



**The City of Miami Gardens
 Building Division
 18605 NW 27TH AVE
 Miami Gardens, FL 33056
 305-622-8027 Fax 305-626-4220**

PERMIT REQUIREMENTS FOR WINDOW AND DOOR REPLACEMENT

1. ___ Permit application signed and sealed by owner and contractor or licensed Window Company.
2. ___ Schematic layout of the house and or building showing the room names and size, showing all new windows and doors as follows:
 - ___ a. Indicate the size of the windows and or doors, indicate "2" for double window in the same opening.
 - ___ b. The product approval number of each window at the opening where it is to be placed.
 - ___ c. If mullions are to be used between double windows indicate the cross section (1"x3", 2"x4") etc.
3. ___ Show a front view (elevation) of each exterior wall which will have windows replaced. Show all windows in their approximate location and indicate the pressures
4. ___ Shutter permit is required if the new windows and sidelights on doors are not impact resistant.
5. ___ Any windows in habitable rooms (bedrooms) that do not have an exterior door or another egress window must meet the egress requirements of the Florida Building Code.
6. ___ Two sets of current legible Product Approval Notice of Acceptance of each window or mullion used no reduced copies.
7. ___ A statement by the owner, as follows, signed and notarized.

OWNER STATEMENT

Date: _____

**To: Building Official
 Building Division
 City of Miami Gardens**

Job Address: _____

I am requesting a permit to remove and replace the windows and or doors in my home. All the openings will remain with the same size, there will be no additional openings and or enlargement of any opening.

Respectfully,

 Owner's Name

 Owner's Signature

Sworn and subscribed before me this _____ day of _____, _____.

 Notary Public Signature

Seal