

BUILDING DIVISION

1600 Huntington Lane, Rockledge, FL 32955
Phone: 321-221-7540 | Fax: 321-204-6356



WIND-BORNE DEBRIS PROTECTION AFFIDAVIT

Permit #: _____

Phone #: _____

Job Address: _____

I, _____, Contractor of Record, License number

_____ or Owner of the above referenced property, do acknowledge and affirm that the exterior glazed openings shall be protected from wind-borne debris in compliance with the Florida Residential Code, 6th Edition 2017 Section R301.2.1.2 and will be installed in order to receive an approved final inspection by the following method as indicated below:

_____ Shutters

_____ Wood structural panels

_____ Storm panels

_____ Other: _____

****The wind-borne debris protection method chosen shall be included in the permitted scope of work or be issued under a separate permit exclusive of wood structural panels.**

State of Florida, County of Brevard

State of Florida, County of Brevard

Owner

Contractor

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced the following as identification:

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____, who is personally known to me or who has produced the following identification:

Signature of Notary

Signature of Notary

Print Name

Print Name

Seal:

Seal: