City of Miami Gardens

Development Services
18605 NW 27th Avenue, City Hall, 1st Floor
Miami Gardens, FL 33056
305-622-8027 (Office) 305-626-4220 (Fax)
www.miamigardens-fl.gov

Executive Order 20-52, issued March 9, 2020, qualifies as a "natural emergency" pursuant to Florida law, which allows for the tolling of certain permits for the duration of the emergency declaration and for up to six months in addition to the tolled period (see s. 252.363, F.S.).

For the safety of our customers and staff, beginning Wednesday March 25, 2020, the Development Services lobby will be closed to the public. We will still be providing full services in the following modified manner:

BUILDING DEPARTMENT SUBMISSIONS: LARGE PLANS

A drop-off area will be designated in the vestibule of the West Entrance. All submittals must be accompanied by a Transmittal Sheet. Please allow one (1) business day to receive email receipt of submittal. All payments must be done online. For Pickups please call 305-622-8027. Consultations are available by phone or email. No in-person meetings will take place. **Questions?** Please contact 305-622-8027

IMPORTANT!!!

All information must be completely filled out and printed legibly

BUILDING DEPARTMENT SUBMISSIONS: SINGLE REVIEW DISCIPLINES

We are presently accepting permit applications for single review disciplines via email:

1. Building Windows/Doors;
2. Electrical Meter Panel Service;
3. Electrical Safety Check;
4. Mechanical A/C Change Out;
5. Plumbing Backflows;
6. Plumbing Gas Vents;
7. Plumbing Water Heater;
8. Plumbing Water Service Repair;
9. Roofing Commercial;
10. Roofing Residential;

SUB PERMITS:
YOU MUST SUPPLY THE MASTER BUILDING PERMIT NUMBER

11. Sub General Electrical Permit;
12. Sub General Mechanical Permit; and
13. Sub General Plumbing Permit;

(Permits that do not require additional plan review)

Please send your application to cmgonlinepermit@miamigardens-fl.gov with ALL attachments.

If you have additional questions about your permit, please contact a member of our permitting staff:

Kimberly Otis (305) 622-8000 ext. 2662 kotis@miamigardens-fl.gov Sr. Permit Clerk

Chris Sanchez (305) 622-8000 ext. 2651 csanchez@miamigardens-fl.gov Sr. Permit Clerk

Soykia Smith (305) 622-8000 ext. 2643 ssmith@miamigardens-fl.gov Permit Clerk

Teneil Lewin (305) 622-8000 ext. 2656 tlewin@miamigardens-fl.gov

Evelyn Sanchez (305) 622-8000 ext. 2640 esanchez@miamigardens-fl.gov

Destiny Jones (305)-622-8000 ext. 2658 djones@miamigardens-fl.gov Permit Clerk

Nikki Tonge (305)-622-8000 ext. 2627 ntonge@miamigardens-fl.gov Permit Clerk

Cheryl-Ann Grandison (305)-622-8000 ext. 2642 cgrandison@miamigardens-fl.gov Permit Clerk

PLANNING AND ZONING SUBMISSIONS

All submittals must be sent digitally to the appropriate planning staff. Where necessary, drop-off and pick up of plans will be by appointment only. All payments must be done online.

All services will be provided via telephone and email only.

For General Information, Zoning Inquiries or Zoning Verification Letters please contact Gwen McDuffie Zoning Administrator at gmcduffie@miamigardens-fl.gov or 305-622-8000 ext. 2672.

Permit Review Questions: Andy Joseph, Associate Planner ajoseph@miamigardens-fl.gov or Malcolm Moyse, Associate Planner mmoyse@miamigardens-fl.gov

Zoning Inspections: Armando Gallardo, Zoning Inspector agallardo@miamigardens-fl.gov

Site Plans/Special Action Requests: Alexandra Matos amatos@miamigardens-fl.gov

Public Hearings/Re-zonings: Nakeischea Smith nsmith@miamigardens-fl.gov

CODE ENFORCEMENT INQUIRIES

We are currently servicing ALL customers via telephone and email only. All payments must be mailed in as normal.

