



Community Development • Building Division  
 2200 Civic Center Place • Miramar, Florida 33025  
 Tel: (954) 602-3200 • Fax: (954) 602-3635  
<http://www.ci.miramar.fl.us>

## RENAILING AFFIDAVIT

Permit Number: \_\_\_\_\_

Job Address: \_\_\_\_\_

I, \_\_\_\_\_, do hereby affirm that I have personally  
*(print name clearly)*

inspected the re-nailing of roof sheathing for the area covered by the roofing permit referenced above, and further state that the fasteners of the sheathing meets the requirements of the Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Structures” adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

\_\_\_\_\_  
*Contractor/Qualifier Signature*                      *Company Name*                      *License Number*

State of Florida. County of \_\_\_\_\_  
 Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

\_\_\_\_ Personally known to me  
 \_\_\_\_ Produced photo identification (type: \_\_\_\_\_)

(seal/stamp)

Notary: \_\_\_\_\_ Date: \_\_\_\_\_