



VILLAGE OF PALMETTO BAY
 9705 E. HIBISCUS STREET
 PALMETTO BAY, FLORIDA 33157
 (305) 259-1234 Fax: (305) 259-1290

REQUEST FOR PUBLIC RECORDS

Requests are filled in accordance with the provisions of Chapters 119 and 257, Florida Statutes.

DATE: 2-22-17
 NAME: Arellys Orozco
 COMPANY: _____
 ADDRESS: _____
 PHONE: 305-238-6453 FAX: _____
 EMAIL: mike @ callmike.com

REQUEST (Attach additional page, if necessary): Copies of the following documents:

Copies of roof permits
from 2005 and 2012 for
property address: 9240 SW 110th St.
Palmetto Bay, FL

FOR USE BY VILLAGE STAFF ONLY

TRACKING NO.: 2017-044

DATE FORWARDED: 2/22/17

ASSIGNED DEPT: Building

DATE REQUEST FILLED: 2/23/17

NUMBER OF COPIES: 35

ESTIMATED TIME (IF APPLICABLE): _____

ESTIMATED COST: _____

HOW WAS REQUEST FILLED? _____

IF NOT FILLED, REASON: _____

BY: [Signature]

Village of Palmetto Bay
8950 SW 152nd Street
Palmetto Bay, FL 33157
305-259-1234



Parcel Record

Page 1 of 2
Printed: 8/17/2006

Parcel #: 3350280060490

Taxation #:

Address:
9240 SW 166 ST

Zoning:
Addition:
Area: 1420

GIS X Coordinate:
GIS Y Coordinate:

Block:
Lot(s):
Section: 0100

Status:

Township:
Range:

On Hold?

Legal Description:
Directions to Parcel:

Owners:

Name: DOUGLAS COLLINS & W JOANNE
Address: 9240 SW 166 ST

Purchase Date:
Purchase Price:
Sale Date:
Current Owner?
Status:

Phone Numbers:

Day: Evening: Fax: Cellular:

Internet:

Website: Email:

Permits:	Applicant	Status	Filing Date
PL-2004-526	NUI SERVICES INC	Closed	10/20/2004
✓ BRF-2005-662	S.R. HORRUITINER ROOFING INC.	Closed	12/8/2005

Conditions:

Date: 10/20/200
Source: Plumbing

Description:

Date: 12/8/2005
Source: Roofing

CERTIFIED TRUE COPY OF THE
ORIGINAL DOCUMENT ON
FILE WITH THE PALMETTO
BAY BUILDING DEPARTMENT.

[Handwritten signature]

Violations:

Date:

Violation #:

Agency:

Compliance Deadline:

Description:

Graphic:

Description:

Other Fields:

CERTIFIED TRUE COPY OF THE
ORIGINAL DOCUMENT ON
FILE WITH THE PALMETTO
RAV BUILDING DEPARTMENT.

[Handwritten signature]

Village of Palmetto Bay

Building Department
8950 SW 152 St
Palmetto Bay, 33157
(305) 259-1250 / fax (305) 259-1291

Permit Application



Clerk: <u>Permit # 205-662</u>		Master Permit:		JOB ADDRESS:		UNIT #			
1. OWNER INFORMATION Owner <u>Douglas Collins</u> Address <u>9690 SW 51st</u> City <u>Miami</u> St <u>A</u> Zip <u>33157</u> Driver License No./M.D. _____ Phone <u>305 251 5884</u> Owner-Builder <input type="checkbox"/>		2. CONTRACTOR INFORMATION Company Name <u>S.P. Hamilton</u> Qualifier Name <u>Serafin Hamilton</u> Address <u>9690 SW 51st</u> City <u>Miami</u> St <u>A</u> Zip <u>33165</u> Lic # <u>CC020100</u> Phone () _____		3. PERMIT TYPE Check only One <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing/Gas <input type="checkbox"/> Paving/Drainage <input type="checkbox"/> Sign <input checked="" type="checkbox"/> Roofing <input type="checkbox"/> P/W		4. CHANGE TO AN EXISTING PERMIT Check only One <input type="checkbox"/> Change Contractor <input type="checkbox"/> Extension <input type="checkbox"/> Renewal <input type="checkbox"/> Shop Drawing <input type="checkbox"/> Trade Permit Supplmt. <input type="checkbox"/> _____		5. TYPE OF IMPROVEMENT Check only One <input type="checkbox"/> New Construction <input type="checkbox"/> Addition Attached <input type="checkbox"/> Addition Detached <input type="checkbox"/> Alteration Interior <input type="checkbox"/> Alteration Exterior <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Repair Due to Fire <input type="checkbox"/> Demolish <input type="checkbox"/> Driveway <input type="checkbox"/> Fence <input type="checkbox"/> Pool <input type="checkbox"/> Shed <input type="checkbox"/> Shutters	
6. ARCHITECT ENGINEER Name _____ Address _____ City _____ St _____ Zip _____ Reg. No. _____ Discipline: _____ Phone1 () _____ Phone2 () _____		7. LEGAL/USE/WORK Folio No <u>33-9018-06-019</u> No. of Units _____ Lot _____ Block _____ Subdivision _____ Pb/Pg _____ Current Use of Property <u>Res</u> Description of Work <u>Repair Sheds</u>		Improvement Value <u>\$5,600.00</u> Area <u>1558</u>		Work Classification: _____ Residential <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Code in Effect: _____ Occupancy: _____ Construction Type: _____			

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature of Owner or Owner's Agent Print Name <u>Carol Odden</u> Clerk: _____ STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to and subscribed before me this <u>November 29</u> 2005	Signature of Qualifier Print Name <u>Serafin Hamilton</u> Clerk: _____ STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to and subscribed before me this <u>11/29</u> 20 <u>05</u>
by <u>Carol Odden</u> Personally known <input checked="" type="checkbox"/> or I.D.	Commission # <u>DD392186</u> (SEAL) Expires <u>FEB. 02, 2009</u> www.BARONOTARY.com

VERIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT.

Village of Palmetto Bay

Building Department
8950 SW 152 St
Palmetto Bay, 33157
(305) 259-1250 / fax (305) 259-1291

Permit Application



Clerk: Permit # 1553 Cashier Validation Area

1. OWNER INFORMATION Owner: <u>Dunkley - 01145</u> Address: <u>4240 SW 152 St</u> City: <u>Palmetto Bay</u> St <u>152</u> Zip <u>33157</u> Driver License No./I.D. _____ Phone () <u>305 259 1291</u> Owner-Builder <input type="checkbox"/>		2. CONTRACTOR INFORMATION Company Name: <u>S.V. Mechanical</u> Qualifier Name: <u>Sergio A. Minter</u> Address: <u>9690 SW 34 St</u> City: <u>Miami</u> St <u>34</u> Zip <u>33157</u> Lic # <u>00000000</u> Phone () _____	
3. PERMIT TYPE Check only One <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing/Gas <input type="checkbox"/> Paving/Drainage <input type="checkbox"/> Sign <input checked="" type="checkbox"/> Roofing <input type="checkbox"/> P/W		4. CHANGE TO AN EXISTING PERMIT Check only One <input type="checkbox"/> Change Contractor <input type="checkbox"/> Extension <input type="checkbox"/> Renewal <input type="checkbox"/> Shop Drawing <input type="checkbox"/> Trade Permit Supplmt.	
6. ARCHITECT ENGINEER Name _____ Address _____ City _____ St _____ Zip _____ Reg. No. _____ Discipline: _____ Phone1 () _____ Phone2 () _____		7. LEGAL/USE/WORK Folio No <u>355028-00-0177</u> No. of Units _____ Lot _____ Block _____ Subdivision _____ Pb/Pg _____ Current Use of Property _____ Description of Work <u>Roofing</u>	
Improvement Value <u>15,000</u> Area <u>1553</u>		Work Classification: Residential <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Code in Effect: _____ Occupancy: _____ Construction Type: _____	

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

X <u>[Signature]</u> Signature of Owner or Owner's Agent Print Name _____ Clerk: _____ STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to and subscribed before me this _____ 20 <u>05</u>	X <u>[Signature]</u> Signature of Qualifier Print Name <u>Sergio A. Minter</u> Clerk: _____ STATE OF FLORIDA COUNTY OF MIAMI-DADE Sworn to and subscribed before me this <u>1/27</u> 20 <u>05</u>
--	---

by _____ (SEAL) by _____ (SEAL)
 Personally known or I.D. Personally known or I.D.

NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies

R	Discipline	Approved	Date	Disapproved/Date	Zoning Fees	Fees \$	v
	Zoning						
	Building						
	Fire						
	Structural						
	Electrical						
	Mechanical						
	Plumbing						
	Flood				(#) Violation		
	Roofing				Certificate of: Occ. <input type="checkbox"/> Comp. <input type="checkbox"/> Use <input type="checkbox"/>		
	Plans Check-out	Date	Clerk	Check-in	Date	Clerk	
1							
2							
3							
Issuing Clerk						Date	
						TOTAL	<u>12.34</u>

**SECTION 1524
HIGH VELOCITY HURRICANE ZONES REQUIRED OWNERS NOTIFICATION FOR ROOFING
CONSIDERATIONS**

1524.1 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 Chapter 15 of the *Florida Building Code, Building* 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 adjacent box indicates that the item has been explained.

JAC **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) issues 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.

JAC **2. Rerailing Wood Decks:** When replacing roofing, the existing wood roof deck may have to be rerailed 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).

JAC **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.

JAC **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 Florida Building Code provides the option of maintaining this appearance.

JAC **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.

JAC **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 Florida Building Code, Plumbing.

JAC **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. It may be beneficial to consider additional venting which can result in extending the service life of the roof.

[Signature]
Owner's/Agent's Signature 11, 29, 05 Date *[Signature]*
Contractor's Signature

9240 SW 1665th Property Address Permit Number

Rev. 1/20/2006, Computer Services, Building Department

CERTIFIED TRUE COPY OF THE
ORIGINAL DOCUMENT ON
FILE WITH THE PALMETTO
RAY BUILDING DEPARTMENT.

[Signature]

Section A (General Information)

Master Permit No. _____ Process No. _____
Contractor's Name S.R. Horvath Inc Roofing
Job Address 9240 SW 166 ST

ROOF CATEGORY

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

Prescriptive BUR-RAS 150

Are there Gas Vent Stacks?
Yes No
Type: Natural LFGX

ROOF TYPE

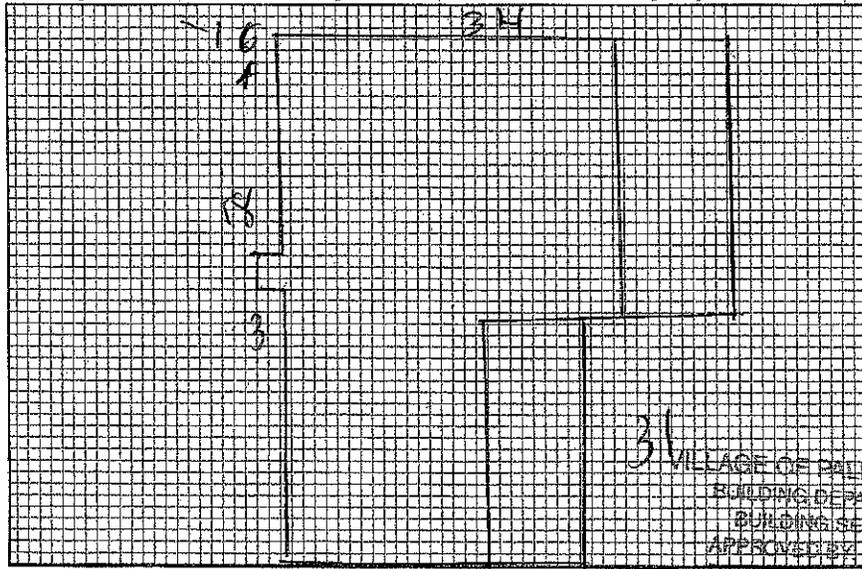
- New Roof Re-Roofing Recovering Repair Maintenance

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF) 0 Steep Sloped Roof Area (SF) 1558 Total (SF) 1558

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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CERTIFIED TRUE COPY OF ORIGINAL DOCUMENT ON FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT.

Section D (Steep Sloped Roof System)

Roof System Manufacturer: Owens Corning

Notice of Acceptance Number: 04-0510.05

Minimum Design Wind Pressures, If Applicable (From RAS 127 or Calculations):
P1: _____ P2: _____ P3: _____

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

Method of tile attachment: _____

Steep Sloped Roof System Description

Deck Type: CDX 5/8 Ply wood

Type Underlayment: #30 ASTM tw capped

Insulation: _____

Fire Barrier: N/A

Fastener Type & Spacing: 1/4" RS 12" @ 6" laps

Adhesive Type: _____

Type Cap Sheet: N/A

Roof Covering: Owens Corning 3 Tab Shingles

Type & Size Drip Edge: 3x3 Drip edge 26

Roof Slope: 3 : 12

Ridge Ventilation? _____

Mean Roof Height: 10'

Village of Palmetto Bay Building Department Building Section

APPROVED BY: _____
DATE: _____

CERTIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT.



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33130-1563
(305) 375-2901 FAX (305) 375-2908

NOTICE OF ACCEPTANCE (NOA)

**Owens Corning
One Owens Corning Parkway
Toledo, OH 43659**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (in Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the Florida Building Code, including the High Velocity Hurricane Zone.

DESCRIPTION: Supreme AR 3 Tab Shingles

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA #03-0116.09 and consists of pages 1 through 3.
The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 04-0510.05
Expiration Date: 03/20/08
Approval Date: 07/22/04
Page 1 of 3

CERTIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALMETO BAY BUILDING DEPARTMENT

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Materials: 3-Tab
Deck Type: Wood

1. SCOPE

This revises Owens Corning Supreme AR as manufactured by Owens Corning described in Section 2 of this Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Supreme AR	12" x 36"	TAS 110	A heavy weight, fiberglass reinforced asphalt shingle.

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Underwriters Laboratories, Inc.	02NK45241	ASTM D 3462	12/05/97
Underwriters Laboratories, Inc.	02NK45241	TAS 107	11/14/02
	03NK04954		03/20/03
Underwriters Laboratories, Inc.	R2453	Reference	01/09/03
PRI Asphalt Technologies, Inc.	OCF-067-02-01	TAS 100	11/12/02
	OCF-076-02-01		02/24/04

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.

5. INSTALLATION

- 5.1 Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
- 5.2 Flashing shall be in accordance with Roofing Application Standard RAS 115
- 5.3 The manufacturer shall provide clearly written application instructions.
- 5.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 5.5 Nailing shall be in compliance with Detail 'B', attached.

6. LABELING

- 6.1 Shingles shall be labeled with the Miami-Dade Logo or the wording "Miami-Dade County Product Control Approved".

7. BUILDING PERMIT REQUIREMENTS

- 7.1 Application for building permit shall be accompanied by copies of the following:
 - 7.1.1 This Notice of Acceptance.
 - 7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.



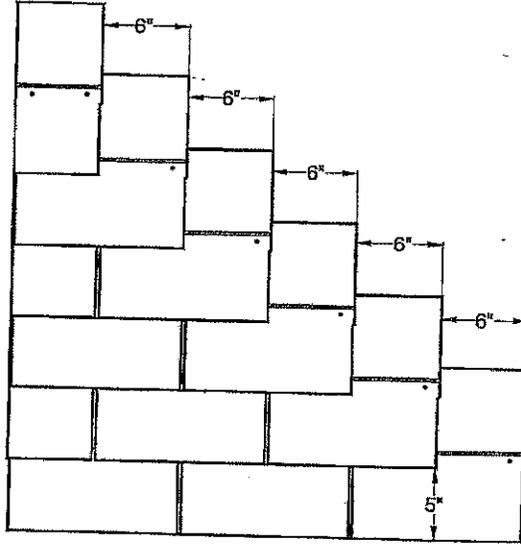
NOA No.: 04-0510.05
Expiration Date: 03/20/08
Approval Date: 07/22/04
Page 2 of 3

CERTIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT

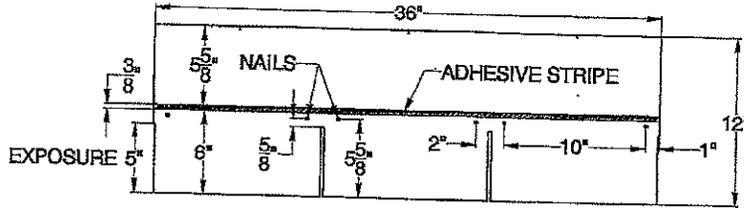
8. MANUFACTURING PLANTS

- 8.1 Atlanta, GA
- 8.2 Jacksonville, FL
- 8.3 Irving, TX

DETAIL A



DETAIL B



END OF THIS ACCEPTANCE



NOA No.: 04-0510.05
Expiration Date: 03/20/08
Approval Date: 07/22/04
Page 3 of 3

CERTIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALM BEACH COUNTY BUILDING DEPARTMENT.

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CERTIFIED TRUE COPY OF THE
ORIGINAL DOCUMENT ON
FILE WITH THE PALMETTO
RAY BUILDING DEPARTMENT

[Handwritten Signature]

OFFICE COPY

THIS COPY OF PLANS SHALL BE KEPT IN THE BUILDING DEPARTMENT FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT. THIS COPY OF PLANS OR NO INSPECTION WILL BE GIVEN.

SECTION	BY	DATE	APPROVED	DISAPPROVED
ZONING				
LANDSCAPING				
PUBLIC WORKS				
BUILDING				
UTILITIES				
HANDICAP				
STRUCTURAL				
ELECTRICAL				
PLUMBING				
MECHANICAL				
ENERGY				
FIRE				

APPROVED: *[Signature]*

DATE 10/28/16
 9240 SW 1667

CERTIFIED TRUE COPY OF THE ORIGINAL DOCUMENT ON FILE WITH THE PALMETTO BAY BUILDING DEPARTMENT.

[Signature]



Village of Palmetto Bay Permit Application

Department of Building & Capital Projects
 9705 E. Hibiscus Street
 Palmetto Bay, Florida 33157
 Phone: (305) 259-1250 Fax: (305) 259-1291 Inspections: (305) 259-1253

RUSH

GENERAL INFORMATION: Please read these instructions carefully before submitting the work for review.

This application must be completed and signed by both the property owner and qualifier. Both of these signatures must be notarized. Please print legibly or type in order not to delay your application. For roofing permits, in addition to this permit you must also fill out a roofing permit application. Express permits require an additional fee and will only be accepted between the hours of 8:00 A.M. and 10:00 A.M., Monday through Friday. All other permits/plans must be dropped off before 4:30 p.m. for regular processing. During the processing of your application you may be asked to submit additional information. There may be additional permits and reviews required from other governmental agencies not affiliated with Palmetto Bay.

APPLICATION:

Clerk's Initials	Plan Process Number	Master Permit Number	Subsidiary Permit Number(s)	Expiration Date
OK	RF2012-0393			

Job Address: 9240 SW 166 St
 Address Unit number City State Zip Code

Folio Number: <u>33 5028 006 0490</u>	Linear Feet: <u>1817</u> Units: <u>1</u> Stories: <u>1</u>
Lot: <u>4</u> Block: <u>8</u>	Value of Proposed Work: <u>9,400.00</u> Est. Bldg. Value: <u>130,503</u>
Subdivision: <u>BENSON PARK 75T</u> PB: PG:	Tax Assessed Value: <u>26,726</u>
Current Use of Property: <u>SFR</u>	Flood Zone: Base Floor Elev.:
Proposed Use of Property: <u>SFN</u>	Homeowner's Association:
Description of Work: <u>Re-roof Flat</u>	I affirm that there <input type="checkbox"/> are or <input checked="" type="checkbox"/> are no restrictive covenants associated with the underlying property that would affect the pending application. Failure to disclose this information shall result in the immediate revocation of any type of permit or certificate of use/occupancy.
Zoning: Square Feet: <u>1817</u>	
Tenant Information: Unit Number:	

Check Permit Type	Check Permit Change	Check Type of Improvement
Building	Change of Contractor	New Construction
Electrical	Permit Renewal	Exterior Alteration
Mechanical	Plan Revision	Interior Alteration
Plumbing	Permit Extension	Attached Addition
LPGX	Supplement	Detached Addition
Roofing	Re-inspection Fee	Repair
Fence		Repair due to Fire
Sign		Demolish
Public Works		Screen Enclosure
Other		Driveway
		Fence
		Pool
		Deck/Concrete flatwork
		Window Replacement
		Shutters
		Garage Doors
		Storage Shed
		Railings
		Stairs
		Windows/Doors
		Roofing
		Re-Roof
		Seal-cote
		Other

ISSUED 2/16/12
 FILED
 PALMETTO BAY BUILDING DEPARTMENT
 [Signature]

Architect Information	Engineer Information
Name:	Name:
License Number:	License Number:
Address:	Address:
Telephone Number:	Telephone Number:
Fax Number:	Fax Number:
Other:	Other:

Property Owner	Contractor
Name: <u>Douglas Collins</u>	Company Name: <u>S. R. Hoffman Construction Inc</u>
Address: <u>9240 SW 166th</u>	Qualifier: <u>SEER P. Home Inspector</u>
Home Telephone:	License Number: <u>01860264188</u>
Business Telephone:	Address: <u>9640 SW 34th Miami</u>
Other Telephone:	Telephone Number: <u>31553-3023</u>
Fax Number:	Fax Number: <u>31553-7657</u>
Does Property have Homestead Exemption: <u>Yes</u>	Phone Number for Pick Up: <u>305-218-4093</u>

Bond Company (if applicable)	Mortgage Lender
Name:	Name:
Address:	Address:
City: State: Zip	City: State: Zip

Classification Of Proposed Work						
Residential <input checked="" type="checkbox"/>	Duplex <input type="checkbox"/>	Townhouse <input type="checkbox"/>	Multi Family <input type="checkbox"/>	Commercial <input type="checkbox"/>	Industrial <input type="checkbox"/>	Other <input type="checkbox"/>
Effective Code: <u>2007</u>	Occupancy: <u>SFR</u>	Construction Type: <u>Roof (R&B)</u>				
Zoning:	Variance Number:	Remarks:				

OWNER AFFIDAVIT

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, FENCE, DRIVEWAYS and AIR CONDITIONERS, ETC. In addition to the requirements of this permit, there may be additional restrictions found in the Public Records, and there may be additional permits required from other governmental entities.

