MIAMI-DADE COUNTY

REQUIRED OWNERS NOTIFICATION FOR ROOFING CONSIDERATIONS

It is the responsibility of the roofing contractor to provide the owner with the required roofing permit, and to explain to the owner the content of this form. The owner's initials in the designated space indicates that the item has been explained.

☐ 1. **Aesthetics-workmanship:** The workmanship provisions of Chapter 15 (High Velocity Hurricane Zone) are for the purpose of providing that the roofing system meets the wind resistance and water intrusion performance standards. Aesthetics (appearance) are not a consideration with respect to workmanship provisions. Aesthetic issues such as color or architectural appearance, that are not part of a zoning code, should be addressed as part of the agreement between the owner and the contractor.

☐ 2. **Renailing wood decks:** When replacing roofing, the existing wood roof deck may have to be renailed in accordance with the current provisions of Chapter 16 (High Velocity Hurricane Zones) of the Florida Building Code. (The roof deck is usually concealed prior to removing the existing roof system).

☐ 3. **Common roofs:** Common roofs are those which have no visible delineation between neighboring units (i.e. townhouses, condominiums, etc.). In buildings with common roofs, the roofing contractor and/or owner should notify the occupants of adjacent units of roofing work to be performed.

☐ 4. **Exposed ceilings:** Exposed, open beam ceilings are where the underside of the roof decking can be viewed from below. The owner may wish to maintain the architectural appearance; therefore, roofing nail penetrations of the underside of the decking may not be acceptable. The owner provides the option of maintaining this appearance.

☐ 5. **Ponding water:** The current roof system and/or deck of the building may not drain well and may cause water to pond (accumulate) in low-lying areas of the roof. Ponding can be an indication of structural distress and may require the review of a professional structural engineer. Ponding may shorten the life expectancy and performance of the new roofing system. Ponding conditions may not be evident until the original roofing system is removed. Ponding conditions should be corrected.

☐ 6. **Overflow scuppers (wall outlets):** It is required that rainwater flow off so that the roof is not overloaded from a build up of water. Perimeter/edge walls or other roof extensions may block this discharge if overflow scuppers (wall outlets) are not provided. It may be necessary to install overflow scuppers in accordance with the requirements of: Chapter 15 and 16 herein and the Florida Building Code, Plumbing.

☐ 7. **Ventilation:** Most roof structures should have some ability to vent natural airflow through the interior of the structural assembly (the building itself). The existing amount of attic ventilation shall not be reduced.

☐ 8. **Existing Solar Systems:** The re-installation of an existing roof mounted photovoltaic system requires a separate permit. Permit must be obtained in order to finalize the roofing permit.

_____ _____/_____/_____

OWNER'S/AGEN'TS SIGNATURE DATE

_____ _____

CONTRACTOR'S SIGNATURE PERMIT NUMBER

_____ _____ _____ _____

PROPERTY ADDRESS STATE ZIP

MIAMI-DADE COUNTY

123_01-297 3/19

AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT AND SECONDARY WATER BARRIER HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL STRUCTURES PURSUANT TO SECTION 553.844 F.S.

To: Miami-Dade County Building Official
11805 Coral Way, Suite 111
Miami, FL 33175

Re: Owner's Name _____

Property Address _____

Roofing Permit Number _____

Dear Building Official:

I _____ certify that the roof decking attachment and fasteners have been strengthened and corrected and a secondary water barrier has been provided as required by the "Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Structures" adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Qualifying Agent

_____
Signature of Qualifying Agent

_____
Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____,

(SEAL)

____ Personally known
____ or Produced Identification

OWNER'S AFFIDAVIT OF EXEMPTION

ROOF TO WALL CONNECTION HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL STRUCTURES PURSUANT TO SECTION 553.844 F.S.

To: Miami-Dade County Building & Neighborhood Compliance Department
11805 Coral Way, Suite 111
Miami, FL 33175

Re: Owner's Name _____

Property Address _____

Roofing Permit Number _____

Dear Building Official:

I _____ certify that I am not required to retrofit the roof to wall connections of my building because:

☐ The just valuation for the structure for purposes of ad valorem taxation in less than $300,000.00.

☐ The building was constructed in compliance with the provisions of the Florida Building Code (FBC) or with the provisions of the 1994 edition of the South Florida Building Code (1994 SFBC).

_____
Signature of Property Owner

_____
Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____,

(SEAL)

____ Personally known
____ or Produced Identification

When the just valuation of the structure for purposes of ad valorem taxation is equal to or more than $300,000.00, and the building was not constructed in compliance with the FBC nor with 1994 SFBC, and affidavit of Roof to Wall Connection Hurricane Mitigation Retrofit must be provided.

AFFIDAVIT OF COMPLIANCE WITH ROOF TO WALL CONNECTION HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL STRUCTURES PURSUANT TO SECTION 553.844 F.S.

