

City of Pompano Beach

Department of Development Services Building Inspections Division

100 W. Atlantic Blvd Pompano Beach, FL 33060 **Phone:** 954.786.4669 **Fax:** 954.786.4677

Building Safety Inspection Program Re-Inspection Affidavit

BORA Policy #05-05

Building Address:	Safety Inspection Report Permit #:	
	- Restor	ation Permit Number(s):
TO: Property Owner	-	
According to the requirements of BORA Policy #05- County Building Safety Inspection Report, COPB Po		
Select options below that apply:		-
Structural Repairs Completed	Electrical Repairs Comple	ted Both Repairs Completed
☐ To the best of my knowledge and belief, the requi Report have been successfully completed by the wor		
☐ To the best of my knowledge and belief, the requi Report were minor in nature, did not require permit		
☐ This report satisfies the requirements of the initia Inspection report completed under COPB Permit / C		the subsequent 10-year interval Building Safety
Please submit this affidavit to the Building Official (mechanically signed with embossed or wet seal) to sa Building Safety Inspection Program.		
	ACKNOWLEDGMENT	
☐ Registered Architect and/or ☐ Professional	Engineer Signature of Repor	ting Inspector, Seal AND Date
;		
State of Florida Registration #:	Email:	Telephone #: