

**THIS SOFFIT INSPECTION AFFIDAVIT MUST BE PLACED ON THE JOBSITE AND AVAILABLE FOR INSPECTION AT THE FINAL BUILDING INSPECTION.**

PERMIT: \_\_\_\_\_ DATE: \_\_\_\_\_

JOB ADDRESS: \_\_\_\_\_

LOT / SUBDIVISION: \_\_\_\_\_

COMPANY: \_\_\_\_\_

I, \_\_\_\_\_, licensed as a Contractor, license

Please print name

number \_\_\_\_\_, did personally inspect the soffit nailing

License number

and / or installation, on or about, \_\_\_\_\_.

Date & Time

Based upon that Examination, I have determined the installation was done in accordance with the current

Florida Building Code – Residential Building Volume.

\_\_\_\_\_  
Contractor Signature and Date

STATE OF FLORIDA )

COUNTY OF \_\_\_\_\_ )

Sworn to and subscribed before me by means of [ ] physical presence or [ ] online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ (name of person acknowledging), who is [ ] personally known to me; or [ ] has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature of Notary Public (Seal)