



Town of Hypoluxo Building Division

INSTALLATION AFFIDAVIT WINDOW & DOOR (replacement)

To: Town of Hypoluxo, Florida
Building Division
Field Inspection Section
7580 S. Federal Highway
Hypoluxo, FL 33462

Re: Permit No. _____

From: _____ (Contractor)
_____ (Contractor's Address)
_____ (Owner/s Name)
_____ (Property Address)

CERTIFICATION SELECTION: *(Please check all that apply)*

- ☐ Certification of Window Installation
☐ Certification of Door Installation
☐ Other _____ (glass block, etc)

I, _____, am a licensed contractor (license No. _____) and do hereby certify that all work (as indicated above) has been performed and installed at the above address in accordance with the 2010 Florida Building Code, Existing Building, as amended, and Manufacturer's Installation Instructions/NOA/ Product Approvals submitted.

Signature of Qualifier

Date

STATE OF FLORIDA, COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this _____ (date) by _____, who is personally known to me or who has produced _____ (type of identification) as identification and who did (did not) take an oath.

(SEAL)

Signature of person taking acknowledgement _____

Name of officer taking acknowledgement—typed, printed or stamped _____

Title or rank _____ Serial number _____