

Building Division
705 N Church Ave
Mulberry, FL 33860
(863)534-6552
www.cityofmulberryfl.com



RE-ROOF AFFIDAVIT

In-Progress: Contractors -A complete affidavit must be on the job site in case the inspector does not arrive before completion of work. If re-roof work is completed prior to inspector arrival, the inspector will accept a properly completed affidavit and may do the Final inspection.

Permit Number: _____ Job Site Contact Phone Number: _____

Site Address: _____

Contractor/Owner Builder Name: _____ Contractor ID: _____

Nail schedule of purling and/or re-nailing of decking: _____

Amount of Framing/Sheathing Repair: _____

Specifications & type of underlayment overlap and roof pitch: _____

Sealed edges, objects, and valleys, valley material type with a minimum of four-inch (4") flashing cement: _____

Nail schedule for eve drip, metal, roof shingles: _____

Roof Vent Types and Qualities

Gas Plumbing Dryer Range Bath

Attic Ventilation

On Ridge Off Ridge

Date Work Performed: _____

Print Name: _____

Signed: _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____,
by _____

Who Is or Is Not personally known to me. Identified By: _____
(type of identification)

NOTARY PUBLIC SIGNATURE

PRINT NOTARY NAME

My Commission Expires: _____

(SEAL)