



## WINDOWS/DOORS/GARAGE DOORS/SHUTTERS PERMIT APPLICATION CHECKLIST

---

Minimum Required Permit Applications:

Broward County Uniform Building Permit Application (*filled out and notarized*)

Documented proof of cost (*a signed contract or a completed Cost Verification if submitting as an Owner Builder*)

Owner Builder Affidavit- if homeowner is acting as contractor (*owner must provide proof of residency at job address and this affidavit must be notarized*)

A Wind Load Design Pressure Chart

Broward County Uniform Retrofit Window, Door, Garage Door, and/or Shutter Schedule

Placement plan showing size and location(s) of window(s)/door(s)/garage door(s) being replaced or the shutters to be installed. Indicate if this is a size for size exchange, if any openings are new or if any opening sizes have changed (bigger or smaller).

Product Approval (DBPR) / Notice of Acceptance (Miami Dade) obtained from point of purchase (please circle the appropriate applicable information instead of highlighting) Note: **Other agency forms are NOT acceptable**

Pool Safety Barrier Form (*signed by Homeowner*)

Notice of Commencement (*if job value is over \$5,000*)

See the Board of Rules and Appeals Policy 20-01 Packet in reference to retrofit of window and door replacements.

Indicate on plans if this project is located In a "Zero Lot Line" community.

### FOR BUILDINGS OVER 30' IN HEIGHT

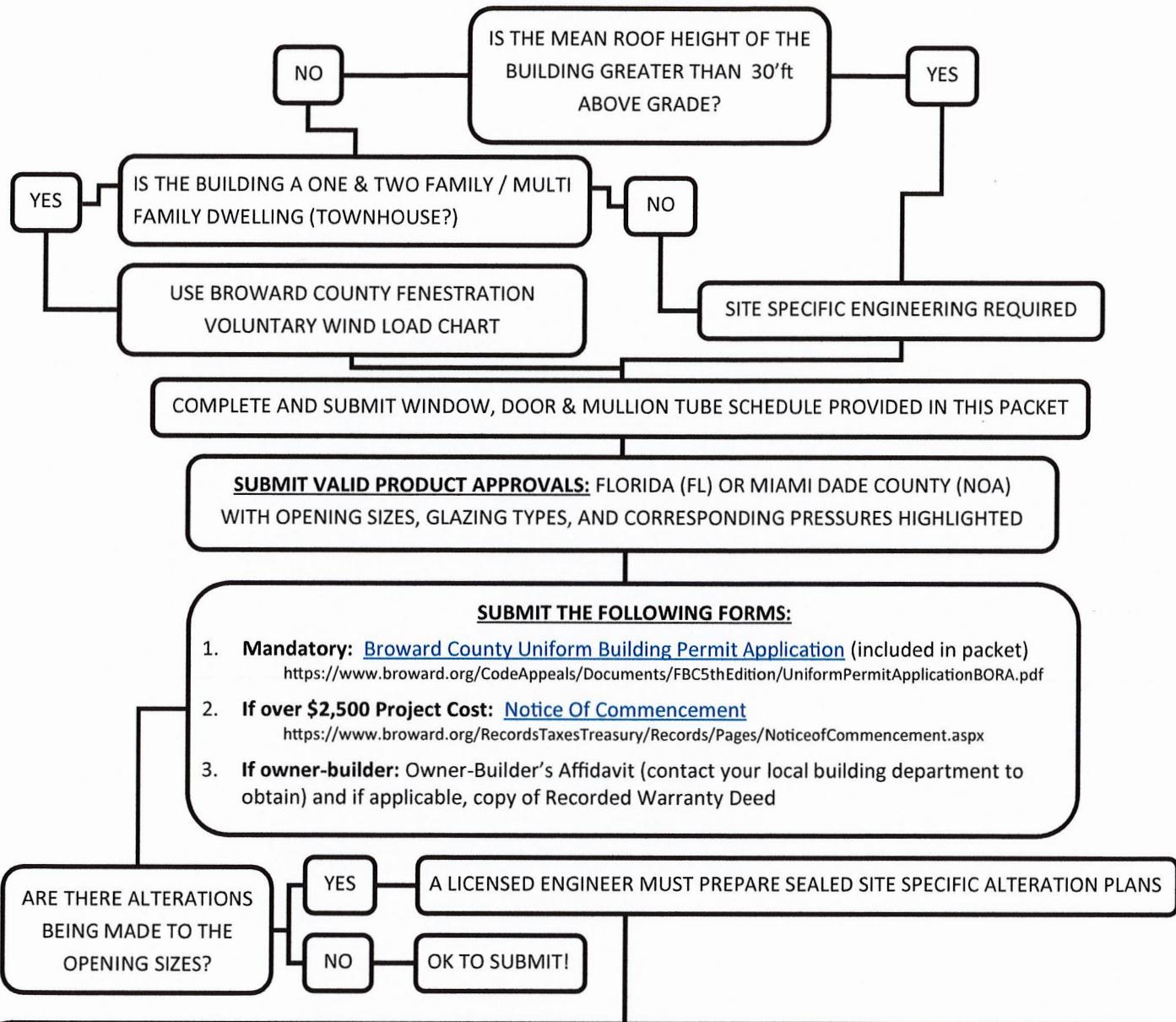
Buildings with 30 feet in height or more shall have a site-specific design (signed and sealed) by a Florida Professional Engineer or Architect, indicating the size and location of all retro openings and the required opening design wind pressures for each opening.

