



Miami Shores Village Bldg Department

10050 NE 2nd Ave * Miami Shores, Fl 33138
Phone 305-795-2204; Fax 305-756-8972

**AFFIDAVIT OF COMPLIANCE WITH ROOF TO WALL CONNECTION HURRICANE
MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL
STRUCTURES PURSUANT TO SECTION 553.844 F.S.**

To: Miami Shores Village Building Department
10050 NE 2nd Ave
Miami Shores, Fl 33138

Date: _____

Re: Owner's Name: _____
Property Address: _____
Roofing Permit Number: _____

Dear Building Official:

I _____ certify that I have improved the roof to wall connections of the referenced property as required by the Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Residential Structures as adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Signature

Print Name

License Number

State of Florida
County of Dade

The undersigned, being the first duly sworn, deposes and says that he/she is the contractor for the above property mentioned.

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

Notary Public, Sate of Florida at Large _____

(SEAL)