



**BUILDING DEPARTMENT
CERTIFICATE OF COMPLIANCE-ROOFING AFFIDAVIT
FOR METAL ROOFS ONLY – REQUIRED FOR FINAL INSPECTION**

Job Address: _____ Permit No. _____

Name of Roofing Company: _____

Name of Qualifier: _____ License No.: _____

Address: _____

I hereby certify to the Town Of Miami Lakes Building Department that all portions of the above described roof improvements, covered and unseen by the roofing inspector during “in-progress” inspections, was constructed and/or installed in accordance with approved plans, specifications and product control approval as per Florida Building Code.

Qualifier Signature Date

_____, having first been duly sworn, does affirm
(Print Name of Qualifier/Contractor)

the statement above to be true and correct by his own personal knowledge.

Notary (Seal/Stamp) Date

- Personally known to me
- Produced photo ID – Type of ID _____