



FIRE-RATED JOINT AND PENETRATION(S) AFFIDAVIT

Permit No:	
Project Name:	
Project Address:	

I, _____, the qualifying agent for the company noted below, HEREBY CERTIFY that all penetrations through walls, ceilings, floors and other barriers resulting from the passage of pipes, conduits, bus ducts, cables, wires, air ducts, pneumatic ducts and penetrations from similar building service equipment installed in connection with the above permit have been protected by approved fire rated materials or assemblies meeting the acceptance criteria of AMERICAN SOCIETY FOR TESTING AND MATERIALS (ASTM) E814, or UNDERWRITERS' LABORATORIES (UL) 1479, or other approved testing standard, and have been installed by qualified persons in accordance with the manufacturer's specifications, and are in compliance with the Florida Building Code and approved Plans.

I FURTHER CERTIFY that all joints installed in or between fire-resistance rated walls, floor or floor/ceiling assemblies and roofs or roof/ceiling assemblies have been protected by an approved fire-resistant joint system meeting the acceptance criteria of ASTM E1966, or UL 2079, or other approved testing standard.

Print Name	Title	Signature	Date
Company	Telephone	Email	
WITNESS:			
Print Name		Signature	
WITNESS:			
Print Name		Signature	

STATE OF _____
 COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this ____ day of _____, 20____ by:

 (NOTARY'S SIGNATURE)

Notary Name _____
 (Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____

Type of Identification Produced: _____





Gadsden County

Building Inspections Division

1-B E. Jefferson St./ Post Office Box 1799, Quincy, FL 32353

Phone: (850)875-8665 Fax: (850)875-7280