



**CITY OF OKEECHOBEE  
BUILDING DEPARTMENT  
55 SE THIRD STREET  
OKEECHOBEE, FL 34974**

**Tele: 863-763-9821 Fax : 863-763-1686**

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

**Roofing Affidavit – Owner Builder**

I, \_\_\_\_\_, am the Owner/Builder for job site.  
(please print name)

On or about \_\_\_\_\_, I did personally inspect the roof deck nailing  
(Date & time)

and/or secondary water barrier work at \_\_\_\_\_,  
(Job Site Address)

Based upon that examination I have determined the installation was done according to the current edition of the Florida Building Code.

\_\_\_\_\_  
Signature

**This signed and notarized affidavit must be provided at the job site at the time of the final roofing inspection along with digital photographs of each plane of the roof with the permit number or address number clearly marked on the deck for each inspection. The photographs must include a ruler or measuring device to confirm nail spacing and overlaps.**

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

The foregoing instrument was acknowledged before me, by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, by \_\_\_\_\_.

Personally known OR produced identification.

(Name of person)

Type of Identification Produced:

\_\_\_\_\_  
Signature of Notary

(seal)