

## **ROOFING NAIL-IN AFFIDAVIT**

## **REGARDING ROOF NAIL-IN INSPECTIONS:**

COMPANY:	LICENSE NO:	
	PROJECT INFORMATION	
SUBDIVISION:	ADDRESS:	
PERMIT NO:	LOT:	
I,, affian permit, that all of the foregoing information is tru address/lot has been installed in accordance wit	••	the above referenced
	CONTRACTOR:(Printed Name)	_
	(Signature)	_
STATE OF FLORIDA		
COUNTY OF		
, a	pefore me thisday of,, by who acknowledged that he/she is a duly licensed contractor with and who acknowledged that he/she was authorized to execute the	the above referenced is document. He/she is
either personally known to me, or pr	roduced as valid identification.	
WITNESS my hand and official se	eal this,	
SEAL	Notary Public	_
	Printed Name:	_