



# CITY OF LONGWOOD

*Fostering citizen trust and cultivating a prosperous community*

## Residential Re-Roof

(Hurricane Mitigation Inspection Affidavit)

Permit #: \_\_\_\_\_

I, \_\_\_\_\_ hereby acknowledge that I personally inspected

Roof deck nailing and/or  Secondary water barrier work

at \_\_\_\_\_

(Job Site Address)

and have determined that the work was done according to the Florida Building Code.

I certify that my statements herein are true and accurate to the best of my belief and that I fully understand that making any false statements in writing with the intent to mislead a public servant in the performance of his or her official duty shall constitute a misdemeanor of the second degree pursuant to Section 837.06 F.S.

\_\_\_\_\_  
Signature of Contractor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Contractor

\_\_\_\_\_  
License #

License Type:  General  Building  Residential  Roofing Contractor  
 or any individual certified in accordance with F.S. 468 to make such an inspection.

STATE OF FLORIDA COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

by \_\_\_\_\_, who is  Personally Known to me or has  Produced

(type of identification) \_\_\_\_\_ as identification.

(SEAL)

\_\_\_\_\_  
Signature of Notary Public  
State of Florida

\_\_\_\_\_  
Print/Type/Stamp Name  
of Notary Public