

Calhoun County
Building and Planning Department
102 Courthouse Dr., Suite 112
St. Matthews SC 29135
PHONE (803) 874-4201

RE: Permit # _____

Roof Inspection Affidavit

I _____, licensed as a(n) Contractor*/Engineer/Architect,
(please print name and circle Lic. Type)

License #; _____

On or about _____, did personally inspect the roof
(Date & time)

deck nailing, flashing, secondary water barrier, and roof covering installation work at
(circle one or all) (Job Site Address)

Based upon that examination I have determined the installation was done according to the requirements of the currently adopted code and the manufacturers installation instructions.

Signature

STATE OF SOUTH CAROLINA
COUNTY OF

Sworn to and subscribed before me this _____ day of _____ . 20

By _____
Notary Public, State of South Carolina

(Print, type or stamp name)

Commission No.:

* General, Building, Residential, or Roofing Contractor or any individual certified to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.