Miami Shores Village - BUILDING DEPARTMENT
10050 NE 2 Ave Miami Shores, FL 33138
305-795-2204 www.msvfl.gov

Roof Permit Checklist

- Permit Application – Signed and Notarized by both property owner and contractor.
- As per section 523.1((6) of Miami Shores Village, code of Ordinances the color of the tile should be impregnated with the same color intensity through. Please specify the color of the required color thru tile on the permit application.
- Owners Affidavit of Exemption Form, F.S. 553.844
- Owners Notification for Roofing Consideration Form (Re-roofing only)
- Affidavit of Compliance with roof to wall connection for Hurricane Mitigation Form (if applicable).
- High Velocity Hurricane Zone Uniform Roofing Application package.
- Product Approvals
    a. Front Page
    b. Specific system description.
    c. Specific system limitation.
    d. General system limitations.
    e. Fire Directory Listing page.
- Design calculation per chapter 16. Or if applicable RAS 127 or RAS 128.
- **Required for Inspection**: A statement from a licensed plumbing contractor that he or she personally inspected the existing gas vent system and found the system safely reconnected and attached as required by the Florida Building Code. If the contractor is unable to provide such a statement for the existing gas vent or the gas vent is replaced, a permit by a licensed plumbing contractor will be required prior to final roof inspection.

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OWNER'S AFFIDAVIT OF EXEMPTION

Roof-to-Wall Connection Hurricane Mitigation Retrofit for Existing Site-Built Single Family Residential Structures pursuant to section 553.844 F.S

Owner Name:_____
Property Address: _____
Roofing Permit Number: _____

Dear Building Official:
I, _____ property owner, certify that I am not required to retrofit the roof-to-wall connections of my building because of one of the following reasons **(select one)**:

- ❑ The building has an insured value of $300,000 or less. **(Provide copy of homeowner's insurance)**
- ❑ Is uninsured or I cannot provide insurance documentation, and the just value of the structure for purposes of ad valorem taxation is less than $300,000. **(Provide a copy of the Miami-Dade County Property Appraiser's Assessment)**
- ❑ 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).
- ❑ The roof-to-wall connections at gables ends or all corners cannot be completed for 15% of the cost of roof replacement. **(Provide an estimate of costs for retrofit by a General/Roofing Contractor)**

_____ _____
Signature of Property Owner Print Name
STATE OF FLORIDA, COUNTY OF MIAMI-DADE
Sworn to and subscribed before me by means of ❑ physical presence OR
❑ online notarizations this _____day of _____,20_____,
by _____
Personally known or produced identification: _____
Signature of Notary Public _____
Print Name _____

When the valuation of the structure for purpose of ad valorem taxation is equal to or more than $300,000 and the building was not constructed with FBC nor a 1994 SFBC. Then you must provide a building application for the roof to wall connection Hurricane Mitigation.

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SECTION R4402.13
HIGH VELOCITY HURRICANE ZONES – REQUIRED OWNERS NOTIFICATION FOR ROOFING CONSIDERATIONS

R4402.13.1 Scope. As it pertains to the section, it is the responsibility of roofing contractor to provide the owner with the required roofing permit, and to explain to the owner the content of the section. The provisions of Section R4402 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 ant the contractor. The owner's initial in the designated space indicates that the item has been explained.

1. _____ **Aesthetics-Workmanship:** the workmanship provisions of Section R4402 are for the purpose of providing that the roof system meets the wind resistance and water instruction performance standards. Aesthetics (appearance) are not a consideration with respect to workmanship provisions. Aesthetic issues such as color or architectural appearance, that are not part of a zoning code, should be addressed as part of the agreement between the owner and the contractor.

2. _____**Renailing wood decks:** When replacing roofing, the existing wood roof deck may have to be renailed in accordance with the current provisions of Section R4403. (The roof deck is usually concealed prior to removing the existing roof system).

3. _____**Common roofs:** Common roofs are those which have no visible delineation between neighboring units (i.e., townhouses, condominiums, etc.) In buildings with common roofs, the roofing contractor and/or owner should notify the occupants of adjacent units of roofing to be performed.

4. _____**Exposed Ceiling:** 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 penetration of the underside of the decking may not be acceptable. This provides the option of maintaining the appearance.

5. _____**Ponding water:** The current roof system and/or deck of the building may not drain well and may cause water to pond (accumulate) in low-lying areas of the roof. Pounding can be an indication of structural distress and may require the review of a professional structural engineer. Pounding may shorten the life expectancy and performance of the new roofing system. Pounding conditions may not be evident until the original roofing system is removed. Pounding conditions should be corrected.

6. _____**Overflow scuppers (wall outlets):** It is required that rainwater flows off so that the roof is not overloaded from a buildup of water. Perimeter/edge wall or other roof extension may block this discharge if overflow scuppers (wall outlets) are not provided. It may be necessary to install overflow scuppers in accordance with the requirements of Sections R4402, R4403 and R4413.

7. _____**Ventilation:** Most roof structures should have some ability to vent natural airflow through the interior of the structure 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.

_____ _____

Owner/Agent's Signature Date Contractor Signature Date

For Forms and Applications click here:
http://bldg.miamishoresvillage.com/WebLink/Browse.aspx?id=118080&dbid=0&repo=MiamiShoresVillage

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AFFIDAVIT OF COMPLIANCE WITH ROOF TO WALL CONNECTION HURRICANE MITIGATION RETROFIT FOR EXISTING SITE-BUILT SINGLE FAMILY RESIDENTIAL STRUCTURES PURSUANT TO SECTION 553.844 F.S.

To: Miami Shores Village Building Department
10050 NE 2nd Ave
Miami Shores, Fl 33138

Date: _____

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

Dear Building Official:

I _____ certify that I have improved the roof to wall connections of the referenced property as required by the Manual of Hurricane Mitigation Retrofits for Existing Site-Built Single Family Residential Structures as adopted by the Florida Building Commission by Rule 9B-3.047 F.A.C.

_____ _____

Signature Print Name

STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me by means of

❑ physical presence OR ❑ online notarizations

this _____day of _____,20_____,

by _____

Personally known or produced identification: _____

Signature of Notary Public _____

Print Name _____

Miami Shores Village - BUILDING DEPARTMENT
10050 NE 2 Ave Miami Shores, FL 33138
305-795-2204 www.msvfl.gov

Permit #_____ DATE: _____

INSPECTION AFFIDAVIT

I _____ licensed as a(n) Contractor / Engineer / Architect,
(Print name and circle License Type)

License #: _____

On or about_____, I did personally inspect the roof deck nailing
(Date & time)
work at_____
(Complete Job Site Address)
Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S)

_____
Signature

STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me by means of

❑ physical presence OR ❑ online notarizations

this _____day of _____,20_____,

by _____

Personally known or produced identification: _____

Signature of Notary Public _____

Print Name _____

Florida Building Code 8th Edition (2023)

High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County

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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

Florida Building Code 8th Edition (2023)

High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County

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

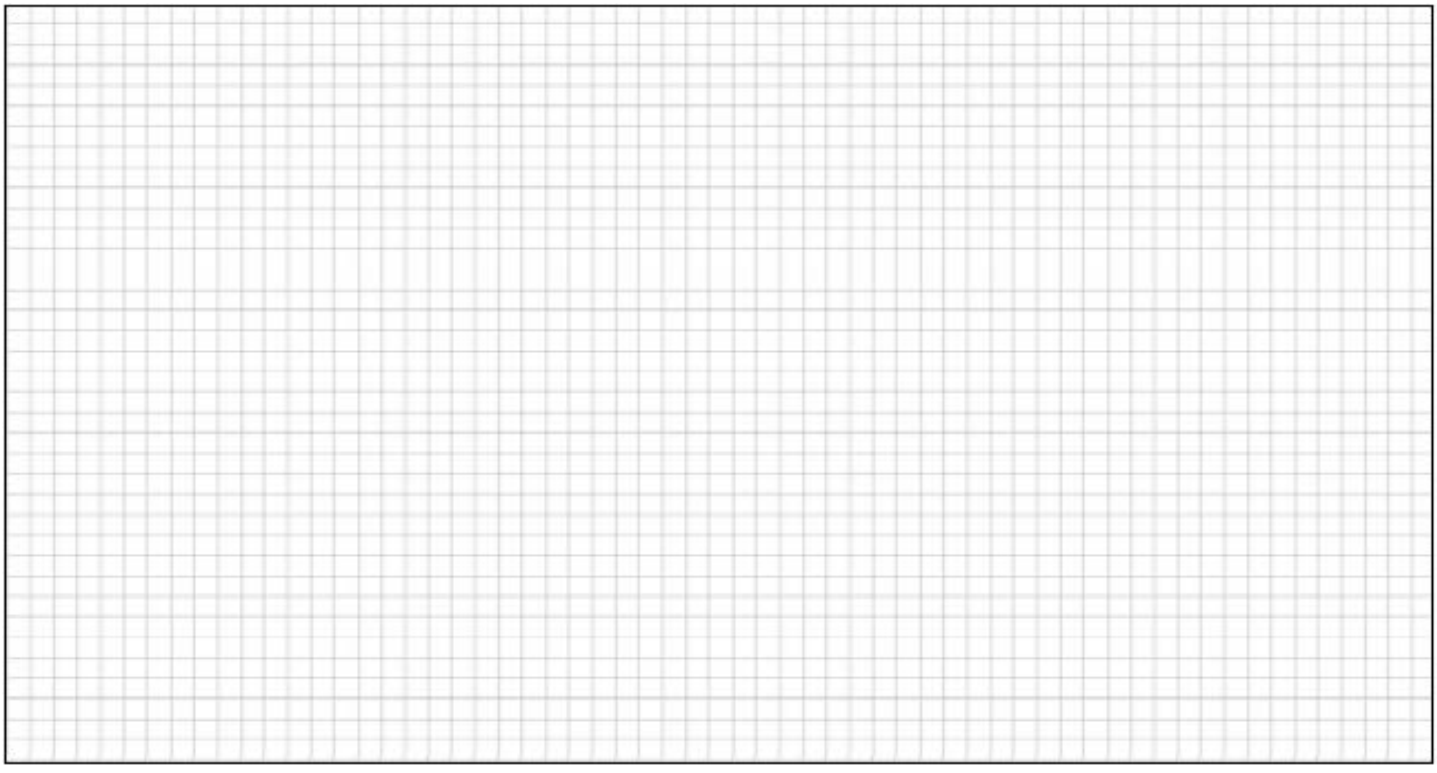
Low Slope Roof Area (ft^2) _____ Steep Sloped Roof Area (ft^2) _____ Total (ft^2) _____

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.



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High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County

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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

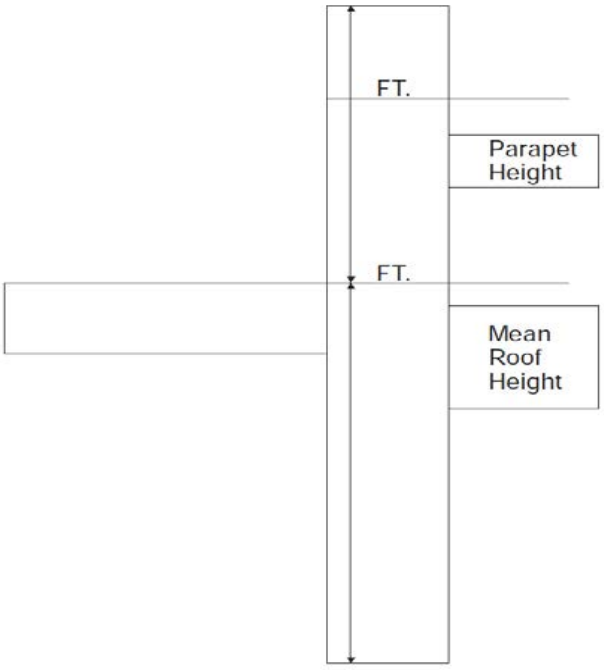
Zone 3 _____ " oc @ Laps, # Rows _____ @ _____" oc

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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High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County

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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 2: _____ Zone3: _____

Slope Range: ◯ ≥ 2:12 to ≤ 4:12 ◯ > 4:12 to ≤ 6:12 ◯ > 6:12 to ≤ 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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High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County
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 _____ = _____) – Mg: _____ = Mr_1 _____ Product Approval Mf: _____

(Zone 2: _____ x λ _____ = _____) – Mg: _____ = Mr_{2e} _____ Product Approval Mf: _____

(Zone 3: _____ x λ _____ = _____) – Mg: _____ = Mr_{2n} _____ Product Approval Mf: _____

Tile attachment method: ***Alternate Tile attachment method*** :

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

For Uplift Based tile systems use Method 3. Compare the values for F' with the values for Fr. If the F' values are greater than or equal to the Fr 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 θ _____) = Fr_1 _____ Product Approval F': _____

(Zone 2: _____ x L = _____ x W = _____) – (w) x cos θ _____) = Fr_2 _____ Product Approval F': _____

(Zone 3: _____ x L = _____ x W = _____) – (w) x cos θ _____) = Fr_3 _____ Product Approval F': _____

Where to obtain information		
Description	**Symbol**	**Where to Find**
Design Pressure	Zones 1, 2, & 3	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