Town of Palm Beach Shores
247 Edwards Lane, Palm Beach Shores, FL 33404
Phone: (561) 844-3457 Fax: (561) 863-1350

ROOFING CONTRACTOR AFFIDAVIT

(ROOFING SHEATHING, TIN TAG AND ROOF METAL INSTALLATION)

TO: Town of Palm Beach Shores
RE: Permit # _____
Job Address _____
Subdivision/Plaza _____
FROM: _____ Contractor
_____ Address
_____ Property Owner
_____ Address

Certification selection…

_____ Certification of re-nailing roof sheathing

_____ Certification of tin tag and roof metal installation

_____ Other _____

Important Note: **An In-Progress Inspection <u>MUST</u> be scheduled the day before starting the work.**

I,_____ am certified as a roofing contractor and do hereby certify that all roof work indicated above has been performed at the above address in accordance with Chapters 15,16, and 23 of the Florida Building Code. <u>Photographs are being provided that clearly depict each step of the work.</u>

_____ _____ _____
Signature of Qualifier License# Date

Sworn and Subscribed Before Me this_____day of_____, 20_____.

_____ _____
Notary Public My Commission Expires