

**COMMUNITY DEVELOPMENT DIVISION**

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City of Beverly Hills

Affidavit regarding Non-Class A Wood Roof FIRE RETARDANT SPRAY AFFIDAVIT

Effective May 3, 2013, the Beverly Hills City Council amended Sections 9-1-202 and 9-I-2A02 of Article 2 of Chapter I of Title 9 of the Beverly Hills Municipal Code regarding wood roofs ("Wood Roof Provisions"). The Wood Roof Provisions require, among other things, that no later than July 1, 2014, all wood roofs in the City of Beverly Hills ("City") must be either fire retardant Class A, or treated with a fire retardant spray in accordance with the Wood Roof Provisions. Should a property owner wish to comply with the Wood Roof Provisions by applying a fire retardant spray to the property's non-Class A wood roof, the property owner and the certified applicator shall submit a signed affidavit indicating the manufacturer's recommended effectiveness period and the certified applicator's warranty period.

All sections below must be completed.

1. Property Information:

Parcel Number: _____ Number of Units: _____

Property Address: _____

Property Type [Check One]: SFR _____ Duplex _____ Condo: _____ Other: _____

2. Fire Retardant Spray Information:

Name of Fire Retardant Spray: _____

Manufacturer of Fire Retardant Spray: _____

Manufacturer's Recommended Effectiveness Period: _____

3. Certified Applicator Certification:

By signing below, I, hereby certify under penalty of perjury, I am a certified applicator who sprayed a fire retardant spray on the non-Class A wood roof at the above mentioned property. The fire retardant spray applied to the non-Class A wood roof at the above mentioned property meets all current standards of the California State Fire Marshall, including but not limited to ASTM E-84, NFPA 255 and UL 723. I also certify that I am a certified applicator holding a general applicator license as evidenced by a Certificate of Registration.

Signature of Certified Applicator: _____ Date: _____

Print Name: _____ Company Name: _____

Mailing Address: _____

Phone: _____ Email Address: _____

Certified Applicator's Warranty Period, if any: _____