



BUILDING DEPARTMENT RE-ROOF AFFIDAVIT

EFFECTIVE 06/01/2025 – **In-Progress and Final inspections are required** to be conducted by the City of Davenport. A completed, signed, and notarized re-roof affidavit must be on the job site or emailed to the Building Department at the Final Roof Inspection.

Permit Number: _____
Job Site Contact Phone Number: _____
Site Address: _____
Contractor Owner Name: _____
State of FL Certified Contractor License Number: _____

Nail Schedule of Purling and/or Re-Nailing of Decking: _____
Amount of Framing / Sheathing Repair: _____
Specification and Type of Underlayment _____
Overlap 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

Gas:	_____
Plumbing:	_____
Dryer:	_____
Range:	_____
Bath:	_____

Attic Ventilation:

On-Ridge:	_____
Off-Ridge:	_____

DATE WORK PERFORMED

PRINT NAME

SIGNATURE

STATE OF FLORIDA
COUNTY OF _____

SWORN to and subscribed before me this _____ day of _____, year of 20 _____.
☐ is ☐ is not personally known to me. Identified by Driver's ID _____

My commission expires: _____

Notary Public Signature