

Permit No: _____

I, _____, License Number _____, hereby certify that based
(Type or Print Name) (Florida License No.)
on my examination on _____ the roof deck nailing and secondary water barrier
(Date and Time)
for the work located at _____ was installed according to
(Job Site Address)
the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.).

Signature: _____

**STATE OF FLORIDA
COUNTY OF PINELLAS**

The instrument was acknowledged before me on this _____ day of _____, 20____, by
_____.

___ Personally Known
___ Produced Identification: _____

NOTARY PUBLIC
My commission expires: _____

NOTE: Include photographs of each plane of the roof with the permit number or job address number clearly shown marked on the roof deck for each inspection.

(Florida licensed general, building, residential or roofing contractor or any individual certified under Chapter 468, Part XII, F.S. to make such an inspection.)