WINDOW REPLACEMENT AFFIDAVIT FOR WINDOW INSTALLATIONS

Re: Permit No	
From:	(Contractor's Address)
	(Owner/s Name)
CERTIFICATION: (Please check all that apply) I,, am licensed contractor (License No) and do hereby certify that all installation work (as indicated above) has been performed at the above address in accordance with the Florida Building Code, as amended, and Manufacturer's Specifications. I understand that the Building Official reserves the right to provide inspections connected to this permit if deemed necessary. I have notified the owner of the property of this affidavit.	
STATE OF FLORIDA, COUNTY OF	
, who is perso	ged before me this (date) by nally known to me or who has produced identification) as identification and who did (did not) take an
*Contractor must provide photo documen	ntation indicating the following:
1 Photo chausing Paus ananing Pus	ake and Framing

- 1. Photo showing Raw opening Bucks and Framing
- 2. Photo showing the screw sizes
- 3. Photo of screws in the window jambs
- 4. Photo of finished window