To: Miami-Dade County Building & Neighborhod Compliance Department
11805 Coral Way, Suite 111
Miami, FL 33175

Re: Owner's Name _____

Property Address _____

Roofing Permit Number _____

Dear Building Official:

I _____, certify that I have improved the roof to wall connections of the referenced property as required by the Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Residential Structures as adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

_____
Signature of Qualifying Agent

_____
Print Name

_____
License Number

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____,

(SEAL)

____ Personally known
____ or Produced Identification

SECTION 1525
HIGH-VELOCITY HURRICANE ZONES—UNIFORM PERMIT APPLICATION

Florida Building Code 6th Edition (2017)
High-Velocity Hurricane Zone Uniform Permit Application Form

INSTRUCTION PAGE

COMPLETE THE NECESSARY SECTIONS OF THE UNIFORM ROOFING PERMIT APPLICATION FORM AND ATTACH THE REQUIRED DOCUMENTS AS NOTED BELOW:

Roof System	Required Sections of the Permit Application Form	Attachments Required See List Below
Low Slope Application	A,B,C	1,2,3,4,5,6,7
Prescriptive BUR-RAS 150	A,B,C	4,5,6,7
Asphaltic Shingles	A,B,D	1,2,4,5,6,7
Concrete or Clay Tile	A,B,D,E	1,2,3,4,5,6,7
Metal Roofs	A,B,D	1,2,3,4,5,6,7
Wood Shingles and Shakes	A,B,D	1,2,4,5,6,7
Other	As Applicable	1,2,3,4,5,6,7

ATTACHMENTS REQUIRED:

1.	Fire Directory Listing Page
2.	From Product Approval: Front Page Specific System Description Specific System Limitations General Limitations Applicable Detail Drawings
3.	Design Calculations per Chapter 16, or if applicable, RAS 127 or RAS 128
4.	Other Component of Product Approval
5.	Municipal Permit Application
6.	Owners Notification for Roofing Considerations (Reroofing Only)
7.	Any Required Roof Testing/Calculation Documentation

Florida Building Code 6th Edition (2017)
High-Velocity Hurricane Zone Uniform Permit Application Form

Section A (General Information)

Master Permit Number _____ **Process Number** _____

Contractor's Name _____

Job Address _____

ROOF CATEGORY

☐ **Low Slope** ☐ **Mechanically Fastened Tile** ☐ **Mortar/Adhesive Set Tile**

☐ **Asphalt Shingles** ☐ **Metal Panels/Shingles** ☐ **Wood Shingles/Shakes**

Is there an existing Roof Top Solar System? ◯ **Yes** ◯ **No** **Will it be reinstalled?** ◯ **Yes** ◯ **No**

Are there gas vents on the roof? ◯ **Yes** ◯ **No** **Type?** ☐ **Natural** ☐ **LPGX**

ROOF TYPE

☐ **New Roof** ☐ **Repair** ☐ **Maintenance** ☐ **Reroofing** ☐ **Recovering**

ROOF SYSTEM ROOF INFORMATION

Low Slope Roof Area (ft^2) _____ **Steep Slope Roof Area (ft^2)** _____ **Total (ft^2)** _____

Section B (Roof Plan)

Sketch the Roof Plan: Illustrate all levels and sections, roof drain, scuppers, overflow scuppers and overflow drains. Include dimensions of sections and levels, clearly identify dimensions of elevated pressure zones and locations of parapets.

Section C (Low Slope Application)

Fill in specific roof assembly components and identify manufacturer

(If a component is not used, identify as "NA")

System Manufacturer:_____

Product Approval No.:_____

Design Wind Pressures, From RAS 128 or Calculations:

P1:_____ P2:_____ P3:_____

Max. Design Pressure, from the specific product approval system:_____

Deck:

Type:_____

Gauge/Thickness:_____

Slope:_____

Anchor/Base Sheet & No. of Ply(s): _____

Anchor/Base Sheet Fastener/Bonding Material:

_____

Insulation Base Layer: _____

Base Insulation Size and Thickness: _____

Base Insulation Fastener/Bonding Material:

_____

Top Insulation Layer: _____

Top Insulation Size and Thickness: _____

Top Insulation Fastener/Bonding Material:

_____

Base Sheet(s) & No. of Ply(s): _____

Base Sheet Fastener/Bonding Material:

_____

Ply Sheet(s) & No. of Ply(s): _____

Ply Sheet Fastener/Bonding Material:

_____

Top Ply: _____

Top Ply Fastener/Bonding Material:

_____

Surfacing: _____

Fastener Spacing for Anchor/Base Sheet Attachment:

