



Department Community & Economic Development

Sheathing Affidavit/ Secondary Water Barrier **Per FBC- Existing Building, 5th Edition (2014) Section 708**

Job Address: _____ Permit No.: _____

Name of Roofing Company: _____

Name of Qualifier: _____ License No.: _____

Address: _____

Dear Building Official:

I, _____, certify that the roof decking attached and fasteners have been strengthened and corrected and a secondary water barrier has been provided as required by the Florida Building Code 2014 (Existing Building) sections 708.7.1 and 708.7.2

Qualifier/Contractor Signature * Date

_____, having first been duly sworn, does affirm
(Print Name of Qualifier/ Contractor) the statement above to be true and correct by his/her own personal knowledge.

Notary (Seal/Stamp) Date

- Personally Known to me
- Produced photo ID- Type of ID _____

* An Owner/Builder acting as contractor is considered the qualifier for this code.