City of North Miami Beach, Florida

BUILDING DEPARTMENT

Florida Building Code 6th Edition 2017
HIGH VELOCITY HURRICANE ZONE UNIFORM ROOFING PERMIT APPLICATION

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
Asphatic 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

REQUIRED ATTACHMENTS

1. Fire Directory Listing Page
2. From **Notice of Acceptance**:

   - ❖ 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 Notice of Acceptances
5. Municipal Permit Application
6. Owners Notification for Roofing Considerations (Re-roofing Only)
7. Any Required Roof Testing/Calculation Documentation

Any other additional data reasonably required by the Building Official to determine the integrity of the roofing system.

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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

___ Prescriptive BUR-RAS 150

Are there Gas Vent Stacks?
Yes ❑ No ❑
Type: Natural ❑ LPGX ❑

Roof Type

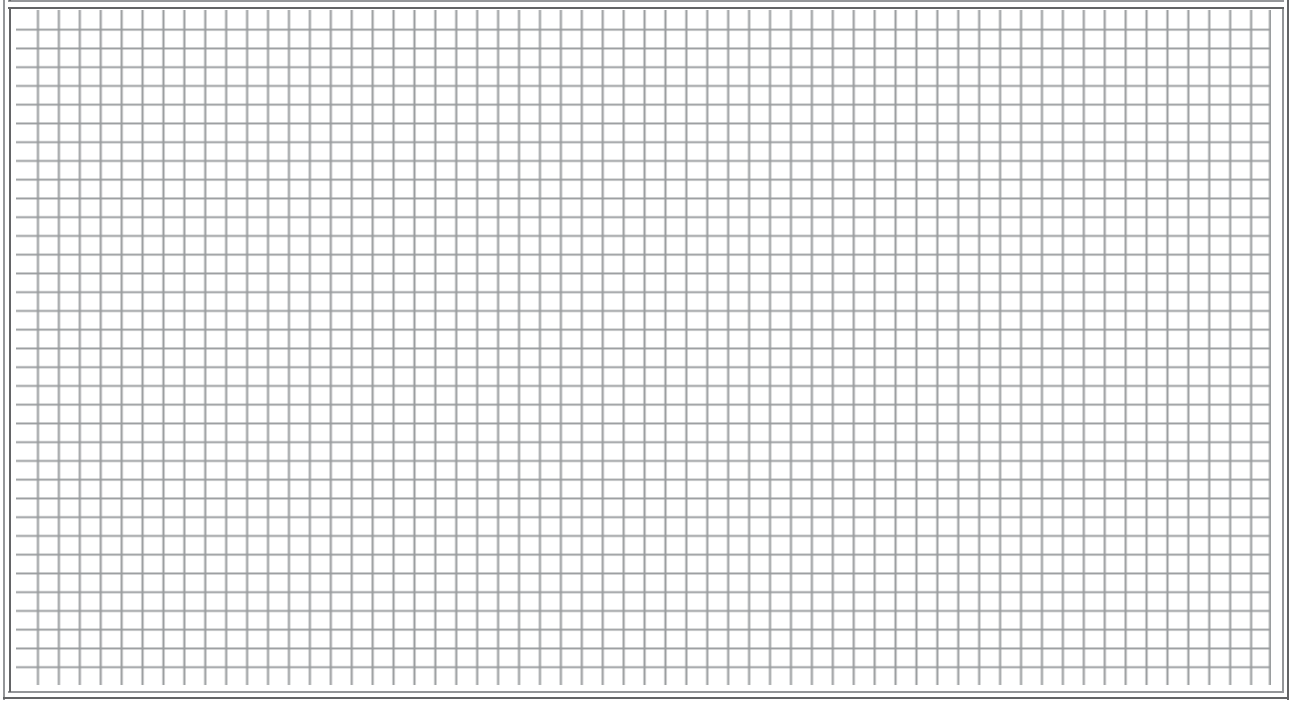
___ New Roof ___ Re-roofing ___ Recovering ___ Repair ___ Maintenance

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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Section C (Low Sloped Roof System)

Fill in the specific Roof Assembly Components and Identify Manufacturer
(If a component is not used, identify as "NA")

System Manufacturer:_____

NOA No:_____

Design Wind Pressures, From RAS 128 or Calculations:

Pmax1:_____ Pmax 2:_____ Pmax 3:_____

Maximum Design Pressure, From the Specific **NOA**
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:_____"o/c @ laps &_____rows @ _____"o/c