For assistance contact us at 305-622-8000 ext. 2623 or 2611 or via email at jwillis@miamigardens-fl.gov, yrolle@miamigardens-fl.gov, or jbispott@miamigardens-fl.gov For Business License inquiries contact jsoto@miamigardens-fl.gov

City of Miami Gardens
DEV. SRVC. DEPT. - BLDG. DIV.
18605 NW 27TH AVE
Miami Gardens, Florida 33056
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IN OFFICE USE ONLY
Date: _____
Clerk: _____
Permit #: _____ _____
CUST # _____

PERMIT APPLICATION SUBMITAL/RESUBMITTAL

CUSTOMER NAME:	
ADDRESS:	
TELEPHONE #:	
EMAIL ADDRESS: (REQUIRED)	

AUTHORIZED FOR PICK-UP

CUSTOMER NAME:	
ADDRESS:	
TELEPHONE #:	
EMAIL ADDRESS: (REQUIRED)	

DESCRIPTION:	
# OF DOCUMENTS ATTACHED	

FOR YOUR RECORDS

DATE: _____ CLERK: _____

TIME: _____ WINDOW #: _____

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PERMIT APPLICATION

FOR OFFICE USE ONLY

Process No.: _____
Date Applied: _____
Clerk: _____
Date Issued: _____

Applied for under: FLORIDA BUILDING CODE

Location of Improvements: **(USE BLACK OR BLUE INK ONLY)**

Job Site Address: _____ Master Permit No.: _____
Building No.: _____ Suite No.: _____ Tax Folio No.: _____
Lot: _____ Block: _____ Subdivision: _____ PB Page: _____
Current Use: _____ Proposed Use: _____

Property Owner Information:

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Work: _____ Email: _____

Lessee Information/Owner's Agent:

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Work: _____ Email: _____

Contractor Information: **License No:** _____

Name: _____ Qualifier's Name: _____
Address: _____ Email: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____ Other Telephone: _____

Information of Authorized Person to Pick up Permit:

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Work: _____ Email: _____

Type of Improvement (Detailed Scope of work):

Zoning: _____ Construction Cost: _____ Construction Type: _____
Square Feet: _____ Lineal Feet: _____ Group Occupancy: _____
No. of Units: _____ No. of Floors: _____ Gallons: _____ Building Height: _____

○ **RESIDENTIAL (R)** ○ **COMMERCIAL (C)** ○ **MULTI-FAMILY (M)**

○ **Building Permit** ○ **Electrical Permit** ○ **Mechanical Permit** ○ **Plumbing Permit** ○ **Change of Contractor/ Architect/Engineer**

○ **Awning Canopies** ○ **Parking Lots** ○ **Signs** ○ **Feeders** ○ **Boiler Install** ○ **Change of Qualifier**

○ **Commercial** ○ **Swimming Pools** ○ **Slabs** ○ **Electric Services** ○ **Fire Sprinklers** ○ **Re-Certification of Plans**

○ **Demolition** ○ **Residential** ○ **Temp Work** ○ **Electric System** ○ **Settling Tanks** ○ **Revision of Plans**

○ **Fence** ○ **Roof** ○ **Temp Trailers** ○ **Temp Services** ○ **Water Treatment Plants** ○ **Permit Renewal**

○ **Gutters** ○ **Sheds** ○ **Windows Doors** ○ **A/C & Refrig.** ○ **Other:** _____

Architect Information: **License No:** _____

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____ Email: _____

Engineer Information: **License No:** _____

Name: _____ Address: _____
City: _____ State: _____ Zip Code: _____
Telephone: _____ Fax: _____ Email: _____

Flood Criteria

Flood Zone _____ B.F.E. _____ Map # _____ Date: _____

Property Market Value	Construction Job Value	Improvement Ratio	Square Footage	Bottom of Lowest Structural Horizontal Member Elevation