Field: ____" oc @ Lap, # Rows ____ @ ____" oc

Perimeter: ____" oc @ Lap, # Rows ___ @ ____" oc

Corner: ____" oc @ Lap, # Rows ____ @ ____" oc

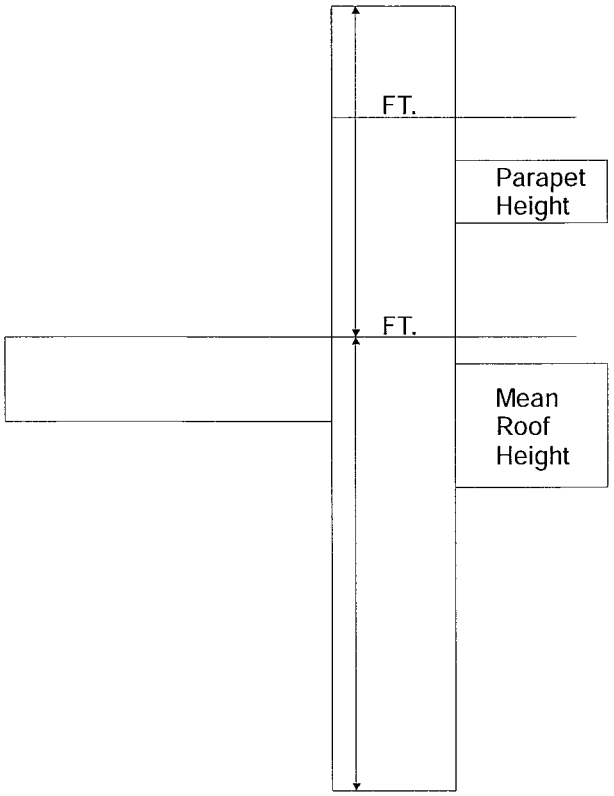
Number of Fasteners Per Insulation Board:

Field _____ Perimeter _____ Corner _____

Illustrate Components Noted and Details as Applicable:

Woodblocking, Gutter, Edge Termination, Stripping, Flashing, Continuous Cleat, Cant Strip, Base Flashing, Counterflashing, Coping, Etc.

Indicate: Mean Roof Height, Parapet Height, Height of Base Flashing, Component Material, Material Thickness, Fastener Type, Fastener Spacing or Submit Manufacturers Details that Comply with RAS 111 and Chapter 16.



Section D (Steep Sloped Roof System)

Roof System Manufacturer: _____

Notice of Acceptance Number: _____

Minimum Design Wind Pressures, If Applicable (From RAS 127 or Calculations):
P1: _____ P1: _____ P1: _____

Roof Slope:
_____: 12

Ridge Ventilation?
_____

Mean Roof Height: _____

Deck Type:

Type Underlayment:

Insulation:

Fire Barrier:

Fastener Type & Spacing:

Adhesive Type:

Type Cap Sheet:

Roof Covering:

Type & Size Drip Edge:

Section E (Tile Calculations)

For Moment based tile systems, choose either Method 1 or 2. Compare the values for M_r with the values from M_f. If the M_f values are greater than or equal to the M_r values, for each area of the roof, then the tile attachment method is acceptable.

Method 1 "Moment Based Tile Calculations Per RAS 127"

(P1:____ x λ ____ = ____) – Mg: ____ = M_{r1} ____ Product Approval M_f _____

(P2:____ xλ ____ = ____) – Mg: ____ = M_{r2} ____ Product Approval M_f _____

(P3:____ xλ ____ = ____) – Mg: ____ = M_{r3} ____ Product Approval M_f _____

Method 2 "Simplified Tile Calculations Per Table Below"

Required Moment of Resistance (M_r) From Table Below _____ Product Approval M_f _____

M_r required Moment Resistance*					
Mean Roof Height Roof Slope	15′	20′	25′	30′	40′
2:12	34.4	36.5	38.2	39.7	42.2
3:12	32.2	34.4	36.0	37.4	39.8
4:12	30.4	32.2	33.8	35.1	37.3
5:12	28.4	30.1	31.6	32.8	34.9
6:12	26.4	28.0	29.4	30.5	32.4
7:12	24.4	25.9	27.1	28.2	30.0

*Must be used in conjunction with a list of moment based tile systems endorsed by the Broward County Board of Rules and Appeals.

For Uplift based tile systems use Method 3. Compared the values for F' with the values for Fr. If the F' values are greater than or equal to the Fr values, for each area of the roof, then the tile attachment method is acceptable.

Method 3 "Uplift Based Tile Calculations Per RAS 127"

(P1:____ x L ____ = ____ x w: = ____) – W: ____ x cos Θ ____ = F_{r1} ____ Product Approval F' _____

(P2:____ x L ____ = ____ x w: = ____) – W: ____ x cos Θ ____ = F_{r2} ____ Product Approval F' _____

(P3:____ x L ____ = ____ x w: = ____) – W: ____ x cos Θ ____ = F_{r3} ____ Product Approval F' _____

Where to Obtain Information		
Description	**Symbol**	**Where to find**
Design Pressure	P1 or P2 or P3	RAS 127 Table 1 or by an engineering analysis prepared by PE based on ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	Θ	Job Site
Aerodynamic Multiplier	λ	Product Approval
Restoring Moment due to Gravity	M_g	Product Approval
Attachment Resistance	M_f	Product Approval
Required Moment Resistance	M_g	Calculated
Minimum Attachment Resistance	F'	Product Approval
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	W	Product Approval
Tile Dimensions	L = length W = width	Product Approval
All calculations must be submitted to the building official at the time of permit application.		