



CITY OF OKEECHOBEE
 BUILDING DEPARTMENT
 55 SE THIRD AVENUE
 OKEECHOBEE, FL 34974
 Tele: 863-763-3372 ext.217 Fax: 863-763-1686

RE - ROOFING

Scope of Work – Reroofing - Inspection Affidavit

**Reroofing Inspection Affidavit
 Nailing, Sheathing, Dry-In & Flashing**

REROOF ONLY - NOT NEW CONSTRUCTION

Permit No: _____ Address: _____

I _____, as a(n) General*, Building*, Residential*, or Roofing Contractor, Engineer, Architect, or F.S. Chapter 468 Building Inspector, I hereby affirm, that all of the foregoing information is true and accurate and that the sheathing, nailing, dry-in, and flashings at the above referenced address/lot have been installed in accordance with the attached scope of work, complying with all applicable codes and standards. Based upon my examination I have determined the installation was done in conformance to the Hurricane Mitigation Retrofit Manual (Based on F.S. Chapter 553.844).

License #: _____

Company/Contractor: _____

Signature: _____ Date: _____

A final roofing inspection is required:

This signed and notarized affidavit must be provided at the job site at the time of the final roofing inspection along with digital photographs of each plane of the roof with the permit number or address number clearly marked on the deck for each inspection. The photographs must include a ruler or measuring device to confirm nail spacing and overlaps.

STATE OF FLORIDA
 COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____ who is personally known to me ___or has produced _____ as identification and who ___did or ___did not take an oath.

 Notary Public

Printed Name: _____

My Commission Expires: _____