



City of Fort Pierce Building Department

P.O. Box 1480 Fort Pierce FL 34954
Tel. 772-460-2200 Fax 772-468-9836

Dry-In Inspection Affidavit

Building Permit Number: _____ Date: _____

Job Site Address: _____

Contractor: _____ Phone No. _____

Qualifier's Name: _____ License No. _____

I, _____, do hereby affirm:
Print Name

That, due to the threat of inclement weather or other unforeseen circumstances, I failed to request or receive a dry-in inspection from the building department, at the above referenced property.

That I have personally inspected the underlayment and metal flashing for the roof area covered by the building permit number listed above, and further state that the underlayment and metal flashing were installed in full compliance with the Standard Building Codes.

I fully understand that if any violations are discovered, the Building Department may file an action against my certification with the Fort Pierce Contractors' Licensing Board.

Qualifier's Signature

Date

State of Florida County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 200__, by _____ who is personally known to me or who has produced _____ as identification. (S)he affirms that the statement signed above is true and correct by his/her own personal knowledge.

Notary: _____

{Seal}