ALL FIELDS MUST BE FILLED IN OR APPLICATION WILL BE DENIED PROCESS

Revised 10/01/2017

ATTENTION ♦ IMPORTANT NOTICE - PLEASE READ CAREFULLY ♦ ATTENTION

A NOTICE OF COMMENCEMENT MUST BE RECORDED WHEN JOB VALUE EXCEEDS $ 2,500.00. PERMIT CARD, PLANS AND THE RECORDED NOTICE OF COMMENCEMENT MUST BE VISIBLY POSTED, IN GOOD CONDITION AND ACCESSIBLE AT ALL TIMES ON THE JOBSITE.

Work may begin only after receiving a validated permit and permit card. Application submission alone does not grant the right to begin construction	**Owner Agents must have an affidavit on file or one must be submitted with the permit application.**

Qualifier's Affidavit: Application is hereby made to obtain a permit to do work and installation as indicated on the form. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for ELECTRICAL, PLUMBING, POOL, EXTERIOR DOOR, MECHANICAL WINDOW, FENCE, DRIVEWAY, ROOFING AND SIGN'S) WORK; and that additional permits may be required by other government agencies.

Lessee's Affidavit: Lessee certified that he/she has full consent and authorization from the owner of subject property to perform the work mentioned and to hire captioned contractor.

Owner's Affidavit: I certified that the forgoing information is correct. Owner certifies that the aforementioned contractor has the authorization to perform the work as specified.

Owner Builder's Hold Harmless: **(ONLY VALID FOR OWNER-BUILDER PERMITS)**

____ I am personally responsible for knowledge of all applicable laws and regulations.

____ I will personally reside in the house after completion and have issuance of a Certificate of Occupancy.

____ Neither I, nor any member of my immediate household family, have made an application for, or have been issued either an Owner-Builder permit or Certification of Occupancy based on an Owner-Builder permit for a single family residence within the past three (3) years.

____ I will be on the premises either supervising or performing the action work at all times. I will submit an accepted form of identification upon request by the Building Department's agent.

____ I understand that if an inspection is not approved after three (3) attempts, the Inspector may place a Stop Work Order on the job; and require that a licensed contractor complete the work.

____ I understand that any person whom I may wish to hire to aid me in the construction of my home, except common laborers, must hold a valid Dade County Certificate of Competency or be a State Certified contractor. All employees hired by me shall be covered by Workers Compensation Insurance. (Typically home-owner's insurance does not provide this coverage; please check with you insurance carrier.)

____ I understand all the requirements and responsibilities involved in obtaining an owner-builder permit.

I, have read and understood the forgoing disclosure, and am aware of my responsibilities and liabilities under my application for a building construction work on the described property. I further understand that failure to comply with all the required regulations may cause the revocation and/or denial of the permit and/or certificate of occupancy.

Notarized Signature of Property Owner/Agent

Signature of Property Owner/Agent

Printed Name of Property Owner/Agent

State of Florida, County of Miami -Dade

Sworn and subscribed to me this:

Signature of Notary Public

Month **Day** **Year**

Personally Known or Identification:

Notary Public Stamp:

(Type of ID and expiration date)

Notarized Signature of Lessee

Signature of Property Lessee

Printed Name of Property Lessee

State of Florida, County of Miami -Dade

Sworn and subscribed to me this:

Signature of Notary Public

Month **Day** **Year**

Personally Known or Identification:

Notary Public Stamp:

(Type of ID and expiration date)

Notarized Signature of Qualifier/Owner-Builder

Signature of Property Qualifier

Printed Name of Property Qualifier

State of Florida, County of Miami -Dade

Sworn and subscribed to me this:

Signature of Notary Public

Month **Day** **Year**

Personally Known or Identification:

Notary Public Stamp:

(Type of ID and expiration date)

For Office Use Only

Approvals	Signature	Date
Zoning		
Structural		
Electrical		
Mechanical		

Approvals	Signature	Date
Plumbing		
Public Works		
Flood Plain Mgr		
Building		

ALL FIELDS MUST BE FILLED IN OR APPLICATION WILL BE DENIED PROCESS

Revised 10/01/2017

City of Miami Gardens

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OWNER-BUILDER DISCLOSURE STATEMENT

The laws governing the State of Florida provide that a sole qualified owner may make application for a permit, provided the work under said permit is exclusively for the owner's occupancy and use. No more than one permit will be issued, to an owner-builder in a twelve (12) month period for a new Single Family Residence. The law requires that we provide you with the following disclosure statement:

> *State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law (FRS. 489.103.) The exemption allows you, as the owner, of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build, or improve a one-family or two-family residence. You may also build or improve a commercial building at a cost of $75,000.00 or less.*
>
> ***The building must be for your own use and occupancy. It may not be built or substantially improved for sale or lease.*** *If you sell or lease a building you have built or substantially improved yourself within one (1) year after the construction is completed, the law will presume that you have built it for sale or lease, which is a violation of the exemption. You may not hire an unlicensed person to act as your contractor or subcontractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have the licenses required, by state law and by county and municipal ordinance. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed, must work under your supervision and must be employed by you, which means you must deduct FICA and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, Florida Building Code, and zoning regulations.*

PROOF OF OWNERSHIP:

Legal description and name of document of proof must correspond to the name and legal description of the application. You must submit proof of ownership of the property concerned in the application as:

* Recorded Quit Claim Deed;
* Recorded Special Warranty Deed;
* Recorded Warranty Deed;
* Miami Dade County Tax Receipt;
* For Commercial Properties a copy of lease, if applicable.

INSURANCE:

You should be advised that if your day labor employees cause any damage to persons or property, or if any of your day labor employees are injured on the job, **YOU ARE LIABLE**. Your regular home insurance policy ordinarily does not cover this type of liability.

DEMOLITION WORK:

In addition to meeting Florida Building Code requirements, you are responsible for disconnecting all utilities, including water, sewer, septic tank, electrical services, gas, telephone, cable TV, etc., prior to commencing demolition. You are also required to obtain a permit from the State of Florida Department of Health and Rehabilitation Services (DOH) in order to abandon any septic tank that is on the property.

NOTICE: SEPARATE PERMITS ARE REQUIRED FOR BUILDING, ELECTRICAL, SEPTIC TANK, PLUMBING, ROOFING AND MECHANICAL WORK

IMPORTANT NOTICE - Please Read

1. **Work may begin** only after receiving a validated permit and permit card. Applying of a permit does not grant the right to begin construction.
2. **The construction, demolition, alteration and/or repair of any building** shall take place between the hours of 7:00 a.m. to 8:00 p.m. on weekdays.
3. **All construction of demolition areas** must be maintained in a clean, neat and sanitary condition free from construction debris.
4. **Streets and neighboring properties** surrounding the construction site shall be kept free from dirt and debris.
5. **Swales** must be protected from being damaged by equipment or vehicles.
6. **Construction trailers** are prohibited on single-family residential construction sites. Other construction may have a trailer, which requires a separate permit.
7. Department of Health and Rehabilitative Services (HRS) approval is required for applications involving **septic tanks**. Department of Environmental Resource Management (DERM) and/or Miami-Dade Water and Sewer Department (MDWASA) approval is required for applications involving **sewers**.
8. **Portable toilets** for a construction site requires a separate permit.
9. **Do no discharge water** into the right of way or storm drains without approval from the Bldg. , Planning/Zoning Departments.
10. **Equipment and materials** shall be stored at least 10 feet from the edge of the right-of-way.
11. **Permit card, Permit and Plans** must be kept on site, be visible at all times, and be in good condition.
12. **Owner agents** must have an affidavit on file or one must be brought with the permit application
13. **Condo Association Letter of Approval** must be brought with the permit application.

