



STORM SHUTTER INSTALLATION AFFIDAVIT

Building Permit No.: _____

Job Address: _____

Owner of Property: _____

Shutter Company: _____ License No.: _____

I, _____, **DO HEREBY AFFIRM:**

Please print name (Qualifier only)

That I personally observed the completed installation of all hurricane panels/shutters on the above referenced property and further affirm that they are fitted properly for the openings they are intend to protect.

Qualifier Signature: _____

DATE: _____

Sworn to and subscribed before me this _____ day of _____, 20__

By: _____

Seal/Stamp

Notary Public, State of Florida

Personally known to me: _____

Produced identification: _____

(Type of ID)

The Building Official will inspect the structural attachment of the panel rails and/or the shutter assembly attachment to the building, per the applicable Florida Product Approval or Miami Dade NOA and the 5th Edition Florida Building Code at Final Inspection.