



City of PALM COAST

Roof Deck Nailing / Secondary Water Barrier Inspection Affidavit

(For use with contractor issued permits only)

Permit # _____

I, _____, *licensed contractor / engineer / architect / FS 468 Bldg Inspector
Print name circle one

License # _____ on or about _____ did
Date and time

Personally inspect the roof deck nailing and / or secondary water barrier work located at

Job site 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 of License Holder

State of Florida
County of Flagler

Sworn to and subscribed (affirmed) to me before me this _____ day of _____ in the year _____
by _____. Personally Known _____ or Produced ID _____

Type of Identification: _____

Notary Public

Return to buildingdivision@palmcoastgov.com

*General, Building, Residential or Roofing Contractor or any individual certified under 468 F.S. to make an inspection.