Window/Door Schedule -signed and sealed by a Florida Professional Engineer or Architect

**PLEASE NOTE: WINDOWS AND DOORS MUST BE IMPACT RESISTANT UNLESS SHUTTERED WITH CODE COMPLIANT PERMITTED SHUTTERS.**

**THE PERMIT APPLICATION WILL NOT BE ACCEPTED WITHOUT THE ABOVE MINIMUM DOCUMENTATION  
OTHER DOCUMENTS MAY BE REQUIRED DEPENDING UPON THE JOB CONDITIONS**

INSTRUCTION FLOWCHART



DESIGN CRITERIA REQUIREMENTS FOR PLANS

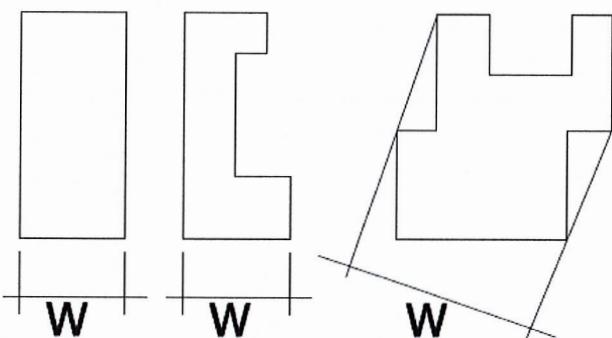
1. Unit sketch, generally to scale illustrating the unit and overall building (if multi-family).
2. Broward requires ASCE 7 calculations using Peak wind velocity Vult(min) = 170mph
3. Either Exposure C (inland) or D (coastal - see description next page)
4. Mean (average) Roof height (see page 3)
5. Overall Building Width & Length (lessor dimension is used to determine width of zone 5)
6. Label each opening dimensions, wind zone (4 or 5) on the layout as shown in example on page 3
7. Each opening shall have a corresponding "mark" which ties into the window, door & mullion schedule provided within this packet

OK TO SUBMIT!

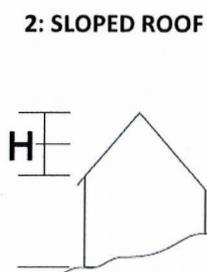
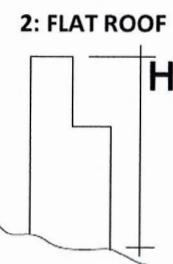
## Explanation of Terms

- 1: Exposure C:** All of Broward County. The "Broward County Fenestration Voluntary Wind Load Chart" included within this packet can be used for all detached one & two story dwellings and multiple single-family dwellings (townhomes).
- 2: Exposure D:** A structure that's within 600' or 20X building height of a flat area/body of water that's a mile long. Generally all areas east of the Intercoastal Waterway. Wind load pressures must be completed by a licensed design professional for all structures.
- 3: Mean Roof Height ("h"):** Average between the lowest and the highest roof point of a sloped roof, also the highest point of a flat roof (also see page 3).
- 4: Minimum Building Width:** 10% of least horizontal dimension (W) or 0.4h, whichever is smaller, but not less than either 4% of least horizontal dimension or 3'ft minimum.

