



CITY OF MADEIRA BEACH

BUILDING & PERMITTING DEPARTMENT
300 MUNICIPAL DRIVE ♦ MADEIRA BEACH, FLORIDA 33708
(727) 391-9951 X 246 ♦ FAX (727) 399-1131
Email to buildingdept@madeirabeachfl.gov



INSPECTION AFFIDAVIT

RE: Permit # _____

I, _____,
(Please print name and check license type)

Licensed as a(n): Contractor Engineer Architect Building Inspector

on or about _____, did personally inspect the
(Date and time)

_____ work at _____.
(Description of work) (Job site address)

Being appropriately licensed to conduct this work and based upon the examination of such work, I have determined that the installation was done according to the Hurricane Mitigation Manual based on F.S. 553.844.

Signature of Inspector

Date