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Contractor Affidavit
Residential Re-Roofing ONLY

Date: _____ / ____ / _____

Reference: Permit Number: _____

Jobsite Address: _____

Contractor Name: _____

Phone Number: _____

In accordance with Florida Statute 553.844, Please be advised that a **Secondary Water Barrier shall be installed on to the existing roof**. For this requirement I the roofing contractor certify by this notarized statement that the following will be installed:

☐ **a.** All joints in the roof sheathing or decking shall be covered with a minimum 4" wide strip of approved self adhering polymer modified bitumen tape applied directly to sheathing or decking; or

☐ **b.** Asphalt impregnated #30 felt underlayment attached with nails and tin-caps complying with the HVHZ standards of the FBC 2004 edition, and covered with self-adhering polymer modified bitumen cap sheet or an approved hot mop application; or

☐ **c.** The entire roof deck shall be covered with an approved asphalt impregnated 30# felt underlayment installed with nails and tin-tabs as required for the HVHZ. (No additional underlayment shall be required over the top of this sheet).

Notarized Signature of Applicant

_____
Signature of Applicant

_____
Printed Name of Applicant

State of Florida, County of Miami -Dade
Sworn and subscribed to me this:

_____
Signature of Notary Public

_____ _____ _____
Month **Day** **Year**

Personally Known or Identification:

Notary Public Stamp:

_____
(Type of ID and expiration date)

City of Miami Gardens

Building Services Division
1515 N.W. 167th Street, Bldg. #4, Suite #180
Miami Gardens, Florida 33169
Tel: (305) 622-8027 Fax (305) 622-8557
www.miamigardens-fl.gov

Roofing Permit Fee Sheet

Please enter the square footage for the roofing work you are performing in the space provided next to the appropriate roof type for your job. Listed below each roof type is the minimum requirement for the roof. If your roof type does not fit in the specific categories listed, please see a building processor or inspector. All roofing systems must be installed according to Florida Building Code, Manufactured Specifications, Product Control Approvals and Protocols. **The minimum fee is $138.25**

This application is for a: New Roof ☐ Re-Roof ☐ Repair ☐ Recover ☐

Repair Required Inspection:
135 – Tin cap
137 – Mop in progress
138 – Shingle/Tile in progress
199 – Final

Low Slope (Flat) / Shingle (Asphalt, Fiberglass, SBS) Roof Application

Fee Code	Description	Fee Calculation	Unit	No. Of Units	Fee
B908	LS (Flat) (All Groups)	$0.14 per sq ft of roof coverage	Sq Ft	_____	_____
B908	Shingle (All Groups)	$0.14 per sq ft of roof coverage	Sq Ft	_____	_____
B908	Lightweight Concrete	Flat Fee $126.75			_____

Minimum Code Requirements:

Low Slope (Flat) Roof - One approved glass base sheet tin capped in place. Two layers of No. 15 fiberglass felt set in hot asphalt. Flood coat of hot asphalt into which gravel is embedded. Minimum 26 gauge galvanized gravel stop/drip edge.

Shingle Roof - One No. 30 ASTM D-226. Tin Cap 6" o.c. on laps and 12" o.c. on field. Six (6) nails per shingle. 16" Valley Metal over Mineral Felt. Miami-Dade County Approved shingles.

Required Inspections:

Low Slope (Flat) Roof
135 – Tin Cap
137 – Mop in Progress
199 – Final

Shingle Roof
135 – Tin Cap
138 – Shingle/Tile in Progress
199 – Final

Roof Pitch Requirements:

Low Slope (Flat) Roof No Minimum – 3:12 Maximum on Gravel

Shingle Roof 2:12 Minimum – No Maximum

Tile / Tile (Mortar Set) / Metal / Others (Wood Shingles & Shakes) Roof Application

Fee Code	Description	Fee Calculation	Unit	No. Of Units	Fee
B908	Tile Roof (All Groups)	$0.17 per sq ft of roof coverage	Sq Ft	_____	_____
B908	Metal Roof (All Groups)	$0.17 per sq ft of roof coverage	Sq Ft	_____	_____
B908	Lightweight Concrete	Flat Fee $126.75			_____

Minimum Code Requirements:

Tile Roof - As per Notice of Acceptance and Product Control Approvals.

