

Florida Building Code 8th Edition (2023)

High Velocity Hurricane Zone Uniform Roofing Application Form for Miami Gardens

INSTRUCTION PAGE

COMPLETE THE NECESSARY SECTIONS OF THE UNIFORM ROOFING PERMIT APPLICATION FORM AND ATTACH THE REQUIRED DOCUMENTS 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
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 Product Approval
5.	Municipal Permit Application
6.	Owner's Notification for Roofing Considerations (Reroofing Only)
7.	Any Required Roof Testing / Calculation Documentation

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Section A (General Information)

Master Permit Number: _____

Process Number: _____

Contractor's Name: _____

Job Address: _____

ROOF CATEGORY

- ☐ Low Slope ☐ Mechanically Fastened Tile ☐ Mortar / Adhesive Set Tile
☐ Asphaltic Shingles ☐ Metal Panel/ Shingles ☐ Wood Shingles / Shakes

ROOF TYPE

- ☐ New Roof ☐ Repair ☐ Maintenance ☐ Reroofing ☐ Recovering

ROOF SYSTEM INFORMATION

Low Slope Roof Area (ft²) Steep Sloped Roof Area (ft²) Total (ft²)

Are there gas vents on the roof? ☐ Yes ☐ No If Yes what type? ☐ Natural ☐ LPX
Is there an existing roof top Solar System? ☐ Yes ☐ No If yes will it be reinstalled? ☐ Yes ☐ No

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.

A large rectangular area filled with a light gray grid pattern, intended for the roof plan sketch. The grid is composed of small squares, providing a guide for drawing dimensions and layout.

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Section C (Low Sloped Roof Systems)

Fill in Specific Roof Assembly Components and Identify manufacturer

(If a component is not used, identify as "NA")

System Manufacturer: _____

Product Approval # _____

Design Wind Pressures, from RAS 128 or Calculations:

Zone 1': _____ Zone 1: _____ Zone 2: _____

Zone 3: _____

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) and No. of Ply(s): _____

Ply Sheet Fastener/ Bonding Material:

Top Ply: _____

Top Ply Fastener/ Bonding Material:

Surfacing:

Fastener Spacing for Anchor/Base Sheet Attachment:

Zone 1' _____" oc @ Laps, # Rows _____ @ _____" oc

Zone 1 _____" oc @ Laps, # Rows _____ @ _____" oc

Zone 2 _____" oc @ Laps # Rows _____ @ _____" oc

Zone 3 _____" oc @ Laps, # Rows _____ @ _____" oc

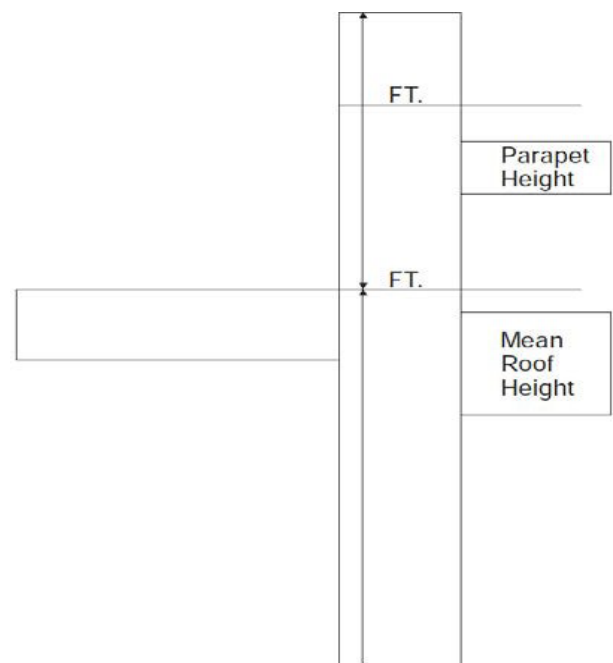
Number of Fasteners Per Insulation Board

Zone 1': _____ Zone1: _____ Zone 2: _____ Zone 3: _____

Illustrated 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 Base Flashing, Component Material, Material Thickness, Fastener Type, Fastener Spacing or Submit Manufactures Details that Comply with RAS 111 and Chapter 16.



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Section D (Steep Sloped Roof System)

Roof System Manufacturer: _____

Product Control Number: _____

Minimum Design Wind Pressures, From Applicable RAS 127 Table or Calculations:

Zone1: _____ Zone 2e: _____ Zone2n: _____ Zone 2r: _____ Zone 3e: _____ Zone 3r: _____

Slope Range: ☐ $\geq 2:12$ to $\leq 4:12$ ☐ $> 4:12$ to $\leq 6:12$ ☐ $> 6:12$ to $\leq 12:12$

Roof Shape: ☐ All Hip Roof ☐ Gable Roof or Partial Gable/Hip Roof

Deck Type:

Underlayment Type:

Roof Slope:

_____: 12

Insulation:

Fire Barrier:

Ridge Ventilation?

Fastener Type & Spacing:

Cap Sheet Type:

Mean Roof Height: _____

Cap Sheet Attachment:

Roof Covering:

Drip Edge Type & Size:

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Section E (Tile Calculations)

For Moment based tile systems, choose Method 1. 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"
Enter positive uplift pressures when using this table

(Zone 1: _____ x λ _____ = _____) – M_g : _____ = M_{r1} _____ Product Approval M_f : _____

(Zone 2e: _____ x λ _____ = _____) – M_g : _____ = M_{r2e} _____ Product Approval M_f : _____

(Zone 2n: _____ x λ _____ = _____) – M_g : _____ = M_{r2n} _____ Product Approval M_f : _____

(Zone 2r: _____ x λ _____ = _____) – M_g : _____ = M_{r2r} _____ Product Approval M_f : _____

(Zone 3e: _____ x λ _____ = _____) – M_g : _____ = M_{r3e} _____ Product Approval M_f : _____

(Zone 3r: _____ x λ _____ = _____) – M_g : _____ = M_{r3r} _____ Product Approval M_f : _____

Tile attachment method:

Alternate Tile attachment method :

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"

(Zone 1: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r1} _____ Product Approval F' : _____

(Zone 2e: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r2e} _____ Product Approval F' : _____

(Zone 2n: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r2n} _____ Product Approval F' : _____

(Zone 2r: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r2r} _____ Product Approval F' : _____

(Zone 3e: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r3e} _____ Product Approval F' : _____

(Zone 3r: _____ x L = _____ x W = _____) – (w) x $\cos \theta$ _____) = F_{r3r} _____ Product Approval F' : _____

***Method 2 "Simplified Tile Calculations" only applicable in Broward County.**

Where to obtain information		
Description	Symbol	Where to Find
Design Pressure	Zones 1, 2e, 2n, 2r, 3e, 3r	From the applicable Table in RAS- 127 or be an engineering analysis prepared by a PE based upon ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	θ	Job Site
Aerodynamic Multiplier	λ	Product Approval / Notice of Acceptance
Restoring Moment due to Gravity	M_g	Product Approval / Notice of Acceptance
Attachment Resistance	M_f	Product Approval / Notice of Acceptance
Required Moment Resistance	M_r	Calculated
Minimum Attachment Resistance	F'	Product Approval / Notice of Acceptance
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	w	Product Approval / Notice of Acceptance
Tile Dimensions	L=Length W= Width	Product Approval / Notice of Acceptance
All calculations must be submitted to the Building Official at the time of permit application.		

Print Form

Reset Form



City of Miami Gardens

Building Division

18605 NW 27th Avenue
Miami Gardens, Florida 33056
Telephone: 305-622-8000
www.miamigardens-fl.gov

Permit No.: _____

Notice to Owner – Workers’ Compensation Insurance Exemption

Florida Law requires Workers’ Compensation insurance coverage under Chapter 440 of the Florida Statutes. Fla. Stat. § allows corporate officers in the construction industry to exempt themselves from this requirement for any construction project prior to obtaining a building permit. Pursuant to the Florida Division of Workers’ Compensation Employer Facts Brochure:

An employer in the construction industry who employs one or more part-time or full-time employees, including the owner, must obtain workers’ compensation coverage. Corporate officers or members of a limited liability company (LLC) in the construction industry may elect to be exempt if:

1. The officer owns at least 10 percent of the stock of the corporation, or in the case of an LLC, a statement attesting to the minimum 10 percent ownership;
2. The officer is listed as an officer of the corporation in the records of the Florida Department of State, Division of Corporations; and
3. The corporation is registered and listed as active with the Florida Department of State, Division of Corporations.

No more than three corporate officers per corporation or limited liability company members are allowed to be exempt. Construction exemptions are valid for a period of two years or until a voluntary revocation is filed or the exemption is revoked by the Division.

Your contractor is requesting a permit under this workers’ compensation exemption. In these circumstances, the City of Miami Gardens does not require verification of workers’ compensation insurance coverage from the contractor’s company. **Therefore, you (the owner) may be personally liable for the worker compensation injuries of any person allowed to work under this permit.** Please check with your insurance carrier since most property insurance policies DO NOT cover this type of liability.

BY SIGNING BELOW YOU ACKNOWLEDGE THAT YOU HAVE READ THIS NOTICE AND UNDERSTAND ITS CONTENTS.

Owner

Print Name: _____

Signature: _____

State of _____, County of _____

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

By _____

(SEAL)

Type of Identification produced: _____

Contractor

Print Name: _____

Signature: _____

State of _____, County of _____

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

By _____

(SEAL)

Type of Identification produced: _____