I, the owner of the property, have disclosed all information related to any work that has been performed in the prior twelve months to the Building Division as part of this application. Further, I am fully aware that if the cumulative cost of work to my home or business under this and any other permit equals or exceeds fifty percent of the fair market value of the structure, the entire structure must meet the present federal flood criteria for finished floor elevation. I am also fully aware that if the cost of work to my home or business under this and any other permit equals or exceeds fifty per cent of the replacement cost of the structure, then the entire structure must conform to current code requirements of the Florida Building Code.

I, the owner of the property, understand that a permit application is subject to denial and a validated permit or permit card is subject to revocation or modification based upon applicable deeds, covenants, declarations, easements and any other legal restriction. By issuing a permit, the Village of Palmetto Bay makes no representation as to the existence or validity of any property restriction.

I, the owner of the property certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner: [Signature]
 State of Florida, County of Dade
 Sworn to (or affirmed) and subscribed before this 8 day of Feb, 2013 by (print name) Douglas Collins
 Notary Name: Elio Valdes
 Commission # DD853015
 Expires: FEB 02, 2015
 Type of identification produced: [Stamp]
 WWW.AARONNOTARY.COM

Signature of Qualifier: [Signature]
 State of Florida, County of Dade
 Sworn to (or affirmed) and subscribed before this 8 day of Feb, 2013 by (print name) Sandra Hamilton
 Notary Name: Elio Valdes
 Commission # DD853015
 Expires: FEB 02, 2013
 Type of identification produced: [Stamp]
 WWW.AARONNOTARY.COM



IMPORTANT NOTICES

- Do not begin work without receiving you validated permit and permit card. Applying for a permit does not grant you the right to commence construction. Construction can only occur during the hours of 7:00 a.m. to 7:00 p.m., Monday thru Saturday and from the hours of 9:00 a.m. to 6:00 p.m. on Sundays and Federal holidays.
- All construction sites must be maintained in a clean and orderly condition free from construction debris. Failure to do so will result in a fine and a suspension of inspections until said property is cleaned.
- Streets and neighboring properties shall be kept free from dirt and debris.
- Swales must be protected from damage by equipment or vehicles and sidewalks cannot be blocked.
- Portable Toilets for construction jobs require a separate permit. If toilet is not available the inspection will not be performed.
- Water cannot be discharged into the right of way or storm drains without the approval of the Public Works Department.
- No equipment or materials can be stored on the right of way; they must only be stored on your property.
- Florida Department of Health approval is required for applications involving Septic Tanks. Department of Environmental Resources Management (DERM) and /or Miami-Dade Water and Sewer Department approval is required for applications involving sewers and water. The free section of the Department of Environmental Resources Management (DERM) approval is required on all landscape plans and on all tree removal applications.

CHECKLIST (OFFICE USE ONLY)

- | | | |
|---|---|---|
| <input type="checkbox"/> OWNER-BUILDER FORM
(Attached) | <input type="checkbox"/> HEALTH DEPARTMENT APPROVAL
(Septic/Sewer) | <input checked="" type="checkbox"/> PERMIT CLERK REVIEW
By: <u>EJD</u> |
| <input type="checkbox"/> FIRE DEPARTMENT APPROVAL
(Commercial/multi family only) | <input type="checkbox"/> IMPACT FEE
(New Construction) | <input checked="" type="checkbox"/> Complete Application |
| <input type="checkbox"/> CONCURRENCY
(New Construction) | <input type="checkbox"/> SCHOOL REVIEW
(New Construction) | <input type="checkbox"/> Current liability ins. |
| <input type="checkbox"/> PROOF OF OWNERSHIP
(Attached) | <input type="checkbox"/> DERM REVIEW
(New Construction/Additions/Tree Removal) | <input type="checkbox"/> Worker's Comp. |
| <input type="checkbox"/> CONDO ASSOCIATION APPROVAL | <input type="checkbox"/> PUBLIC WORKS | <input type="checkbox"/> Cont. Lic. Check |
| <input type="checkbox"/> UPFRONT FEES AMOUNT: _____ | | <input type="checkbox"/> OTHER
(Specify and Attach) |
| | | <input type="checkbox"/> FLORIDA DEPARTMENT OF
BUSINESS AND
PROFESSIONAL REGULATION
APPROVAL (RESTAURANTS) |

PERMIT FEES (OFFICE USE ONLY)

Scanning Fees Small (1.85 per sheet)	22.20	Art in Public Places	
Scanning Fees Large (3.50 per sheet)		Certificate of Use and Occupancy	
Village of Palmetto Bay Permit Fees	254.36	Concurrency Fee (7.35%)	24.03
Miami-Dade County Fees (sq. ft. x \$65/1000x0.60)	12.00	Technology Fee (6.3%)	19.38
		Zoning Inspection Fee (157.50 per application)	
Radon-Inspector State Educational Fund and DCA State fee	7.64	Administration Fee	
Code Enforcement Fine		Express Fee (25.00)	
Certificate of Completion		Public Works Fee	25.00
Construction Sign Fee		Landscape Review Fee (175.00 per hour)	
Roll-off Waste Container Fee (105.00 per container site)		Special Review Fee (89.25 per hour)	
Rework Fee		Other	

ORIGINAL DOCUMENT TO
FILE WITH THE PALMETTO
BAY BUILDING DEPARTMENT
\$ 358.63

PLAN REVIEWER APPROVAL AREA (OFFICE USE ONLY)

SECTION	REVIEWER APPROVAL'S NAME	APPROVAL DATE	REJECTED DATE NUMBER 1	REJECTED DATE NUMBER 2	REJECTED DATE NUMBER 3
COMMUNITY DEVELOPMENT					
ZONING					
ELECTRICAL					
MECHANICAL					
PLUMBING					
FIRE					
ROOFING					
PUBLIC WORKS					
PLANNING					
STRUCTURAL					
BUILDING	<i>AMC</i>	<i>2/10/12</i>			
BUILDING OFFICIAL					

REWORKS: A fee of \$105.50 may be charged for failure to make required corrections previously indicated. The fee shall be charged after the initial review plus one follow up review per trade. Please note that Florida Statutes 553.80 section 2(b) states "with respect to evaluation of design professionals documents, if a local government finds it necessary, in order to enforce compliance with the Florida Building Code and issue a permit, to reject design documents required by the code three or more times for failure to correct a code violation specifically noted in each rejection, including but not limited to egress, fire protection, structural stability, energy, accessibility, lighting, ventilation, electrical, mechanical, plumbing, and gas systems, or other requirements identified by rule of the Florida Building Commission adopted pursuant to Chapter 120, the local government shall impose, each time after third such review the plans are rejected for that code violation a fee of four times the amount of the proportion of the permit fee attributed to plans review".

ISSUING OFFICIAL

FINAL PLAN REVIEWED AND PREPARED FOR ISSUANCE BY: *AMC* DATE: *2/10/12*

CONDITIONS OF APPROVAL

PLAN TRACKING

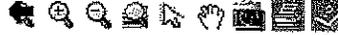
Plans Checked out	Date	Clerk	Plans Checked in	Date	Clerk


 ORIGINAL DOCUMENT OF
 FILE WITH THE PERMIT
 PLAN BUILDING DEPARTMENT

My Home

miamidade.gov

ACTIVE TOOL SELECT



MIAMI-DADE

Show Me:

Property Information

Search By:

Select Item

Text only

Property Appraiser Tax Estimator

Property Appraiser Tax Comparison

Portability S.O.H. Calculator

Summary Details:

Folio No.:	33-5028-006-049D
Property:	9240 SW 166 ST
Mailing Address:	DOUGLAS COLLINS & W JOANNE
	9240 SW 166 ST MIAMI FL 33157-3447

Property Information:

Primary Zone:	0100 SINGLE FAMILY RESIDENCE
CLUC:	0001 RESIDENTIAL - SINGLE FAMILY
Beds/Baths:	3/2
Floors:	1
Living Units:	1
Adj Sq Footage:	2,194
Lot Size:	12,852 SQ FT
Year Built:	1958
Legal Description:	BENSON PARK 1ST ADDN PB 65-118 LOT 4 BLK B LOT SIZE 108.000 X 119 OR 12874-1612 0486 1 F/A/J 30-5028- 006-0490 OR 12874- 1612 0486 00

Assessment Information:

Year:	2011	2010
Land Value:	\$92,534	\$92,534
Building Value:	\$130,503	\$131,291
Market Value:	\$223,037	\$223,825
Assessed Value:	\$126,728	\$124,856

Exemption Information:

Year:	2011	2010
Homestead:	\$26,000	\$26,000
2nd Homestead:	NO	NO

Taxable Value Information:

Year:	2011	2010
Taxing Authority:	Applied Exemption/ Taxable Value:	Applied Exemption/ Taxable Value:
Regional:	\$126,728/\$0	\$124,856/\$0
County:	\$126,728/\$0	\$124,856/\$0
City:	\$126,728/\$0	\$124,856/\$0
School Board:	\$126,728/\$0	\$124,856/\$0

Sale Information:

Sale Date:	4/1986
Sale Amount:	\$70,000
Sale O/R:	12874-1612
Sales	



Aerial Photography - 2009

0 111 ft

Legend

Property Boundary
Selected Property

Street
Highway
Miami-Dade County
Water



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| [My Neighborhood](#) | [Property Appraiser](#)

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If you experience technical difficulties with the Property Information application, or wish to send us your comments, questions or suggestions please email us at [Webmaster](#).

Web Site
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RECEIVED FROM THE COUNTY OF MIAMI-DADE
ORIGINAL DOCUMENT ON FILE WITH THE POLICE DEPARTMENT
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.**

To: Community Development Department- Building & Permitting Division
8950 SW 152nd Street
Palmetto Bay, Fl 33157

Re: Owner's Name:
Property Address:
Roofing Permit Number:

Dear Building Official:

I Douglas Collins certify that I am not required to retrofit the roof to wall connections of my residence because:

The just valuation for the structure for purposes of ad valorem taxation in less than \$300,000.00 or the insured amount does not exceed \$300,000.00 (Provide copy of Insurance)

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).

X Douglas Collins
Signature of Property Owner

X Douglas Collins
Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 08

Day of Feb, 20 12

Personally Known
 Or Produced Identification

[Handwritten signature]



Elio Valdes
COMMISSION # DD853015
EXPIRES: FEB. 02, 2013
WWW.AARONNOTARY.COM

When the just valuation of the structure for purposes of ad valorem taxation is equal to or more than \$300,000.00, and the building was not constructed in compliance with the FBC nor with 1994 SFBC and affidavit of Roof to Wall Connection Hurricane Mitigation Retrofit must be provided.

Florida Building Code Edition 2007
High Velocity Hurricane Zone Uniform Permit Application Form

Section A (General Information)

Master Permit No. _____ Process No. _____
 Contractor's Name S.R. Horowitz Roofing Inc
 Job Address _____

ROOF CATEGORY

- Low Slope
 Asphaltic Shingles
 Mechanically Fastened Tile
 Metal Panel/Shingles
 Mortar/Adhesive Set Tile
 Wood Shingles/Shakes
 Prescriptive BUR-RAS 150

Are there Gas Vent Stacks?
 Yes No

ROOF TYPE

Type: Natural LPGX

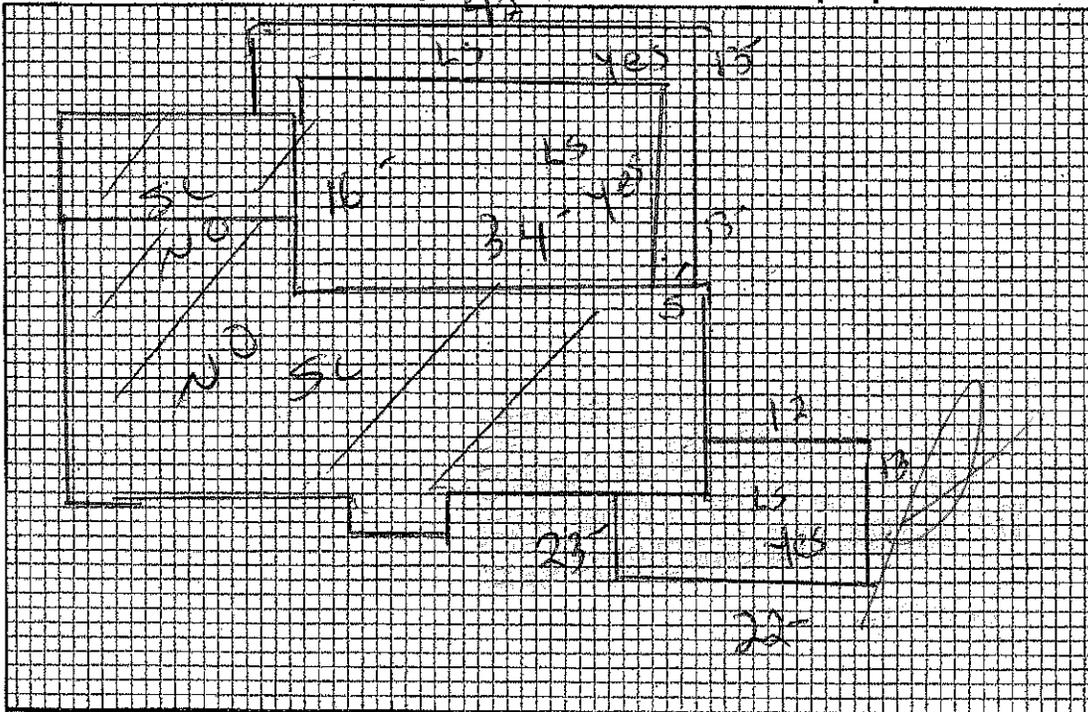
- New Roof Re-Roofing Recovering Repair Maintenance

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF) 1817 Steep Sloped Roof Area (SF) 0 Total (SF) 1817

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.



Section C (Low Sloped Roof System)

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

System Manufacturer: CAF
 NOA No.: 09-024.01

Design Wind Pressures, From RAS 128 or Calculations:

Pmax1: 9.2 Pmax2: 2.6 Pmax3: 12.3

Max. Design Pressure, From the Specific NOA System: 3.2
 Deck Type: 126 TK

Gauge/Thickness: TK
 Slope: 1/2

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:

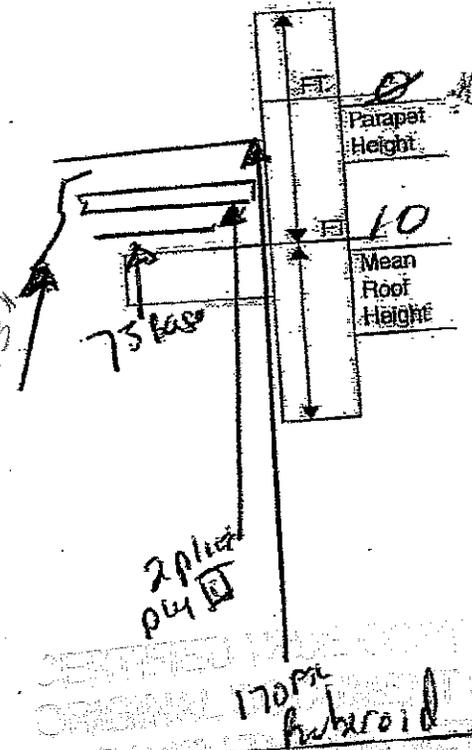
Top Insulation Layer:
 Top Insulation Size and Thickness:
 Top Insulation Fastener/Bonding Material:

Base Sheet(s) & No. of Ply(s): 1 75 BAS
 Base Sheet Fastener/Bonding Material: 174 AS + TW TAGS
 Ply Sheet(s) & No. of Ply(s): 2 1163 Ply 12
 Ply Sheet Fastener/Bonding Material: D312.0 SM ASPHE A
 Top Ply: 170 PR med. Ruberoid
 Top Ply Fastener/Bonding Material: D312.0 SM ASPHE A
 Surfacing:

Fastener Spacing for Anchor/Base Sheet Attachment:
 Field: 9" oc @ Lap, # Rows 2 @ 5" oc
 Perimeter: 6" oc @ Lap, # Rows 4 @ 5" oc
 Corner: 4" oc @ Lap, # Rows 4 @ 4" oc

Number of Fasteners Per Insulation Board
 Field _____ Perimeter: N/A Corner _____

Illustrate Components Noted and Details as Applicable:
 Woodblocking, Gutter, Edge Termination, 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.



CERTIFIED TRUE COPY OF ORIGINAL SUBMITTED ON [unclear] DAY BUILDING DEPARTMENT

SECTION 1524
HIGH VELOCITY HURRICANE ZONES REQUIRED OWNERS NOTIFICATION FOR ROOFING
CONSIDERATIONS

1524.1 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 Chapter 15 of the Florida Building Code, Building 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 adjacent box indicates that the item has been explained.

JA 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) issues 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.

JDC 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).

JDC 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.

JDC 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 Florida Building Code provides the option of maintaining this appearance.

JDC 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.

JDC 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 Florida Building Code, Plumbing.

JDC 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. It may be beneficial to consider additional venting which can result in extending the service life of the roof.

[Signature]
Owners/Agent's Signature

2/18/12
Date

[Signature]
Contractor's Signature

9240 SW 166 St
Property Address

Permit Number

RECEIVED THIS COPY OF THE ORIGINAL DOCUMENT OF FILE WITH THE PERMITTING DIVISION BUILDING DEPARTMENT



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33130-1563
(305) 375-2904 FAX (305) 375-2908

NOTICE OF ACCEPTANCE (NOA)

GAF Material Corporation
1361 Alps Road
Wayne, NJ 07470



SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the Florida Building Code and the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: GAF RUBEROID® Modified Bitumen Roof System for Wood Decks.

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA No. 07-1203.01 and consists of pages 1 through 31.
The submitted documentation was reviewed by Jorge L. Acebo.



NOA No.: 09-0224.01
Expiration Date: 11/06/13
Approval Date: 04/08/09
Page 1 of 31

Membrane Type: SBS/SBS Cold Applied

Deck Type 1: Wood, Non-insulated

Deck Description: 1 1/32" or greater plywood or wood plank decks

System Type E(1): Base sheet mechanically fastened to roof deck.

All General and System Limitations shall apply.

Fire Barrier: FireOut™ Fire Barrier Coating, VersaShield® Non-Asphaltic Fiberglass-Based Underlayment or Securock™

Base sheet: GAFGLAS® #80 ULTIMA™ Base Sheet, STRATAVENT® Eliminator™ Nailable, RUBEROID® Modified Base Sheet, RUBEROID® 20, RUBEROID® SBS Heat-Weld™ Smooth or RUBEROID® SBS Heat-Weld™ 25 base sheet mechanically fastened to deck as described below;

Fastening Options: GAFGLAS® Ply 4, GAFGLAS® Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the lap staggered and in two rows 12" o.c. in the field.

(Maximum Design Pressure -45 psf, See General Limitation #7)

GAFGLAS® Ply 4, GAFGLAS® Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 12" o.c. in 3 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 12" o.c. in the field of the sheet.

(Maximum Design Pressure -45 psf, See General Limitation #7)

GAFGLAS® Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field.

(Maximum Design Pressure -52.5 psf, See General Limitation #7)

GAFGLAS® #80 ULTIMA™, RUBEROID® 20, RUBEROID® Mop Smooth, base sheet attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field.

(Maximum Design Pressure -60 psf, See General Limitation #7)

GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 12" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -60 psf, See General Limitation #7)

Any of above Base sheets attached to deck approved annular ring shank nails and 3" inverted Drill-Tec™ insulation plates at a fastener spacing of 9" o.c. at the 4" lap staggered in two rows 9" in the field.

(Maximum Design Pressure -60 psf; See General Limitation #7)



NOA No.: 09-0224.01
Expiration Date: 11/06/13
Approval Date: 04/08/09
Page 27 of 31

GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 8" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.
(Maximum Design Pressure -75 psf. See General Limitation #7)

Ply Sheet:

(Optional) One or more plies GAFGLAS® PLY 4, GAFGLAS® Flex Ply™ 6, GAFGLAS® #80, RUBEROID® MOP Smooth or RUBEROID® 20 sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Membrane:

One or more plies of RUBEROID® MOP Smooth, RUBEROID® Mop 170 FR, RUBEROID® Mop Granule, Roof Match™ SBS Mop Granule, RUBEROID® Mop Plus Granule, RUBEROID® 20, RUBEROID® 30, RUBEROID® EnergyCap SBS 30 FR RUBEROID® 30 FR or RUBEROID® Mop FR or RUBEROID ULTRACLAD® SBS in adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

Or,

One or more plies of RUBEROID® MOP Smooth, RUBEROID® Mop Granule, Roof Match™ SBS Mop Granule, RUBEROID® Mop 170 FR, RUBEROID® Mop Plus Granule, RUBEROID® 20, RUBEROID® 30, RUBEROID® EnergyCap SBS 30 FR, RUBEROID® 30 FR or RUBEROID® Mop FR or RUBEROID® ULTRACLAD® SBS in Leak Buster™ Matrix™ 102 SBS Adhesive at an application rate of 1-2 gal./sq.

Surfacing:

(Optional, required if RUBEROID® MOP Smooth or RUBEROID® 20 is top membrane) Install one of the following:

1. Gravel or slag applied at 400 lbs./sq. and 300 lbs./sq. respectively in a flood coat of approved asphalt at 60 lbs./sq. or applied in a flood coat of Leak Buster™ Matrix™ 103 Cold Process Adhesive applied at a rate of 3 gal./sq.
2. GAFGLAS® Mineral Surfaced Cap Sheet, GAFGLAS® Energy Cap Mineral Surfaced Capsheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
3. Leak Buster™ Matrix™ 303 Premium Fibered Aluminum Roof Coating, at 1.5 gal./sq.
4. Leak Buster™ Matrix™ 715, Leak Buster™ Matrix™ 322, TOPCOAT® MB+, TOPCOAT® Fireshield Elastomeric Roofing Membrane, applied at 1 to 1.5 gal./sq.
5. Leak Buster™ Matrix™ 602 MB Xtra Elastomeric Roofing Membrane, EnergyCote® roof coating applied at 1 to 1.5 gal./sq.
6. TOPCOAT® Surface Seal, TOPCOAT® Fireshield® SB Solvent based Elastomeric Roofing Membrane applied at 1 to 1.5 gal./sq.
7. Advance Green Technologies Photovoltaic Laminate solar energy collector auxiliary roof equipment installed in compliance with manufacturer's specifications and applicable Building Codes.

