Contractor* /Engineer/Architect, FS 468 Building Inspector* (please print name and circle Lic. Type) License #: RC 0055399 9. 29.12_____, I did personally inspect the roof deck attachment secondary water barrier roof to wall connection work at 3483 Sw Herlong Street Ft. White F2 32038 (Job Sije 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.) Signature STATE OF FLORIDA COUNTY OF
Sworn to and subscribed before me this 25 day of 00000 . 201_2 . Notary Public, State of Florida LAURIE HODSON (Print, type or stamp itame)

* 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.

Produced Identification ____ Type of identification produced.__

- * 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.