



Indian River County Building Division

Solar Tube Installation Inspection Affidavit

This affidavit must be submitted prior to scheduling the Final Inspection

PERMIT #: _____

JOB ADDRESS: _____

I, _____ licensed as a

Contractor, License #: _____

On (date and time), _____ I personally inspected the solar tube installation and certify that the unit has been mounted, sealed and fastened in accordance with the requirements of the Florida Product Approval/Miami Dade NOA Installation Instructions and in accordance with the 2020 7th Edition of the Florida Building Code.

Owner / Contractor Signature

PRINT Owner / Contractor Name

Acknowledgement for Person in an Individual Capacity	Acknowledgement for Person in a Representative Capacity
State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20 _____, by _____ who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal _____	State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20 _____, by _____ (Name of Person) as _____ (Explain Representative Capacity) for _____ (Name of Party on Behalf of Whom Instrument was Executed). who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal _____

This form must be completed and submitted to the Indian River County Building Division prior to the Final Inspection.

Applicant must have all applicable Manufacturer's Installation Instructions, Florida Product Approvals/Miami Dade NOA's on-site for the Final Inspection.