



**Roof Deck Nailing Certification**

**Note: The roof deck nailing certification may only be completed by a roofing contractor licensed pursuant to Florida State Statute 489, an engineer licensed pursuant to Florida State Statute 471, or an architect licensed pursuant to Florida State Statute 481. This certification may be utilized in lieu of a sheathing inspection performed by the Building Department for existing residential roofs only, pursuant to the Florida Building Code, Existing Building Code and the Florida Building Code, Residential Code. All other required inspections must be performed in accordance with the Florida Building Code. The Building Department reserves the right to conduct all required inspections at any time. If it is found that the use of this form is fraudulent or inaccurate, the Building Department reserves the right to discipline and/or recommend disciplinary action against the person signing this form.**

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

I, \_\_\_\_\_, licensed as a roofing contractor, engineer or architect certify  
 (Printed Name)  
 that on or about \_\_\_\_\_, that I personally inspected the roof deck nailing at the  
 (Date)  
 site located at \_\_\_\_\_, and  
 (Property Address)

based upon my examination I have determined that the installation was done according to the current edition of the Florida Building Code, Existing Building, Section 706.1, 706.7.1 or the product approval submitted (whichever is more stringent).

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 License Number

STATE OF FLORIDA  
 COUNTY OF ST. LUCIE

SWORN TO and SUBSCRIBED before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_.  
 Who is personally known to me or who has produced \_\_\_\_\_ as  
 identification.

\_\_\_\_\_  
 NOTARY PUBLIC – STATE OF FLORIDA

MY COMMISSION EXPIRES: