

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 jobsite in case 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

Attic Ventilation

Gas_ Plumbing_ Dryer_ Range_ Bath_

On Ridge_ OffRidge_

Date: Work Performed: _____

Print Name: _____

Signed: _____

SWORN TO and subscribed before me this _____ day of, _____ 20 _____

IS () or IS NOT () personally known to me. Identified By: _____

NOTARY PUBLIC
State of Florida

My Commission Expires