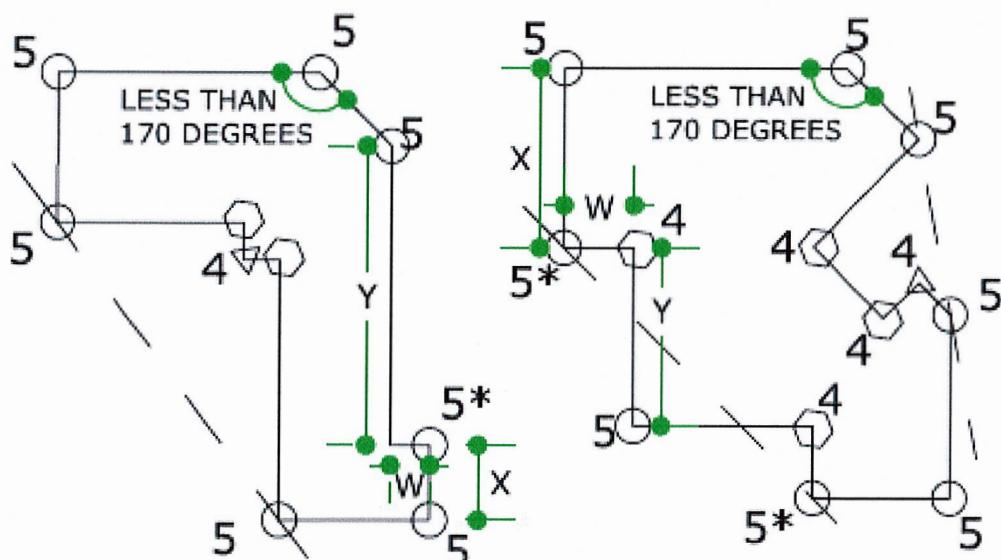
### MIN. BUILDING WIDTH EXAMPLES (PLAN VIEW):



### Mean Roof Height



### ZONE EXAMPLES (PLAN VIEW)



**170 degree:**  
An unobstructed exterior corner with an interior angle of less than 170 degree would be considered a corner zone

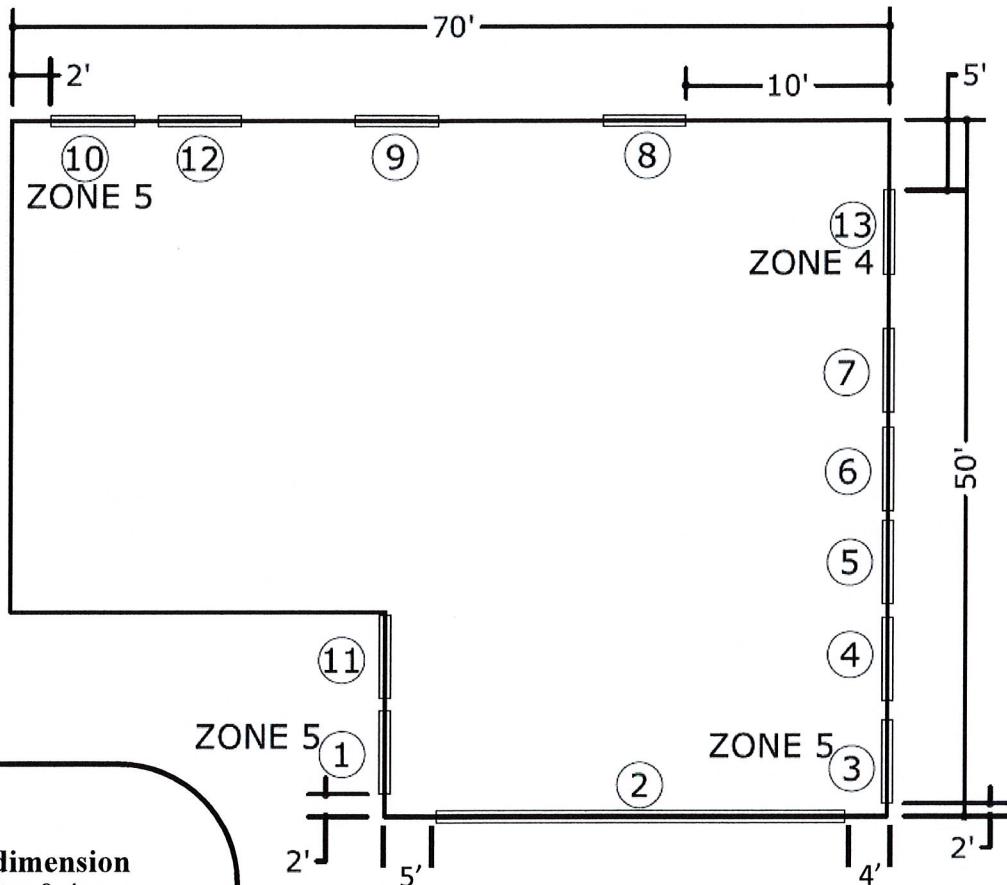
See page 3 for example on how to calculate the zone dimensions of a building

**NOTE:** The corner designated by an \* would not be considered a corner if dimension **W** is less than half the width of the corner zone and dimension **X** and **Y** are greater than the width of a corner zone

