



## LAKE WALES ROOFING AFFIDAVIT

**In-Progress Roofing inspections: Contractors/Home Owners must schedule the In-Progress Roofing inspection for the day the work is being performed.** A complete affidavit must be on the job with pictures of all planes of the roof in all stages of construction to include landmarks that verify location. Affidavit must be in conjunction to the in-progress roofing inspection, not in lieu of an inspection.

Permit Number: \_\_\_\_\_ Job Site Contact Phone Number: \_\_\_\_\_

Site Address: \_\_\_\_\_

Contractor or Owner Builder Name: \_\_\_\_\_ License Number: \_\_\_\_\_

Nail schedule of purling and/or re-nailing of decking: \_\_\_\_\_

Amount of Framing/Sheathing Repair: \_\_\_\_\_

Specifications & type of underlayment overlap, nailing and roof pitch: \_\_\_\_\_

Sealed edges, objects, and valleys, valley material type with a minimum of four inch (4") flashing cement: \_\_\_\_\_

Nail schedule for eve drip, metal, roof shingles: \_\_\_\_\_

Roof Vent Types and Quantities:	Attic Ventilation
Gas _____ Plumbing _____ Dryer _____ Range _____ Bath _____	On Ridge _____ Off Ridge _____

Date: Work Performed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_

SWORN TO and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

( ) IS ( ) IS NOT personally know to me. Identified By: \_\_\_\_\_

\_\_\_\_\_  
 NOTARY PUBLIC  
 State of Florida, County of Polk

\_\_\_\_\_  
 My Commission Expires

*For questions, please call 863.676-5115  
 or email Permitting@Lakewalesfl.gov*