

**AFFIDAVIT OF COMPLIANCE WITH
ROOF DECKING ATTACHMENT AND SECONDARY WATER BARRIER
HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY
RESIDENTIAL STRUCTURES**

PURSUANT TO FLORIDA STATUTE 553.844

To: Hillsborough County Building Services Division
5701 E. Hillsborough Avenue, Suite 1140
Tampa, FL 33610

From: _____

To the Attention of the Building Official:

I _____ certify that on _____ the roof
(Work Performed Date)
decking attachment and fasteners have been strengthened and corrected and a secondary water barrier has been
provided as required by the "Manual of Hurricane Mitigation Retrofits for Existing Site-Built Family Structures"
adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Project Address

Permit No.

Signature of Qualifying Agent

Name of Qualifying Agent (PRINT)

License #

**STATE OF FLORIDA
HILLSBOROUGH COUNTY**

Sworn to and subscribed before me this _____ day of _____, 20____
by _____.

_____ personally known

_____ or produced identification (_____)

Indicate type of identification produced

Signature of Notary Public – State of Florida

Notary Stamp

NOTE: Notary date shall not predate Work Performed Date