

**AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT AND SECONDARY
WATER BARRIER HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT
SINGLE FAMILY RESIDENTIAL STRUCTURES
PURSUANT TO SECTION 553.844 F.S.**

To: Miami-Dade County Building Department
11805 Coral Way, Suite 111
Miami, FL 33175

Re: Owner's Name _____

Property Address _____

Roofing Permit Number _____

Dear Building Official:

I _____ certify that the roof 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 Single Family Structures" adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Qualifying Agent

Signature of Qualifying Agent

Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____.

(SEAL)

____ Personally known
____ or Produced Identification