



**BRADFORD COUNTY
BUILDING DEPARTMENT**
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REROOFING INSPECTION AFFIDAVIT

RE: Permit # _____ Jobsite Address: _____

I _____, licensed as a Division-1 or Roofing Cont. ,Architect ,Engineer ,Inspector-FS.468*
(Please Print Name)(Please Underline All That Apply)

License #: _____ On or about _____, I did personally
(Date & Time)

inspect the} (roof deck attachment)--and--or--(secondary water barrier installation)--or--(condition of existing 1 layer roofing)
{existing roofing as secondary water barrier}

Roof Deck: (OSB) or (CDX) or (Planking) Thickness_____ Product used for secondary water barrier_____

Any rotten wood found was replaced as per FBC-EB Section 611 and crickets or saddles were installed on the ridge side of any chimney over 30 inches in width and was flashed per FBC-RES. 905.2.8.3.

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S. Windstorm Loss Mitigation) and the FBC-EB Section 611

Signature of Contractor, Design Professional or FS 468 Building Inspector

STATE OF FLORIDA
COUNTY OF BRADFORD

SWORN AND SUBSCRIBED BEFORE ME
THIS _____ DAY OF _____, 2_____

BY _____
(WHO IS PERSONALLY KNOWN TO ME) OR HAS (PRODUCED FI. IDENTIFICATION)

(TYPE OF IDENTIFICATION)

(SEAL ABOVE)

Notary Public, Commission No. _____
(Name of Notary typed, printed, or stamped)

* A Division 1 Contractor ,Roofing Contractor ,Architect ,Engineer or Inspector Licensed under FS. 468 may perform the inspection.