Tile (Mortar Set) Roof - One layer of No. 30 felt tin capped 12" o.c. One layer of No. 90 ASTM mineral surfaced slate set in hot asphalt. Minimum 26 gauge galvanized eaves drip and valley metal. Tile set in appropriate mortar base as per Notice of Acceptance. Pull test required prior to final inspection.

Metal Roof - See Chapter 34 of the FBC Manufacturer's Specifications, Protocols and Product Control Approvals.

Required Inspections:

Tile Roof
135 – Tin Cap
137 – Mop in Progress
138 – Shingle/Tile in Progress
199 – Final

Tile (Mortar Set) Roof
134 – Sheathing
135 – Tin Cap
138 – Shingle/Tile in Progress
199 – Final

Metal Roof
138 – Shingle/Tile in Progress
199 – Final

Roof Pitch Requirements:

Tile Roof As per Notice of Acceptance

Tile (Mortar Set) Roof As per Notice of Acceptance

Metal Roof As per Notice of Acceptance

WARNING

Florida Statues provides for fines in the amount of $500.00 to $5000.00 for any consumer (owner-builders, contractors, etc.) who "aids and abets the unlicensed practice of a professional by employing such unlicensed person."

A Product Control "Notice of Acceptance" and method of installation must be provided at time of permit application and posted at jobsite for inspection on all roofing systems.

Under penalties of perjury, I declare that to the best of my knowledge, the facts stated in this document are true. I understand that perjury is a felony of the third degree.

_____

Qualifier's Signature

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HIGH-VELOCITY HURRICANE ZONES UNIFORM PERMIT APPLICATION

FLORIDA BUILDING CODE HVHZ
High-Velocity Hurricane Zones Uniform Permit Application Form.

INSTRUCTION PAGE

COMPLETE THE NECESSARY SECTION 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

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Florida Building Code HVHZ

High-Velocity Hurricane Zone Uniform Permit Application Form.

Section A (General Information)

Master Permit No.: _____ **Process No.** _____

Contractor's Name: _____

Job Address: _____

ROOF CATEGORY

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

☐ Asphaltic Shingles ☐ Metal Panel/Shingles ☐ Wood Shingles/Shakes

☐ Are There Gas Vent Stacks? Yes ☐ No

☐

Type: Natural ☐ LPGX ☐

ROOF TYPE

☐ New Roof ☐ Reroofing ☐ Recovering ☐ Repair ☐ Maintenance

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF) ☐ Steep Sloped Roof Area (SF) ☐ Total (SF) ☐

Section B (Roof Plan)

Sketch roof plan: Illustrate all levels and sections, roof drains, scuppers, overflow scuppers and overflow drains. Include dimensions of sections and levels; clearly identify dimensions of elevated pressure zones and location of parapets.

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Florida Building Code HVHZ

High-Velocity Hurricane Zone Uniform Permit Application Form.

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:

Pmax1:_____ Pmax2: _____ Pmax3_____

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

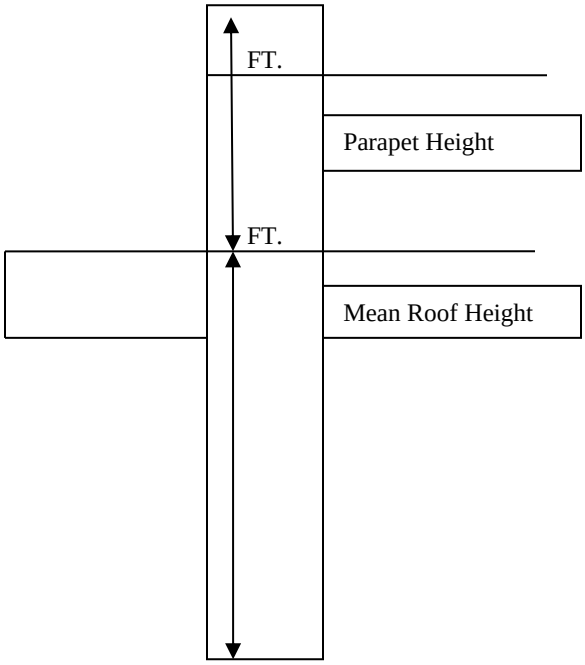
Number of Fasteners per insulation Board:

Field _____ Perimeter _____ Corner _____

Illustrate components noted and details as applicable:

Wood blocking, Gutter, Edge Termination, Stripping, Flashing Continuous Cleat, Cant Strip, Base Flashing Counter-Flashing, Coping, Etc.

Indicate: Mean Roof Height, Parapet Height, Height of Base Flashing, Component Material, Material Thickness, Fastener Type, Fastener Spacing or Submit



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Florida Building Code HVHZ

High-Velocity Hurricane Zone Uniform Permit Application Form.

Section D (Steep Slope Roof System)

Roof System Manufacturer: _____
Notice of Acceptance Number: _____
Minimum Design Wind Pressures, If Applicable (From RAS 127 or Calculations): **P1:**_____ **P2:** _____ **P3:** _____

Steep Sloped Roof System Description

Deck Type: _____

Type Underlayment: _____

Roof Slope: _____: 12

Insulation: _____

Fire Barrier: _____

Ridge Ventilation? _____

Fastener Type & Spacing: _____

Adhesive Type: _____

Mean Roof Height: _____

Type Cap Sheet: _____

Roof Covering: _____

Type & Size Drip Edge: _____

City of Miami Gardens

Development Services - Building Services
18605 NW 27th Ave, City Hall, 1st Floor
Miami Gardens, Florida 33056
305-622-8027 (office) 305-622-4220 (fax)
www.miamigardens-fl.gov

Florida Building Code HVHZ

High-Velocity Hurricane Zone Uniform Permit Application Form.

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 base Tile Calculations Per RAS 127"

(P_1: _____ x λ _____ =_____) – Mg: _____= M_{r1} _____ Product Approval M_f _____
(P_2: _____ x λ _____ =_____) – Mg: _____= M_{r2} _____ Product Approval M_f _____
(P_3: _____ x λ _____ =_____) – 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 system 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 "Moment Based Tile Calculation Per RAS 127"

(P_1: _____ x L _____ =_____ x w _____) – W: _____ x cos θ _____ = F_{r1} _____ Product Approval F' _____
(P_2: _____ x L _____ =_____ x w _____) – W: _____ x cos θ _____ = F_{r2} _____ Product Approval F' _____
(P_3: _____ 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	Fr	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.		

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HIGH-VELOCITY HURRICANE ZONES
REQUIRED OWNERS NOTIFICATION FOR ROOFING CONSIDERATIONS

As it pertains to this section, 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 section. The provisions of Chapter 15 of the Florida Building Code, Building govern the minimum requirements and standards of the industry for roofing system installations. Additionally, the following items should be addressed as part of the agreement between the owner and the contractor. The owner's initial 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. **Re-nailing wood decks:** When replacing roofing, the existing wood roof deck may have to be re-nailed in accordance with the current provisions of Chapter 16 (High-Velocity Hurricane Zones) of the. (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 flows off so that the roof is not overloaded from a buildup 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. It may be beneficial to consider additional venting which can result in extending the service life of the roof.

Owner's/Agent's Signature	**Date**	**Contractor's Signature**	**Date**

Property Address	**Process/Permit Number**