## Minimum Sketch Requirement

**Zone determinations:**

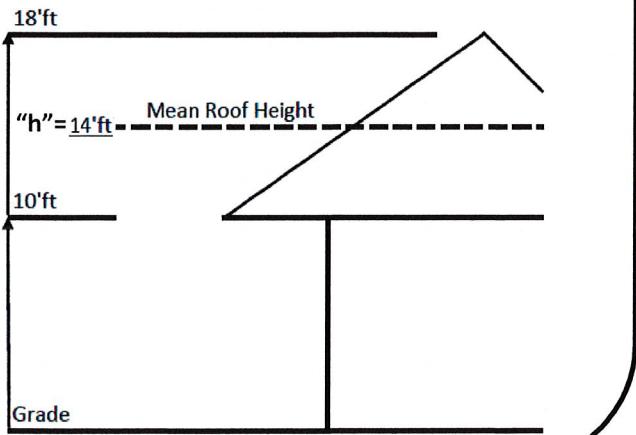
1. Zone 5 (corner zone) in this example is calculated as 5'ft in width, any opening within 5'ft of an outside unobstructed corner would be considered in zone 5.
2. In this example, openings 1, 2, 3 & 10 are located in a zone 5 (corner zone).
3. All other opening would be considered zone 4 (interior zone).

**ZONE CALCULATIONS:**

Zone 5 =  $.10 \times$  least horizontal dimension (50ft  $\times .10 = 5$ ft) or  $.4 \times "h"$  (14ft  $\times 0.4 = 5.6$ ft) whichever is smaller, but not less than either 4% of the least horizontal dimension (50ft  $\times 4\% = 2$ ft), or 3ft.

**Zone 5 (corner zone) would be 5'ft wide.**

**All others would be zone 4.**

**Next Steps:**

- Complete Window & Door Schedule included within this packet
- Submit all forms to your local building department according to their instructions.
- The local building department may require additional documentation

# BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Revised 11-14-2025

Select One Trade:  Building  Electrical  Plumbing  Mechanical  Other \_\_\_\_\_

Private Provider?  YES  NO If yes, attach [Form # 61G20-2.005-2002-01](#)

Application Number: \_\_\_\_\_ Application Date: \_\_\_\_\_

1	Job Address: _____	Unit: _____	City: _____	
	Tax Folio No.: _____ Flood Zn: _____ BFE: _____ Floor Area: _____ Job Value: _____			
	Building Use: _____		Construction Type: _____	Occupancy Group: _____
	Present Use: _____		Proposed Use: _____	
	Description of Work: _____			
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision		<input type="checkbox"/> Other: _____		
Legal Description: _____			<input type="checkbox"/> Attachment	
2	Property Owner: _____ Phone: _____ Email: _____			
	Owner's Address: _____ City: _____ State: _____ Zip: _____			
	Contracting Co.: _____ Phone: _____ Email: _____			
3	Company Address: _____ City: _____ State: _____ Zip: _____			
	Qualifier's Name: _____		Owner-Builder License Number: _____	
	<input type="checkbox"/> License Exempted per F.S. 489.117(4)(a)1		Business Tax Receipt Number: _____	
4	Architect/Engineer's Name: _____ Phone: _____ Email: _____			
	Architect/Engineer's Address: _____ City: _____ State: _____ Zip: _____			
	Bonding Company: _____			
	Bonding Company's Address: _____ City: _____ State: _____ Zip: _____			
	Fee Simple Titleholder's Name (If other than the owner) _____			
	Fee Simple Titleholder's Name (If other than the owner) _____ City: _____ State: _____ Zip: _____			
	Mortgage Lender's Name: _____			
Mortgage Lender's Address: _____ City: _____ State: _____ Zip: _____				

## BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Job Address: \_\_\_\_\_ Unit: \_\_\_\_\_ City: \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations 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, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

**OWNER'S 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.

**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.**

<p><input checked="" type="checkbox"/> _____ Signature of Property Owner or Agent (Including Contractor)</p> <p><b>STATE OF FLORIDA</b> <b>COUNTY OF</b> _____</p> <p>Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____ by _____</p> <p style="text-align: center;">(Type/Print Property Owner or Agent Name)</p> <p>NOTARY'S SIGNATURE as to Owner or Agent's Signature</p> <p>Notary Name _____ (Print, Type or Stamp Notary's Name)</p> <p>Personally Known _____ Produced Identification _____</p> <p>Type of Identification Produced _____</p>	<p><input checked="" type="checkbox"/> _____ Signature of Qualifier</p> <p><b>STATE OF FLORIDA</b> <b>COUNTY OF</b> _____</p> <p>Sworn to (or affirmed) and subscribed before me by means of _____ physical presence or _____ online notarization, this _____ day of _____, 20____ by _____</p> <p style="text-align: center;">(Type/Print Qualifier or Agent Name)</p> <p>NOTARY'S SIGNATURE as to Qualifier or Agent's Signature</p> <p>Notary Name _____ (Print, Type or Stamp Notary's Name)</p> <p>Personally Known _____ Produced Identification _____</p> <p>Type of Identification Produced _____</p>
---	---

