



VILLAGE OF PINECREST
Building & Planning Department

MEMORANDUM

DATE: June 30, 2015
TO: ROOFING CONTRACTORS / HOMEOWNERS
FROM: Leo Llanos, P.E., Building Official
RE: Roofing Permit Applications

Attached please find the Uniform Roofing Permit Application Forms for the Florida Building Code 2014 Edition (High Velocity Hurricane Zone).

All applications submitted for re-roofing and new roofs shall include the fully executed permit application and the applicable form sections along with the product approval packet.



VILLAGE OF PINECREST
Building & Planning Department

COMMERCIAL REROOFING

The following applicable statements are required to be completed when applying for commercial reroofing permit applications:

Job Address: _____

Process Number: _____

Is there insulation in the existing roof system? Yes No

If Yes, then I attest that the insulation to be installed in the proposed roofing system shall have the same thickness and R-Value as the existing insulation.

Note: Structures built after March 15, 1979 must comply with the Florida Energy Code.

Signature: _____ (required)

Architect P.E. Roofing Contractor

License Number: _____

No Change

I attest that the proposed roofing system is an exact replacement of the existing roofing system. I also attest that the existing overflow drains and/or scuppers are sized so that no more than 5" of water will accumulate on any portion of this roof.

Signature: _____ (required)

Architect P.E. Roofing Contractor

License Number: _____

OR

Change to the roofing system

Roofing permit applications in other than Group R-3 occupancy, involving a change in the roofing system and recovery applications must include signed and sealed calculations for the supporting structure, and a statement as follows:

I have reviewed the structural and drainage adequacy of the existing roof structure with regard to the proposed roofing system and hereby approve the installation as proposed.

Signature: _____ (required)

Architect P.E.

License Number: _____



VILLAGE OF PINECREST
Building & Planning Department

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: Village of Pinecrest Building Department
12645 Pinecrest Parkway
Pinecrest, Florida 33156

RE: Owners 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

NOTARY PUBLIC – STATE OF FLORIDA

Sworn to and subscribed before me this _____ day of _____ (SEAL)
_____, 20____.

Personally known

or Produced Identification



VILLAGE OF PINECREST
Building & Planning Department

AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT AND SECONDARY WATER BARRIER

HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL STRUCTURES PER FLORIDA BUILDING CODE 2014

TO: Village of Pinecrest Building Department
12645 Pinecrest Parkway
Pinecrest, Florida 33156

RE: Owners 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 Florida Building Code 2014 (Existing Building) sections 611.7.1 and 611.7.2.

Signature of Qualifying Agent

Print Name

License Number

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

NOTARY PUBLIC – STATE OF FLORIDA

Sworn to and subscribed before me this _____ day of _____ (SEAL)
_____, 20_____.

Personally known

or Produced Identification



VILLAGE OF PINECREST
Building & Planning Department

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: Village of Pinecrest Building Department
12645 Pinecrest Parkway
Pinecrest, Florida 33156

RE: Owners 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 building is uninsured or has an insurance value of \$300,000 or less AND,

Has a just valuation for the structure for purposes of ad valorem taxation is less than \$300,000. (Provide copy of Miami-Dade County Property Appraiser's Assessment)

(or)

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) (Provide copy of Certificate of Occupancy)

(or)

The roof-to-wall connections for gables and all corners cannot be completed for less than 15% of the cost of the roof replacement. (Provide an estimate of costs for retrofit improvements by a General Contractor or Roofing Contractor)

Signature of Property Owner

Print Name

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

NOTARY PUBLIC – STATE OF FLORIDA

Sworn to and subscribed before me this _____ day of _____ (SEAL)

_____, 20_____.



VILLAGE OF PINECREST
Building & Planning Department

HIGH-VELOCITY HURRICANE ZONES REQUIRED OWNER'S NOTIFICATION FOR ROOFING CONSIDERATIONS

1524.1 Scope. 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 this chapter 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) _____ Renailing Wood Decks:
(initial)

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, Building. (The roof deck is usually concealed prior to removing the existing roof system.)

2) _____ Exposed Ceilings:
(initial)

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.

3) _____ Overflow Scuppers (wall outlets):
(initial)

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.

Owner's / Agent's Signature

Date

Contractor's Signature

Revised 4/2016

**SECTION 1525
HIGH-VELOCITY HURRICANE ZONES UNIFORM PERMIT APPLICATION**

Florida Building Code 5th Edition (2014)
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 5th Edition (2014)

High-Velocity Hurricane Zone Uniform Permit Application Form.

Section A (General Information)

Master Permit No. _____ Process No. _____

Contractor's Name _____

Job Address _____

ROOF CATEGORY

- | | | |
|---|---|--|
| <input type="checkbox"/> Low Slope | <input type="checkbox"/> Mechanically Fastened Tile | <input type="checkbox"/> Mortar/Adhesive Set Tiles |
| <input type="checkbox"/> Asphaltic Shingles | <input type="checkbox"/> Metal Panel/Shingles | <input type="checkbox"/> Wood Shingles/Shakes |
| | <input type="checkbox"/> Prescriptive BUR-RAS 150 | |

ROOF TYPE

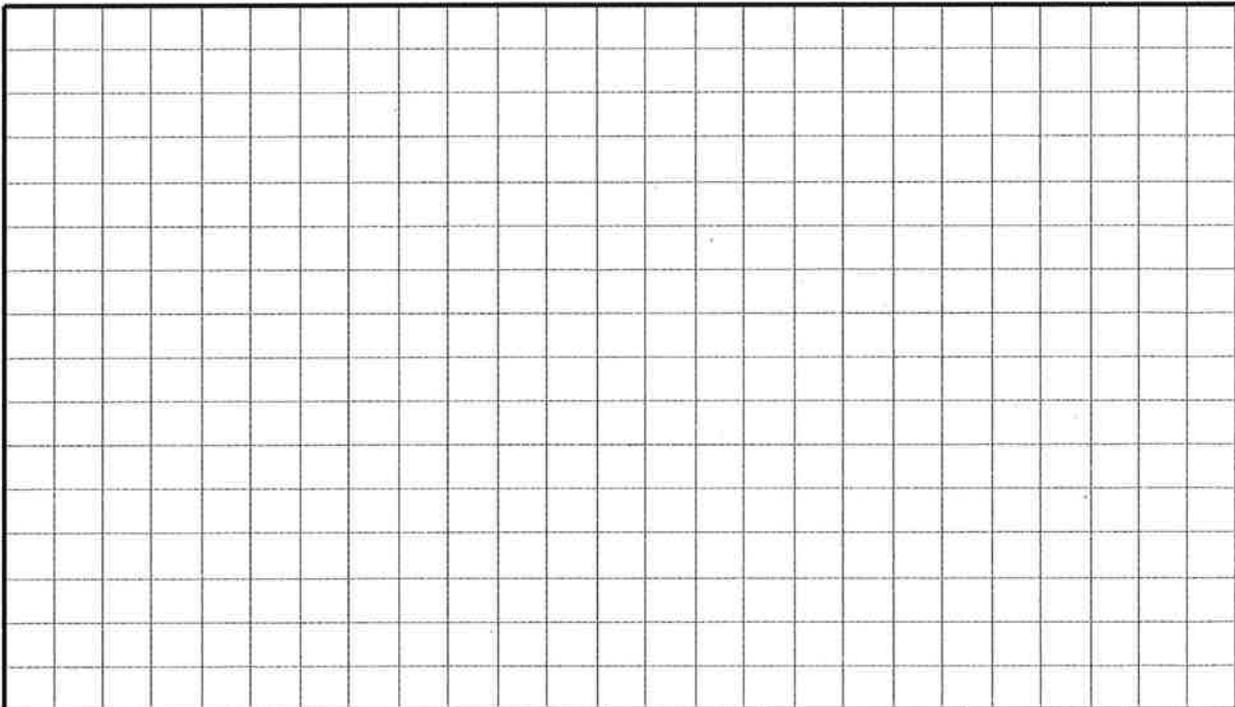
- | | | | | |
|-----------------------------------|---------------------------------|--------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> New roof | <input type="checkbox"/> Repair | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Reroofing | <input type="checkbox"/> Recovering |
|-----------------------------------|---------------------------------|--------------------------------------|------------------------------------|-------------------------------------|

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF) _____ Steep Sloped Roof AREA (SSF) _____ 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.



**Florida Building Code 5th Edition (2014)
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:

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

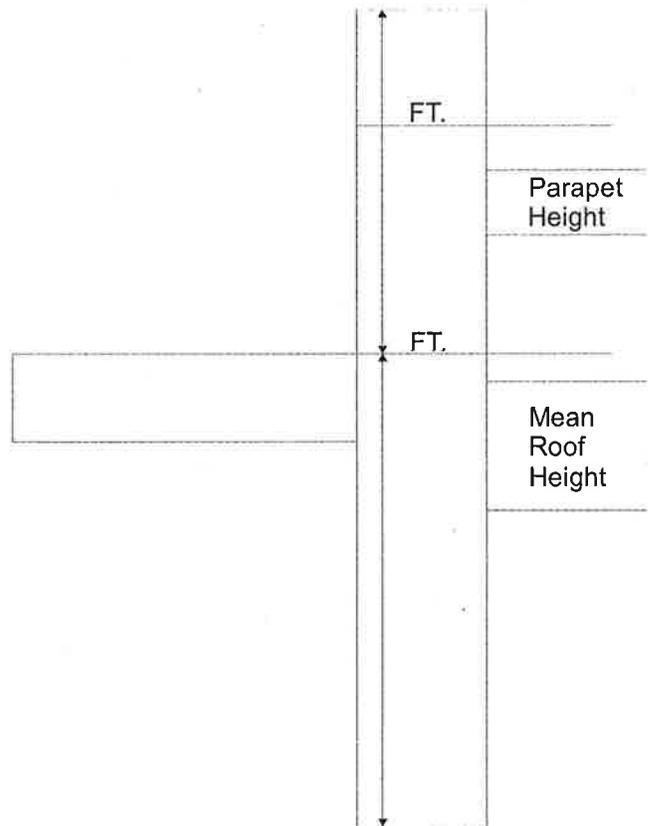
Number of Fasteners Per Insulation Board:

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.



Florida Building Code 5th Edition (2014)
High-Velocity Hurricane Zone Uniform Permit Application Form

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: _____

Deck Type: _____

Type Underlayment: _____

Insulation: _____

Fire Barrier: _____

Fastener Type & Spacing: _____

Adhesive Type: _____

Type Cap Sheet: _____

Roof Covering: _____

Type & Size Drip Edge: _____

Roof Slope:
_____: 12

Ridge Ventilation?

Mean Roof Height: _____

