

PERMIT SUBMITTAL

Roofing & Re-roofing Mitigation Draft Document Package

The documents in this package are for immediate usage, although in draft format. This is due to several future scheduled activities, which may affect their content.

Look for refinements to be included in these documents upon the formalizing of the Policy and Procedure Memorandum. At that time, these forms will need to be replaced with finalized documents.

THANK YOU.

Roof to wall connections: section 201.3

1. Was the building permit for the home construction applied for on or after January 1, 1988?
 Yes No If yes, then proceed to signature and permit submittal. (Documentation required substantiating this application date)
2. Applicant must provide documentation for the value of the building. Indicate type provided.
 Copy of current home insurance summary sheet.
 Copy of the latest Tax Bill or Property Appraiser Office webpage for the home.
Note: The appraised value of the improvement determines the threshold amount.
3. Based on documentation provided, is the value of the Building \$300,000.00 or more? Yes No
4. If the answer to question 3 is no, proceed to signature and permit submittal.
5. If the answer to question 3 is yes, then will evaluation and connections at gable ends or all corners be completed for 15% of the cost of roof replacement? Yes No
6. If yes, then roof to wall connections must be enhanced to comply with 201.3. The priorities for upgrading are outlined in section 201.3.5. An additional 15% of the cost of the re-roofing must be spent on enhanced connections, but the mitigation is not required to exceed that.
7. If no, provide documentation of costing of evaluation and installation. **NOTICE: This documentation will be reviewed for appropriateness, since prescriptive methods of mitigating roof to wall connections provide necessary designs to accomplish roof to wall connection improvements. Misrepresentation may be construed as a willful code violation.**

Please submit the following items:

- An additional permit application for Mitigation Retrofit by a residential, building or general contractor.
- A roof plan of the building that shows all spans and indicates gables and hip locations. Plan should indicate areas to be retrofitted, connectors used, and fastener requirements. Please include product approvals for all the connectors that are specified.
- Any applicable documentation specified above.

Qualifier/Owner Builder Name Printed

Qualifier/ Owner Builder's Signature

Date

ROOFING PERMIT APPLICATION

SUMMARY of SUPPLEMENTAL INFORMATION

INSTRUCTION PAGE

COMPLETE THE NECESSARY SECTIONS OF THIS FORM FOR A PALM BEACH COUNTY ROOFING PERMIT. **TWO COPIES OF THIS FORM WITH ORIGINAL SIGNATURES MUST BE ATTACHED TO THE ROOFING PERMIT APPLICATION, WITH ALL THE REQUIRED DOCUMENTS AS NOTED BELOW.**

Roof System	Required Sections of the Permit Application Form	Attachments Required See List Below
Built-up or Modified	A,B,D	1,2,3,4,5,6
Asphalt Shingles	A,B,C	1,2,4,5
Concrete or Clay Tile	A,B,C,	1,2,3,4,5
Metal Roofs	A,B,C	1,2,3,4,5
Wood Shingles or Shakes	A,B,C	1,2,4,5,
Other	As Applicable	As Applies : 1,2,3,4,5,6

ATTACHMENTS REQUIRED

1. Building Permit Application
2. Product Approval Information
 - Product Approval, Cover Sheet
 - Product Approval, ***Specific*** System Description
 - Product Approval, ***Specific*** System Limitations
 - Product Approval, General Limitations of Use
3. Design Calculations per Chapter 16, or if applicable, RAS 127, RAS 128 or Fastening requirements from FRSA/TRI 07320/08-05
4. Roofing Accessories Product Approvals (Ridge vents, Turbines, Mechanical Stands, etc.)
5. Mating detail (tie-in) for partial re-roof installations (if applicable)
6. Enhanced nailing details for flat roofs engineered, unless a single family accessory roof of 400 square feet or less.

Any other additional data required for the integrity of the roofing system to be determined.

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION

Section A (General Information)

PR Number _____

Contractor's Name: _____ License #: _____

Owner's Name: _____ Job Address: _____

Use Of Building:

1 or 2 Family Multi-Family (3 or More Units) Non-Residential

Exposure Category: _____ Existing Roofing Type (Mat'l) : _____

Roof Type:

New Roof Re-Roofing Recovering Repair _____ % of Roof/Section

Roof Slope: ___/12 Deck Type: _____ Roof Height: _____

Roof Covering (Check all that are applicable to this permit application):

Flat Roof Mechanically Fastened Tile Mortar/Foam Set Tile

Asphalt Shingles Metal Panel/Shingle

Wood Shingles/Shakes

Other _____

Slope of Roofing Work by Area (Complete all that apply):

Flat Roof Area ($\leq 2''/12''$) _____ sf Steep Slope Roof Area ($\geq 4''/12''$) _____ sf

Low Slope Roof Area ($> 2'' - 4''/12''$) _____ sf Total Roof Area, This Permit _____ sf

CERTIFICATION:

All information supplied on any or all of the five pages of this form, or supplied by any other means, is true and correct.

(Qualifier Name Printed)

(Qualifier's Signature)

(Date)

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION (Cont.)