APPROVED BY: \_\_\_\_\_ Permit Officer \_\_\_\_\_ Issue Date: \_\_\_\_\_ Code in Effect: \_\_\_\_\_  
FOR OFFICE USE ONLY FOR OFFICE USE ONLY FOR OFFICE USE ONLY

**A jurisdiction may use a supplemental page to request additional information and cite other conditions. Please inquire.**

Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.

\*\*\*Issuance of a building permit by the City of Margate does not guarantee that the work permitted is allowed by your homeowner's association. The homeowner and/or contractor is responsible for obtaining their approval separately.\*\*\*



## OWNER-BUILDER COST VERIFICATION FORM

**PLEASE NOTE THAT THIS FORM IS ONLY TO BE USED BY AN OWNER BUILDER.**

**ALL OTHERS MUST PROVIDE PROOF OF COST, eg: Contract, Agreement, etc.**

PERMIT # \_\_\_\_\_

ADDRESS: \_\_\_\_\_ MARGATE, FL

### **COST TO COMPLETE WORK FOR THIS PERMIT**

**Please note: a VALID amount must be entered for both labor and materials,  
regardless of who is doing the work.**

**LABOR:** \_\_\_\_\_

(PROVIDE BREAKDOWN BY HOURS/DAYS REQUIRED TO COMPLETE WORK)

**MATERIALS:** \_\_\_\_\_

(PROVIDE RECEIPTS OR OTHER VERIFICATION)

**TOTAL:** \_\_\_\_\_

**SIGNED BY HOMEOWNER:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

# WARNING

## Pulling an Owner/Builder Permit is Risky Business!



If you do not intend to do the work yourself and have been asked by someone without a contractor's license to pull the permit, you are at risk of financial harm.

**Section 489.103 (7), Florida Statutes** requires that when property owners act as their own contractor, they must supervise the work being performed. Any person working on your building who is not licensed must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee.

Without workers' compensation insurance, you could be held liable for injuries incurred on your property. Typically, your homeowners' insurance policy will not honor your claim if the work being performed required a licensed contractor. You could end up responsible for thousands of dollars of medical bills.



**Not only is it dangerous, but it's against the law.**

**Section 455.227(1)(j), Florida Statutes** prohibits any person from aiding, assisting, procuring, employing or advising any unlicensed person or entity. Individuals who aid unlicensed persons may face fines of up to \$5,000.

## Is it worth it?

For more information, speak with your local building department before you apply for a permit or contact the Department of Business and Professional Regulation at 866.532.1440 or online at [www.MyFloridaLicense.com](http://www.MyFloridaLicense.com)



## OWNER BUILDER STATEMENT/AFFIDAVIT

OWNER NAME: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

**IMPORTANT!** Proof of ownership is required in the form of a deed or homestead exemption and a Florida ID.

I am applying for a Building Permit pursuant to the Owner Builder exemption set forth in Florida Statute 489.103. Florida law requires that I attest to the following statements.

**BY SIGNING THIS STATEMENT, I ATTEST THAT:** (*Initial to the left of each statement*)

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.

I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1395 or at [www.myfloridalicense.com/dbpr/pro/cilb](http://www.myfloridalicense.com/dbpr/pro/cilb) for more information about licensed contractors.



## OWNER BUILDER STATEMENT/AFFIDAVIT

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the address given on this form.

I agree to notify the Building Division immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Check below the types of permits you are seeking:

Building

Roofing / Reroofing

Electrical

Plumbing

Air Conditioning

Other \_\_\_\_\_

I, \_\_\_\_\_, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

Type/Print Owner's Name

\_\_\_\_\_  
Signature of Owner-Builder

STATE OF FLORIDA - COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ month, 20 \_\_\_, by \_\_\_\_\_.