Perimeter:_____ "o/c @ laps &_____rows @ _____"o/c

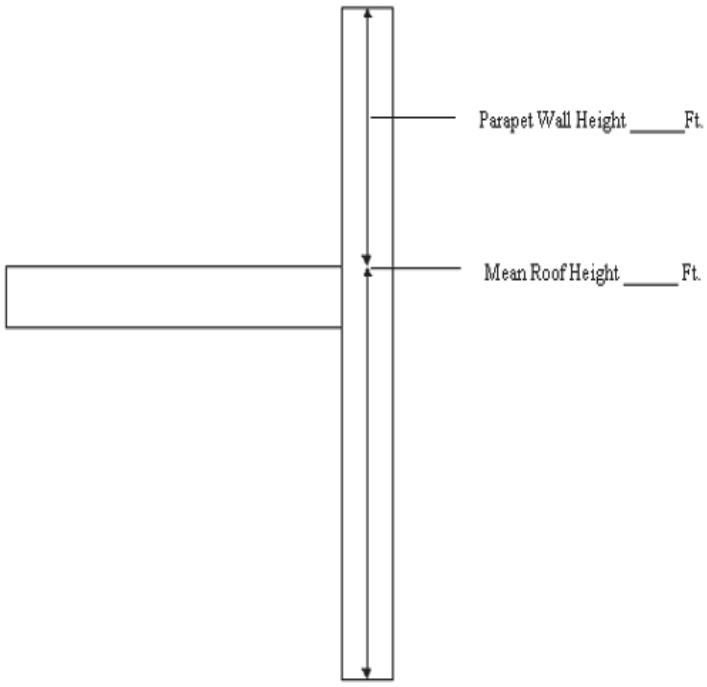
Corner:_____ "o/c @ laps &_____rows @ _____"o/c

Number of Fasteners Per Insulation Board

Field_____ Perimeter_____ Corner_____

Illustrate Components Noted and Details As Applicable:
Wood-blocking, Gutter, Edge Terminations, 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 Manufacturers Details that Comply with RAS-111 and Chapter 16



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Section D (Steep Sloped Roof System)

Roof System Manufacturer:_____

Notice of Acceptance Number:_____

Minimum Design Wind Pressures, If Applicable (from RAS 127 or Calculations):

P 1: _____ P2:_____ P3:_____

Maximum Design Wind Pressure
(From the NOA Specific System):_____

Method of tile attachment:_____

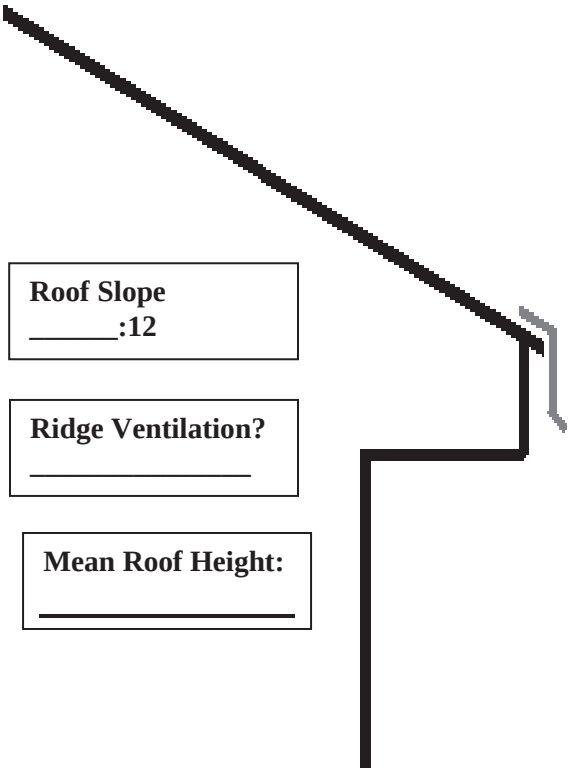
Steep Sloped Roof System Description

Deck Type: _____

Underlayment Type:_____

Insulation:_____

Fire Barrier:_____



Roof Slope
_____:12

Ridge Ventilation?
_____

Mean Roof Height:
_____

Fastener Type &Spacing:_____
AdhesiveType:_____
Type Cap Sheet:_____
Roof Covering:_____
Type & Size Drip Edge:_____

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SECTION E (Tile Calculations)

For moment based tile systems, chose either Method 1or 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"

P_1:_____ x λ _____=_____) -Mg: _____ = M_{r1}:_____ NOA M_f: _____
P_2:_____ x λ _____=_____) -Mg: _____ = M_{r1}:_____ NOA M_f: _____
P_3:_____ x λ _____=_____) -Mg: _____ = M_{r1}:_____ NOA M_f: _____

Method 2 "Simplified Tile Calculation Per Table Below"
Required Moment of Resistance (M_r) From Table Below: _____ NOA 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

***This table 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. Compare the values for F' with the values for F_r. If the F' values are greater than or equal to the F_r values, for each area of the roof, then the tile attachment method is acceptable.

