



City of Box Elder

520 N Ellsworth Rd, Ste 9C

Box Elder, SD 57719

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AFFIDAVIT FOR ICE SHIELD

Roof to be installed at _____ (address)

For Building Permit Number _____ issued on _____

I _____ (responsible party), representing _____ (Contractor)

certify that an ICE SHIELD will be properly installed according to the manufacturer's recommendations and according to the requirements of the International Residential Code, Section R905.2.7.1 for the residence identified in the Building Permit shown above.

(signature of responsible party)