Name of person making statement

Commission Stamp of Notary Public:

\_\_\_\_\_  
Signature of Notary Public – State of Florida

Personally Known

OR Produced Identification

Type of Identification Produced: \_\_\_\_\_

**BORA Policy 20-01 BROWARD COUNTY UNIFORM RETROFIT WINDOW & DOOR SCHEDULE**


PAGE \_\_\_\_ OF \_\_\_\_

NAME: \_\_\_\_\_ SITE ADDRESS: \_\_\_\_\_ CONTACT #: \_\_\_\_\_

1	2	3		4		5		6		7		8		9		10	
OPENING LOCATION ID	PRODUCT ACCEPTANCE NUMBER	PRODUCT APPROVAL PRESSURE RATING		REQUIRED DESIGN PRESSURE		OPENING SIZES		ZONE LOCATION		Impact Glazing		OPENING HAS EXISTING SHUTTERS		NEW SHUTTERS REQUIRED		MULLION TUBES REQUIRED	
		(+) PSF	(-) PSF	(+) PSF	(-) PSF	WIDTH X HEIGHT IN INCHES	AREA IN SQ FEET	4 INTER	5 END	YES	NO	YES	NO	YES	NO	YES	NO
						X											
						X											
						X											
						X											
						X											
						X											
						X											
						X											
						X											
						X											
						X											

 Is this job in a Zero Lot Line Community **YES** **NO**

IDENTIFY OPENINGS ALPHABETICALY OR NUMERICALLY ON ELEVATION SHEETS.

IDENTIFY VERTICALLY STACKED GLASS IN THE SAME OPENINGS FROM BOTTOM TO TOP WITH SUB NUMBERS (Example: A, A1, A2, ETC.).

## Broward County Fenestration Voluntary Wind Load Chart\*

Per ASCE 7-10 Method 1, Part 1 and FBC (2023) for Retrofitting in Accordance with Formal Interpretation #5

For Detached One-and Two family dwellings and Multiple Single-Family Dwellings (Townhouses) with Mean Roof Height  $\leq$  30 feet

Wind 170 mph (3-second gust) / Exposure C\*\* /  $K_d = 0.85$  /  $K_{zt} = 1.0$  / Pressures are in PSF / Not for use in Coastal (Exposure 'D' areas)

\* Using Allowable Stress Design methodology ( $P = 0.6w$ ) / \*\* Exposure shall be determined according to ASCE 7-10 Section 26.7.3 (Exposure Categories)

Effective Wind Area (ft <sup>2</sup> )	Location: Gable or Hip Roof	Mean Roof Height of 15 feet						Mean Roof Height of 20 feet						Mean Roof Height of 25 feet						Mean Roof Height of 30 feet						
		Zone			Zone			Zone			Zone			Zone			Zone			Zone			Zone			
		1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	
		+	-	+	-	+	-	+	-	+	+	-	+	-	+	-	+	-	+	+	-	+	-	+	-	
10	Gable/Hip Roof $0 \leq \theta \leq 7^\circ$	16.0	-37.8	16.0	-63.4	16.0	-95.4	16.3	-40.2	16.3	-67.4	16.3	-101.4	17.1	-42.1	17.1	-70.6	17.1	-106.3	17.8	-43.7	17.8	-73.4	17.8	-110.4	
20		16.0	-36.8	16.0	-56.7	16.0	-79.1	16.0	-39.1	16.0	-60.2	16.0	-84.0	16.0	-41.0	16.0	-63.1	16.0	-88.0	16.7	-42.6	16.7	-65.6	16.7	-91.5	
50		16.0	-35.6	16.0	-47.7	16.0	-57.4	16.0	-37.8	16.0	-50.7	16.0	-61.0	16.0	-39.6	16.0	-53.2	16.0	-63.9	16.0	-41.1	16.0	-55.2	16.0	-66.4	
100		(0 to 1.5:12)	16.0	-34.6	16.0	-41.0	16.0	-41.0	16.0	-36.8	16.0	-43.6	16.0	-43.6	16.0	-38.5	16.0	-45.7	16.0	-45.7	16.0	-40.0	16.0	-47.4	16.0	-47.4
10		Gable/Hip Roof***	21.8	-34.6	21.8	-60.2	21.8	-89.0	23.1	-36.8	23.1	-64.0	23.1	-94.6	24.3	-38.5	24.3	-67.1	24.3	-99.2	25.2	-40.0	25.2	-69.7	25.2	-103.0
20	7° < $\theta \leq 27^\circ$ (1.5 to 6:12)	19.9	-33.6	19.9	-55.4	19.9	-83.3	21.1	-35.7	21.1	-58.9	21.1	-88.5	22.1	-37.4	22.1	-61.7	22.1	-92.7	23.0	-38.9	23.0	-64.1	23.0	-96.3	
50		17.3	-32.4	17.3	-49.0	17.3	-75.6	18.4	-34.4	18.4	-52.1	18.4	-80.3	19.3	-36.0	19.3	-54.6	19.3	-84.2	20.0	-37.4	20.0	-56.7	20.0	-87.5	
100		(1.5 to 6:12)	16.0	-31.4	16.0	-44.2	16.0	-69.8	16.3	-33.3	16.3	-47.0	16.3	-74.2	17.1	-35.0	17.1	-49.2	17.1	-77.8	17.8	-36.3	17.8	-51.1	17.8	-80.8
10	Gable Roof $27^\circ < \theta \leq 45^\circ$ (6 to 12:12)	34.6	-37.8	34.6	-44.2	34.6	-44.2	36.8	-40.2	36.8	-47.0	36.8	-47.0	38.5	-42.1	38.5	-49.2	38.5	-49.2	40.0	-43.7	40.0	-51.1	40.0	-51.1	
20		33.6	-35.9	33.6	-42.3	33.6	-42.3	35.7	-38.1	35.7	-44.9	35.7	-44.9	37.4	-39.9	37.4	-47.1	37.4	-47.1	38.9	-41.5	38.9	-48.9	38.9	-48.9	
50		32.4	-33.3	32.4	-39.7	32.4	-39.7	34.4	-35.4	34.4	-42.2	34.4	-42.2	36.0	-37.1	36.0	-44.2	36.0	-44.2	37.4	-38.6	37.4	-46.0	37.4	-46.0	
100		31.4	-31.4	31.4	-37.8	31.4	-37.8	33.3	-33.3	33.3	-40.2	33.3	-40.2	35.0	-35.0	35.0	-42.1	35.0	-42.1	36.3	-36.3	36.3	-43.7	36.3	-43.7	