Method 3 "Uplift Based Tile Calculations Per RAS 127"

(P_1:_____ x l:_____ = _____ x w:_____) – w:_____ x cos θ:_____ = F_{r1}:_____ NOA F':_____
(P_2:_____ x l:_____ = _____ x w:_____) – w:_____ x cos θ: _____= F_{r2}_____ NOA F':_____
(P_3:_____ x l:_____ = _____ x w:_____) – w:_____ x cos θ: _____= F_{r3}_____ NOA 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 a P.E. based on ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	θ	Job Site
Aerodynamic Multiplier	λ	NOA
Restoring Moment due to Gravity	M_g	NOA
Attachment Resistance	M_f	NOA
Required Moment Resistance	M_r	Calculated
Minimum Attachment Resistance	F'	NOA
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	W	NOA
Tile Dimensions	l = length w = width	NOA

All calculations must be submitted to the Building Official at the time of permit application.

City of North Miami Beach, Florida

BUILDING DEPARTMENT

All roofing applications require this Rooftop Equipment Affidavit along with the High Velocity Hurricane Zone Uniform Permit Application Form.

ROOFTOP EQUIPMENT AFFIDAVIT

Process#_____ Permit # _____

Address: _____ Lot: _____ Block: _____

Company Name: _____

Address: _____

Name of Qualifier: _____ License #: _____

Is there any equipment on the rooftop?

☐ No ☐ Yes

If yes: Is there an existing code-approved curb or stand? Yes ☐ No ☐

If curb or stand is proposed, two (2) copies of plans sealed by an engineer showing the attachment of stand/curb to roof and to the equipment are required. These plans must be according to Florida Building Code Section 1525 in its entirety. Upon submittal of an alteration or addition of a curb or stand, the Planning Division may determine the alteration of an existing screening device or addition of a screening device may be required.

Is there any electrical work to be completed?

☐ No ☐ Yes If Yes: An electrical permit application is needed.

_____ _____

Qualifier/Contractor Signature Date

Print name of person signing document _____

Sworn to(or affirmed) and subscribed before me this _____/_____/_____

Who is personally known _____ OR Produced ID _____

_____ _____

Notary Public Signature Notary Seal

City of North Miami Beach, Florida

BUILDING 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.

Owner's Name: _____

Property Address: _____

City, State, Zip: _____

Process Number: _____

Dear Building Official: _____

I_____ (owner's name), certify that I am not required to retrofit the roof-to-wall connections of my building because:

_____ The just valuation of the structure for purposes of ad valorem taxation or insurance 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 Date Print Name of Owner

STATE OF FLORIDA
COUNTY OF MIAMI-DADE
Sworn to and subscribed before me this _____ day of _____, 20_____ (SEAL)

___ Personally known

___or Produced Identification Notary Public

_____
Notary Public

This affidavit must be completed when the owner is exempt from retrofitting the roof-to-wall connection due to the just valuation of the structure for purposes of ad valorem taxation or insurance is less than $300,000.00 or the building was constructed in compliance with the Florida Building Code or with the 1994 South Florida Building Code of single family residences. Otherwise, an affidavit of Roof-to-Wall Connection Hurricane Mitigation Retrofit must be provided. This affidavit must be submitted at the time of Roofing Permit Application.

------ CITY OF NORTH MIAMI BEACH ------

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.

Owner's/Agent's Signature: _____ Date: _____

Contractor's Signature: _____

Property Address: _____

City of North Miami Beach, Florida

BUILDING DEPARTMENT

CERTIFICATE OF COMPLIANCE-ROOFING AFFIDAVIT

FOR FLAT ROOFS ONLY – REQUIRED FOR FINAL INSPECTION

Job Address: _____ Permit No. _____

Name of Roofing Company: _____

Name of Qualifier: _____ License No.: _____

Address: _____

_____

I hereby certify to the City of North Miami Beach Building Department that all portions of the above described roof improvements, covered and unseen by the roofing inspector during "in-progress" inspections, was constructed and/or installed in accordance with approved plans, specifications and product control approval as per the Florida Building Code.

