



CITY OF MULBERRY
CONSTRUCTION SERVICES
INSPECTION AFFIDAVIT

RE: PERMIT #: _____

I, _____, licensed as a CONTRACTOR/*ENGINEER/ARCHITECT
FS468 BUILDING INSPECTOR

LICENSE #: _____

On or about _____, I did personally inspect the ROOF, DECK NAILING
and/or SECONDARY WATER BARRIER work 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

STATE OF FLORIDA
COUNTY OF POLK

Sworn to and subscribed before me this _____ day of _____, 20____

By _____, Notary Public, State of Florida

Print, Type or Stamp Name
Commission No: _____

Personally know _____ or Produces ID _____
Type of ID produced _____

*General, Building, Residential or Roofing Contractor or any individual certified under 468 F.S.
to make such an inspection. Include photos of each plane of the roof with the permit # or address
clearly shown marked on the deck for each inspection.