\*\*\* For Hip Roofs with angle > 7 degrees (1.5:12) and  $\leq$  25 degrees (5.5:12), Zone 3 shall be treated as Zone 2 (Figure 30.4-2 B, Note 7, p. 337)

Effective Wind Area (ft <sup>2</sup> )	Location	Mean Roof Height of 15 feet						Mean Roof Height of 20 feet						Mean Roof Height of 25 feet						Mean Roof Height of 30 feet							
		Zone			Zone			Zone			Zone			Zone			Zone			Zone			Zone				
		4	5		4	5		4	5		4	5		4	5		4	5		4	5		4	5			
		+	-	+	-	+	-	+	-	+	+	-	+	+	-	+	+	-	+	+	-	+	+	-	+	-	
10	Wall	37.8	-41.0	37.8	-50.6			40.2	-43.6	40.2	-53.8			42.1	-45.7	42.1	-56.4			43.7	-47.4	43.7	-58.6				
20		36.1	-39.3	36.1	-47.2			38.3	-41.7	38.3	-50.1			40.2	-43.8	40.2	-52.6			41.8	-45.5	41.8	-54.6				
50		33.8	-37.0	33.8	-42.7			36.0	-39.4	36.0	-45.4			37.7	-41.3	37.7	-47.5			39.2	-42.9	39.2	-49.4				
100		32.1	-35.3	32.1	-39.3			34.1	-37.5	34.1	-41.7			35.8	-39.4	35.8	-43.8			37.2	-40.9	37.2	-45.5				
500		28.2	-31.4	28.2	-31.4			29.9	-33.3	29.9	-33.3			31.4	-35.0	31.4	-35.0			32.6	-36.3	32.6	-36.3				

### Garage Door Wind Loads

for a Building with 30-foot Mean Roof Height

Exposure C

Tables 1609.7(1) & (2), and Section 1609.3.1

Effective Wind Area	Roof Angle	Wind Load																								
Width	Height		+	-																						
8	8		35.2	-39.8																						
10	10		34.1	-38.2																						
14	14		32.3	-36.1																						
9	7		38.4	-43.4																						
16	7		36.8	-41.0																						

For Effective Wind Areas between those given, values may be interpolated. Otherwise use the value associated with the lower Effective Wind Area.

If you would like this document in an alternate format, please call (954) 970-3004 or email building@margatefl.com



# HOMEOWNERS REQUIREMENTS FOR POOL SAFETY BARRIER PRIOR TO FINAL INSPECTION

## POOL BARRIER REQUIREMENTS ALSO APPLY TO WINDOW/DOOR PERMITS

In an effort to provide for compliance with the **Preston de Ibern/McKenzie Merriam Residential Swimming Pool Safety Act**, which had an effective date of October 1, 2000, the **City of Margate** will review all Permit applications, which involve homes with pools, for compliance with F.S. 515.27.