_____ _____

Qualifier/Contractor Signature Date

_____ , having first being duly sworn, do affirm the statement above to be
(Print Name of Qualifier/Contractor)

true and correct by his/her own personal knowledge.

_____ _____

Notary (Seal/Stamp) Date

- ○ Personally known to me
- ○ Produced Photo I.D. /Type of ID _____

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City of North Miami Beach, Florida

BUILDING DEPARTMENT

SHEATHING AFFIDAVIT

Job Site Information			
Job Address:		Permit Number:	
Roofing Company Information			
Roofing Company:		Name of Qualifier:	
Address:			

I,_____, do hereby affirm:
(Print Name of Qualifier)

That I have personally inspected the re-nailing of the existing roof sheathing as required by Florida Building Code (FBC-B) Section 2322.2.8, for the area covered by the roofing permit referenced above and further state that the re-nailing of the sheathing meets the requirements of the current edition of the Florida Building Code (FBC-B) section 2322.2.

FBC Section (FB-B) 2322.2.2, board roof sheeting shall have a net thickness of not less than ¾ inch when the span is not more than 28 inches or 5/8 inch when the span is not more than 24 inches, shall have staggered joints and shall be nailed with 8d ring shank nails not less than two in each 6 inch board nor three in each 8 inch board at each support.

FBC Section (FBC-B) 2322.2.8, when existing roofs are re-roofed to the point that the existing roofing is removed down to the plywood sheathing, the existing roof sheathing shall be re-nailed with 8d ring shank nails (0.131 diameter by 2-1/2" long with a 0.281 diameter full round head). Power driven 8d ring shank nails shall be of the same dimensions. Nail spacing shall be six inches on center at panel edges, six inches on center at intermediate supports and where applicable 10d nails four inches on center over gable ends and sub fascia. Existing fasteners may be utilized to achieve such minimum spacing.

_____ _____
Qualifier/Contractor Signature Date

_____, having first being duly sworn, do affirm the statement above to
(Print Name of Qualifier/Contractor)

be true and correct by his own personal knowledge.

_____ _____Personally known to me
Notary

_____ _____Produced photo ID/Type of ID_____
(Steal/Stamp) Date

City of North Miami Beach, Florida
BUILDING DEPARTMENT

PROCEDURES OF ROOF PERMITS

1) All roofing work shall comply with chapter 15 of the Florida Building Code and the Test Protocols for High Velocity Hurricane Zone.

2) Following are roof categories specified in the chapter 15 of the Florida Building Code (HVHZ portions)
   a) Low Slope b) Mechanically Fastened Tile c) Mortar/Adhesive Set Tile
   d) Asphaltic Shingles e) Metal Panel/Shingle f) Wood Shingles/Shakes
   g) Prescriptive BUR-RAS ISO

3) Permits may be obtained in the following categories.
   a) New Roof b) Reroofing c) Recovering d) Repair e) Maintenance

4) Apart the City of North Miami Beach Building Department Permit Application Form, the required relevant sections of the Florida Building Code High Velocity Hurricane Zone Uniform Permit Application Form shall be submitted in duplicate. The form has five sections.

Type of Roof	**Sections of Uniform Permit Application Form**
Low Slope	A,B,C
Mechanically Fastened Tile	A,B,D
Mortar/Adhesive Set Tile	A,B,D,E
Asphaltic Shingles	A,B,D
Metal Panel/Shingle	A,B,D
Wood Shingles/Shakes	A,B,D
Prescriptive BUR-RAS 150	A,B,C

5) For re-roofing, Owner's Notification for Reroofing Considerations in accordance with the section Required Owners Notification for Roofing Considerations of the Florida Building Code shall be provided in duplicate. This shall be initialed and signed by the Owner.

6) Two copies of the Miami-Dade County Building Code Compliance Office Notice of Acceptance of the Product Approval shall be provided. Please make sure the Notice of Acceptance is valid.

7) Wind design calculations in accordance with the Chapter 16 of the Florida Building Code or If Applicable RAS 127 or RAS 128 shall be provided.

8) Two copies of the Fire Directory Listing Page of the product shall be provided (for Flat & Shingle).

9) All new roofing construction, including recovering and reroofing, repair or maintenance shall have a uniform roofing permit application, as established by the authority having jurisdiction, completed and executed by a licensed contractor in accordance with chapter 15 of the Florida Building Code.