Section B (Roof Plan)

Sketch Roof Plan: Illustrate all levels and sections. Include dimensions of sections and levels; clearly identify dimensions of elevated pressure zones and location of parapets and expansion joints. If applicable, identify locations of hurricane mitigation and provide attachment details on the following page.

For Flat Roof, Perimeter Width (a'): Corner Size (a' x a'):



ROOFING PERMIT APPLICATION
SUMMARY of SUPPLEMENTAL INFORMATION
(Cont.)
Section B
Connection Details for
Hurricane Mitigation

Exterior walls constructed of:

- Wood
- CBS
- Other explain _____

Detail roof Geometry:

- Gable
- Hip
- Flat
- Other explain _____

Was the permit application date for the structure prior to January 1 1988? **YES** or **NO** (If yes the following information is needed)

Provide information on existing anchors and fasteners at the locations proposed for mitigation retrofits.

Are additional anchors or fasteners required, to comply with Section 201.3 of the Hurricane Mitigation Retrofit Manual? **YES** or **NO**

If **NO**, A letter from a state licensed design professional certifying compliance with section 201.3 shall be provided.

Will additional fasteners to the existing anchors provide compliance? **YES** or **NO**

If **NO** list anchors to be added. Provide manufacture and model number of proposed retrofit anchors.

Detail the method of attachment of proposed anchors. _____
(Nails, Screws, Bolts, Etc.)

ROOFING PERMIT APPLICATION SUMMARY of SUPPLEMENTAL INFORMATION (Cont.) Section C

(Low & Steep Sloped Roof System)
(L.S. = >2" to 4" in 12") (S.S. = >4" in 12")

ROOF COVERING MANUFACTURER: _____

Product Approval # (System or Roof Covering): _____

Specify System # _____

UNDERLAYMENTS:

Indicate Secondary Water Barrier Method: _____ N/A

Base sheet: _____ Product Approval # : _____

Head lap in inches: _____

Cap sheet: _____ Product Approval # : _____

Other: _____ Product Approval # : _____

ROOF COVERING ATTACHMENT METHOD:

Mechanically Fastened Tile:
(Type & Number of Fasteners per Tile)

Asphalt Shingles:
(Number of Fasteners per Shingle)

If tile is proposed, specify if clips are being used and there location. _____

Mortar/Foam Set Tile:

Metal Panel/Shingle:

Manufacturer: _____

Clip or Fastener Spacing for Metal Roof Panels

Tile Profile: _____

Field: _____ Perimeter: _____ Corners: _____

Patty size: _____

Hook Strip/Cleat Ga. or Weight _____

Tile Hip and Ridge Attachment Method :

Valleys: (Mat'l, Size, Ga. & Fastener Type and Spacing) : _____

Drip Edge: (Mat'l, Size, Ga. & Fastener Type and Spacing) : _____

Ridge Vents: (Mat'l & Fastener Type and Spacing) : _____

Product Approval# _____

ROOFING PERMIT APPLICATION SUPPLEMENTAL INFORMATION

Section D

Flat Roof Information
(Built-up or Modified)
≤ 2:12

Fill in the specific roof assembly components. If a component is not required, state not applicable (N/A) on the line.

Roof System Manufacturer : _____ System Type : _____

System # : _____ Product Approval # : _____

Wind Uplift Pressures : (P1) Field: _____ psf (P2) Perimeters: _____ psf (P3) Corners: _____ psf

Maximum Design Pressure from the Specific Product Approval System: _____ psf (If less than above Wind Uplift Pressures provide enhanced fastener detail)

Deck type : _____ & Support Spacing: _____

Wood Nailer : _____ & Nailer Fastener Type and Spacing: _____

Fire or Vapor Barrier : _____

Insulation Base Layer Size & Thickness: _____ & Fastener/Bonding Mat'l: _____

Insulation Top Layer Size & Thickness: _____ & Fastener/Bonding Mat'l: _____

Number Of Fasteners Per Insulation Board : Field: _____ Perimeter: _____ Corner: _____

Fastener Type: _____ Alternate Fastener: _____

Indicate Secondary Water Barrier Method: _____

Ply Sheet(s) & # of Ply(s): _____ & Fastener/Bond'g Mat'l : _____

Anchor/Base Sheet & # of Ply(s): _____ & Fastener/Bond'g Mat'l : _____

Fastener Spacing for Base Sheet Attachment : (1) Field: _____" o/c @ laps & _____ rows @ _____" o/c

(2) Perim: _____" o/c @ laps & _____ rows @ _____" o/c (3) Corners: _____" o/c @ laps & _____ rows @ _____" o/c

Top Ply : _____ & Fastener/Bond'g Mat'l : _____

Surfacing: _____

Single Ply Membrane: _____ & Fastener/Bond'g Mat'l _____

Single Ply Sheet Width: _____ ½ Sheet Width: _____ No. of Single Ply ½ Sheets: _____

Drip Edge Metal - Material Type, Size, & Ga. or Weight: _____

Drip Hook Strip/Cleat Metal Ga. or Weight: _____

Parapet Coping Metal - Material Type, Size, & Ga. or Weight: _____

Drip Hook Strip/Cleat Metal Ga. or Weight: _____