

**OFFICE USE**

**FEES:**

Application Fee: \$ \_\_\_\_\_  
Other: \$ \_\_\_\_\_  
Total: \$ \_\_\_\_\_  
Paid: \_\_\_\_\_



**OFFICE USE**

Approved by Building Official: \_\_\_\_\_

Date: \_\_\_\_\_  
PERMIT #: \_\_\_\_\_

**ROOFING PERMIT APPLICATION**

Owner's Name: \_\_\_\_\_ email: \_\_\_\_\_

Address: \_\_\_\_\_ Ph# \_\_\_\_\_

Contractor's Name: \_\_\_\_\_ Ph# \_\_\_\_\_

Address: \_\_\_\_\_

State License # \_\_\_\_\_ Business License # \_\_\_\_\_

Address of Project: \_\_\_\_\_

Type of Roof/Re-roof: \_\_\_\_\_

Property/Parcel ID# & Legal description: \_\_\_\_\_

If the application is for a Commercial Project please list the Name of the Business: \_\_\_\_\_

**Flood Plain Administrator  
must determine Flood Zone  
Designation before a fill  
permit may be issued:  
FEMA designation: \_\_\_\_\_  
Date: \_\_\_\_\_**

Type of Building:  Single Family  Multi-Family  Commercial  
 Townhouse  Industrial  Shed  Pole Barn

Cost of Construction: \$ \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that NO WORK or installation has been commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. **I understand that a separate permit must be secured for electrical work, plumbing, signs, roofing, pools, furnaces, boilers, heaters, tanks, and air conditioners, etc.** (applications may be emailed to Ron Nippe, Building Permit Clerk, [rnippe@cityofapalachicola.com](mailto:rnippe@cityofapalachicola.com) or [buildingdept.@cityofapalachicola.com](mailto:buildingdept.@cityofapalachicola.com) or dropped off at City Hall, 192 Coach Wagoner Blvd., Apalachicola, FL 32320).

**WARNING TO OWNER: Your failure to record a Notice of Commencement may result in you paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or attorney BEFORE recording your Notice of Commencement.**

**For improvements to real property with a construction cost of \$2,500.00 or more, a certified copy of the Notice of Commencement is required to be submitted to the Building Department when application is made for a permit or the applicant may submit a copy of the Notice of Commencement along with an affidavit attesting to its recording. A certified copy of the Notice of Commencement must be provided the Building Department BEFORE the second or any subsequent inspection can be performed. Filing of the documents that have been certified may be done by mail, fax, or hand-delivery.**

OWNER'S AFFIDAVIT: I hereby certify that the information contained in this application is true and correct to the best of my knowledge, and that all work will be done in compliance with all applicable laws regulating construction and zoning.

\_\_\_\_\_  
Owner Date

\_\_\_\_\_  
Contractor Date

\_\_\_\_\_  
Notary as to Owner Date

\_\_\_\_\_  
Notary as to Contractor Date

My Commission Expires: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



City of Apalachicola  
Building Department  
162 Coach Wagoner Blvd., Apalachicola, FL 32320  
Phone: 850-653-7592  
[rnippe@cityofapalachicola.com](mailto:rnippe@cityofapalachicola.com) or  
[buildingdept@cityofapalachicola.com](mailto:buildingdept@cityofapalachicola.com)

PERMIT #: \_\_\_\_\_

ROOF INSPECTION AFFIDAVIT

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

I, \_\_\_\_\_, licensed as the following:  Engineer  Architect.  
 FS 468 Building Inspector  Owner/Builder

Florida License # \_\_\_\_\_

On or about Date: \_\_\_\_\_ Time: \_\_\_\_\_, I did personally inspect the Roof Deck Railing and/or Secondary Water Barrier located at the above address and affirm and certify that the roof deck nailing, secondary water barrier and roof to wall connection (if applicable) will be completed in accordance with F.S.553.844 and the Florida Building Code.

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

Under penalties of perjury, I declare that I have read the foregoing Inspection Affidavit and that all statements are true and correct.

\_\_\_\_\_  
Signature Date

Printed Name: \_\_\_\_\_

\*\* General, Building, Residential, or Roofing Contractor or any individual certified under 468.F.S. to make such an inspection. Include photographs of each plane of the roof with the permit number or address clearly shown on the deck for each inspection.

This completed Affidavit must be on-site at the time of final inspection. If this affidavit is NOT available, your final inspection will be failed with a fee.