



Town of Hypoluxo Building Division

LICENSED ROOFING CONTRACTOR AFFIDAVIT ROOF METAL & ROOF SHEATHING INSTALLATION

***The Town of Hypoluxo offers progressive inspections – fax request to 582-0703
No Inspections on Fridays***

To: Town of Hypoluxo, Florida
Building Inspections
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 roof metal installation, flashing, underlayment.
☐ Certification of re-nailing roof sheathing, and removal and replacement of damaged or rotted wood.
☐ Other _____

I, _____, am certified as a roofing contractor (License No. _____) and do hereby certify that all roof work (as indicated above) has been performed at the above address in accordance with Chapter 15 of the Florida Building Code and Existing Building Code, as amended, and Manufacturer's Specifications. I understand that the Town of Hypoluxo offers progressive re-roof inspections. I have notified the owner of the property of this affidavit.

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 _____