Maximum Design Pressure:

See Fastening above



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Membrane Type: APP/SBS Heat Weld

Deck Type 1: Wood, Non-insulated

Deck Description: 1 9/32" or greater plywood or wood plank decks

System Type E(2): Base sheet mechanically fastened.

All General and System Limitations shall apply.

Fire Barrier: FireOut™ Fire Barrier Coating, VersaShield® Non-Asphaltic Fiberglass-Based Underlayment or Securock™.

(optional)

Base sheet: GAFGLAS® #80 ULTIMA™ Base Sheet, STRATAVENT® Eliminator™ Nailable, RUBEROID® Modified Base Sheet, RUBEROID® MOP Smooth, RUBEROID® 20, RUBEROID® SBS Heat-Weld™ Smooth or RUBEROID® SBS Heat-Weld 25 base sheet mechanically fastened to deck as described below.

Fastening Options: GAFGLAS® Ply 4, GAFGLAS® Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the lap staggered and in two rows 12" o.c. in the field.

(Maximum Design Pressure -45 psf, See General Limitation #7)

GAFGLAS® Ply 4, GAFGLAS Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 12" o.c. in 3 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 12" o.c. in the field of the sheet.

(Maximum Design Pressure -45 psf, See General Limitation #7)

GAFGLAS® Flex Ply™ 6, GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field.

(Maximum Design Pressure -52.5 psf, See General Limitation #7)

GAFGLAS® #80 ULTIMA™, RUBEROID® 20, RUBEROID® Mop Smooth, base sheet attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field.

(Maximum Design Pressure -60 psf, See General Limitation #7)

GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 12" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -60 psf, See General Limitation #7)

Any of above Base sheets attached to deck approved annular ring shank nails and 3" inverted Drill-Tec™ insulation plates at a fastener spacing of 9" o.c. at the 4" lap staggered in two rows 9" in the field.

(Maximum Design Pressure -60 psf, See General Limitation #7)



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GAFGLAS® #75 Base Sheet or any of above Base sheets attached to deck with Drill-Tec™ #12 standard, #14 or # 15 Screws and 3" Drill-Tec™ steel plate or Drill-Tec™ AccuTrac Plates, 8" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet. (Maximum Design Pressure -75 psf, See General Limitation #7)

Ply Sheet:

(Optional except over RUBEROID® Modified Base Sheet, RUBEROID® MOP Smooth, RUBEROID® 20, RUBEROID® SBS Heat-Weld™ Smooth or RUBEROID® SBS Heat-Weld™) One or more plies GAFGLAS® PLY 4 or GAFGLAS® Flex Ply™ 6 sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or RUBEROID® Torch Smooth torch applied according to manufacturer's application instructions.

Membrane:

One ply of RUBEROID® Torch Smooth, RUBEROID® Torch Granule, Roof Match™ APP Torch Granule, RUBEROID® EnergyCap™ Torch Granule FR, RUBEROID® Torch Plus Granule, RUBEROID® EnergyCap™ Torch Plus FR, or RUBEROID® Torch FR torch applied according to manufacturer's application instructions.

Or

One or more plies of RUBEROID® SBS Heat-Weld™ PLUS, RUBEROID® SBS Heat-Weld™ PLUS FR, RUBEROID® SBS Heat-Weld™ 170 FR, RUBEROID® EnergyCap™ SBS Heat-Weld™ Plus FR, RUBEROID® SBS Heat-Weld™, RUBEROID® SBS Heat-Weld™ Smooth, RUBEROID® ULTRACLAD® SBS and RUBEROID® SBS Heat-Weld™ 25 applied according to manufacturer's application instructions.

Surfacing:

(Optional, required if RUBEROID® MOP Smooth or RUBEROID® 20 is top membrane) Install one of the following:

1. Gravel or slag applied at 400 lbs./sq. and 300 lbs./sq. respectively in a flood coat of approved asphalt at 60 lbs./sq. or applied in a flood coat of Leak Buster™ Matrix™ 103 Cold Process Adhesive applied at a rate of 3 gal./sq.
2. GAFGLAS® Mineral Surfaced Cap Sheet, GAFGLAS® Energy Cap Mineral Surfaced Capsheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
3. Leak Buster™ Matrix™ 303 Premium Fibered Aluminum Roof Coating, at 1.5 gal./sq.
4. Leak Buster™ Matrix™ 715, Leak Buster™ Matrix™ 322, TOPCOAT® MB+, TOPCOAT® Fireshield Elastomeric Roofing Membrane, applied at 1 to 1.5 gal./sq.
5. Leak Buster™ Matrix™ 602 MB Xtra Elastomeric Roofing Membrane, EnergyCote® roof coating applied at 1 to 1.5 gal./sq.
6. TOPCOAT® Surface Seal, TOPCOAT® Fireshield® SB Solvent based Elastomeric Roofing Membrane applied at 1 to 1.5 gal./sq.
7. Advance Green Technologies Photovoltaic Laminate solar energy collector auxiliary roof equipment installed in compliance with manufacturer's specifications and applicable Building Codes.

Maximum Design Pressure:

See Fastening Above



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WOOD DECK SYSTEM LIMITATIONS:

1. A slip sheet is required with Ply 4 and Flex Ply™ 6 when used as a mechanically fastened base or anchor sheet.
2. Minimum ¼" Dens Deck or ½" Type X gypsum board is acceptable to be installed directly over the wood deck.

GENERAL LIMITATIONS:

1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer
3. All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
4. An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used the base sheet shall be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.; or strip mopped 8" ribbons in three rows, one at each side lap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq.
Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf.
5. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida Registered Engineer, Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. Calculations prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant **(When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)**
8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform to Roofing Application Standard RAS 111 and applicable wind load requirements.
9. The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, and corners). Neither rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners and corners). **(When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)**
10. All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

END OF THIS ACCEPTANCE



NOA No.: 09-0224.01
Expiration Date: 11/06/13
Approval Date: 04/08/09
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APPROVED FOR THE COUNTY OF MIAMI-DADE
BY THE BUILDING DEPARTMENT

Class A - Fully Adhered

1. Deck: NC

Incline: 1/2

Insulation (Optional): — One or more layers perlite, wood fiber, glass fiber, isocyanurate, urethane, perlite/isocyanurate composite, perlite/urethane composite, wood fiber/isocyanurate composite, phenolic, any thickness.

Base Sheet (Optional): — One or more plies Type G1, G2 or G3.

Membrane: — One or more plies "Ruberoid Torch" (Smooth or Granule), "Ruberoid Torch Granule Plus", "Ruberoid Mop" (Smooth or Granule) or "Ruberoid Mop Plus Granule" (granule).

Surfacing: — Gravel, 400 lbs/sq, loose laid or applied in a flood coat of hot roofing asphalt.

2. Deck: NC

Incline: 1/2

Base Sheet (Optional): — One or more plies Type G1, G2 or G3.

Membrane: — One or more plies "Ruberoid Torch" (Smooth or Granule), "Ruberoid Torch Granule Plus", "Ruberoid Mop" (Smooth or Granule) or "Ruberoid Mop Plus Granule".

Coating: — Karnak No. 97, 1-1/2 - 3 gal/sq.

3. Deck: NC

Incline: 1/4

Insulation (Optional): — One or more layers perlite, wood fiber, glass fiber, any thickness.

Base Sheet (Optional): — One or more plies Type G1, G2 or G3.

Membrane: — One or more plies "Ruberoid Torch" (Smooth or Granule), "Ruberoid Torch Granule Plus", "Ruberoid Mop Granule" or "Ruberoid Mop Plus Granule".

Coating: — Karnak No. 97, 1-1/2 - 3 gal/sq.

4. Deck: C-15/32

Incline: 1/2

Insulation: — One or more layers perlite, glass fiber, isocyanurate, urethane, perlite/isocyanurate composite, perlite/urethane composite, phenolic, 1-1/2 in. min thickness (offset from plywood joints 6 in.).

Base Sheet: — One or more plies Type G2 or G3.

Ply Sheet (Optional): — One or more plies Type G1.

Membrane: — One or more plies "Ruberoid Torch" (Smooth or Granule), "Ruberoid Torch Granule Plus", "Ruberoid Mop" (Smooth or Granule) or "Ruberoid Mop Plus Granule".

Surfacing: — Karnak No. 97, 1-1/2 - 3 gal/sq.

5. Deck: NC

Incline: 1/2

Base Sheet (Optional): — One or more plies Type G1, G2 or G3.

Membrane: — One or more plies "Ruberoid Torch" (Smooth or Granule), "Ruberoid Torch Granule Plus".

Surfacing (Optional): — Karnak "No. 97" or "169" at 1-3 gal/sq or Grundy Ind. "20 F Emulsion" at 3 gal/sq.

6. Deck: C-15/32

Incline: 1/2

Insulation: — One or more layers perlite, glass fiber, 3/4 in. minimum, isocyanurate, urethane, perlite/isocyanurate composite, perlite/urethane composite, 1-1/2 in. min.

Base Sheet (Optional): — One or more plies Type G1, G2 or G3.

BRF 2012-0393

9240 SW 166ST

OFFICE COPY

2007 FORDON ROAD
ELECTRIC 3/01/2009

VILLAGE OF PLYMOUTH BAY				
THIS COPY OF PLAN IS TO BE KEPT ON BUILDING SITE OR NO INSPECTION WILL BE GIVEN				
SECTION	APPROVED		DISAPPROVED	
	BY	DATE	BY	DATE
ZONING				
LANDSCAPING				
PUBLIC UTILITIES				
BUILDING				
UTILITIES				
HANDICAP				
STRUCTURAL				
ELECTRICAL				
PLUMBING				
MECHANICAL				
ENERGY				
FIRE				
BUILDING OFFICIAL				

Subject to compliance with all federal, state and county laws, rules and regulations, the Village of Plymouth Bay assumes no responsibility for accuracy of all results of message and
 NOTICE: In addition to the requirements of these permits there may be additional residential applications to this in the public record of this county and village.

Permit Action Report
VILLAGE OF PALMETTO BAY

pmPermitActions
2/23/2017 8:32:28AM

Address: 9240 SW 166 ST
PALMETTO BAY, FL 33157

Permit type: b7roof - FLAT ROOF/LOW SLOPE
Routing queue: b7 - FLAT ROOF /LOW SLOPE

Permit #: BRF-2012-0393
Master permit #:

Group # - Name	Action Code	Action Description	Completion Date	Completion Code	Completed By	Comments
1 - PERMIT COUNTER	intake	APPLICATION INTAKE	2/16/2012	compl	efraleay	
1 - PERMIT COUNTER	cuff	COLLECT UPFRONT FEE	2/16/2012	n/a	efraleay	
2 - PLANS PROCESSING	routeplans	ROUTE PLANS FOR REVIEW	2/16/2012		efraleay	
3 - BUILDING REVIEW	brev	BUILDING REVIEW	2/16/2012	apprve	aramos	
4 - PLANS PROCESSING	compcomp	COMPILE COMMENTS	2/16/2012	n/a	efraleay	
4 - PLANS PROCESSING	notifycust	NOTIFY CUSTOMER	2/16/2012	n/a	efraleay	
5 - PERMIT COUNTER	verifycont	VERIFY CONTRACTOR	2/16/2012	compl	efraleay	
6 - PLANS PROCESSING	notifycust	NOTIFY CUSTOMER	2/16/2012	compl	efraleay	
7 - PERMIT COUNTER	collissue	COLLECT FEES/ISSUE PERMIT	2/16/2012	compl	efraleay	
8 - INSPECTIONS	700	NOC	2/22/2012	apprve	aramos	OK - A. RAMOS
8 - INSPECTIONS	760	SHEATHING AFFIDAVIT MITIGATION	2/22/2012	apprve	aramos	OK - A. RAMOS
8 - INSPECTIONS	761	TIN CAP/BASE PLY	2/22/2012	apprve	aramos	OK - A. RAMOS
8 - INSPECTIONS	762	HOT MOP/ SELF-ADHERING	2/24/2012		aramos	
8 - INSPECTIONS	765	FINAL ROOF	2/22/2012	cancel	aramos	(305) 219-0565
8 - INSPECTIONS	765	FINAL ROOF	2/24/2012	apprve	aramos	OK - A. RAMOS (305) 219-0565

APPROVED FOR THE VILLAGE OF PALMETTO BAY
BY THE VILLAGE ENGINEER
DATE: 2/24/2012

**AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT AND SECONDARY
WATER BARRIER HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT
SINGLE FAMILY RESIDENTIAL STRUCTURES
PURSUANT TO SECTION 553.844 F.S.**

To: VILLAGE OF PALMETTO BAY
Building & Capital Projects Department
9705 E. Hibiscus Street
Palmetto Bay, FL 33157

Re: Owner's Name D Douglas Collins
Property Address 9240 SW 166 ST
Roofing Permit Number _____

Dear Building Official:

I Serafin Hornutiver 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 "Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Structures" adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

Qualifying Agent

[Signature]
Signature of Qualifying Agent

Serafin Hornutiver
Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me this 22
day of FEB, 2012
(SEAL)

 **Elio Valdes**
COMMISSION # DD853015
EXPIRES: FEB. 02, 2013
WWW.AARONNOTARY.com

Personally known
 or Produced Identification



**Sheathing Affidavit/ Secondary Water Barrier
(FBC 2004)**

Job Address: 9240 SW 166th Permit No.: BRF-2012-0393

Name of Roofing Company: S.R. Hornum Inc

Name of Qualifier: SERAFIN HORNUM License No.: CCCO26488

Address: _____

I, SERAFIN HORNUM 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) Section 201.1 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 sections FBC Section 201.1. Nail spacing shall be 6 (six) inches on center at panel edges, 6(six) inches on center at intermediate supports, and where applicable 4 (four) inches on center over gable ends and sub-fascia. Existing fasteners may be utilized to achieve such minimum spacing. I also certify that a secondary water barrier that meets the requirements of F.B.C. Section 201.2 been achieved and hereby provide the accompany photos for verification.

[Signature] 2/22/2012
Qualifier/Contractor Signature * Date

Serafin Hornum, having first been duly sworn, does affirm
(Print Name of Qualifier/ Contractor) the statement above to be true and correct by his/her own personal knowledge.

Notary (Seal/Stamp) Date _____

- Personally Known to me
- Produced photo ID- Type of ID _____

* An Owner/Builder acting as contractor is considered the qualifier for this code.

Elio Valdes
COMMISSION #DD853015
EXPIRES: FEB. 02, 2013
WWW.AARONNOTARY.com



RECEIVED
2012 FEB 22 10:00 AM
SERAFIN HORNUM
9240 SW 166th
MARIETTA, FL 32909
[Signature]