(Statute included for reference)

### **515.27 Residential swimming pool safety feature options; penalties.-**

- (1) In order to pass final inspection and receive a certificate of completion, a residential swimming pool must meet at least one of the following requirements relating to pool safety features:
  - (a) The pool must be isolated from access to a home by an enclosure that meets the pool barrier requirements of s. 515.29;
  - (b) The pool must be equipped with an approved safety pool cover;
  - (c) All doors and windows providing direct access from the home to the pool must be equipped with an exit alarm that has a minimum sound pressure rating of 85 dBA at 10 feet; (UL 2017)
  - (d) All doors providing direct access from the home to the pool must be equipped with a self-closing, self-latching device with a release mechanism placed no lower than 54 inches above the floor; or
  - (e) A swimming pool alarm that, when placed in a pool, sounds an alarm upon detection of an accidental or unauthorized entrance into the water. Such pool alarm must meet, and be independently certified to ASTM Standard F2208, titled "Standard Safety Specification for Residential Pool Alarms," which includes surface motion, pressure, sonar, laser, and infrared alarms. For purposes of this paragraph, the term "swimming pool alarm" does not include any swimming protection alarm device designed for individual use, such as an alarm attached to a child that sounds when the child exceeds a certain distance or becomes submerged in water.
- (2) A person who fails to equip a new residential swimming pool with at least one pool safety feature as required in subsection (1) commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083, except that no penalty shall be imposed if the person, within 45 days after arrest or issuance of a summons or a notice to appear, has equipped the pool with at least one safety feature as required in subsection (1) and has attended a drowning prevention education program established by s. 515.31. However, the requirement of attending a drowning prevention education program is waived if such program is not offered within 45 days after issuance of the citation.

All windows and doors that are components of the pool safety barrier, as required by F.S. 515.27, must be identified in the permit documents and will be evaluated for compliance at the final inspection. If the means of compliance does not involve the windows and/or doors, the compliance method will need to be in place and working at the time of the final inspection.

If your pool received a final prior to the effective date of the safety act then it is not statutorily required to meet the requirements of the Safety Act, however, be aware that the **City of Margate strongly encourages the implementation of these safety measures** as added protection for our residents.

If you have **NO POOL**, please check this box:

If you have a **POOL**, please check this box:

Owner's Name: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

## **NOTICE OF COMMENCEMENT**

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes the following information is provided in the Notice of Commencement.

**1. DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** \_\_\_\_\_

**SUBDIVISION** \_\_\_\_\_ **BLOCK** \_\_\_\_\_ **TRACT** \_\_\_\_\_ **LOT** \_\_\_\_\_ **BLDG** \_\_\_\_\_ **UNIT** \_\_\_\_\_

**2. GENERAL DESCRIPTION OF IMPROVEMENT:** \_\_\_\_\_

**3. OWNER INFORMATION:** a. Name \_\_\_\_\_

b. Address \_\_\_\_\_ c. Interest in property \_\_\_\_\_

d. Name and address of fee simple titleholder (if other than Owner) \_\_\_\_\_

**4. CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:** \_\_\_\_\_

**5. SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:** \_\_\_\_\_

**6. LENDER'S NAME, ADDRESS AND PHONE NUMBER:** \_\_\_\_\_

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

**NAME, ADDRESS AND PHONE NUMBER:** \_\_\_\_\_

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes:

**NAME, ADDRESS AND PHONE NUMBER:** \_\_\_\_\_

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_\_\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 or**

**Owner's Authorized Officer/Director/Partner/Manager**

State of Florida

County of Broward

**Print Name and Provide Signatory's Title/Office**

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_, as \_\_\_\_\_ (name of person) \_\_\_\_\_ (type of authority,...e.g. officer, trustee, attorney in fact)

For \_\_\_. (name of party on behalf of whom instrument was executed)

\_\_\_\_ Personally known or \_\_\_\_\_ produced the following type of identification: \_\_\_\_\_

Notary

(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

**Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:**

By \_\_\_\_\_

By \_\_\_\_\_



# SECURE THIS JOB

**DURING A HURRICANE WATCH  
& BEFORE THE ONSET OF HURRICANE VELOCITY WINDS  
YOU ARE REQUIRED TO SECURE THIS JOB**

**IN ACCORDANCE WITH THE BOARD COUNTY ADMINISTRATIVE PROVISIONS  
OF THE FLORIDA BUILDING CODE SECTION 110.13**

**All loose objects  
in exposed outdoor locations  
shall be lashed to rigid construction  
or shall be stored in buildings.**

**Florida Building Code Broward County Administrative Provisions  
Section 110.13.2**

**NOTICES ISSUED BY THE NATIONAL WEATHER SERVICE OF A HURRICANE WATCH ARE DEEMED SUFFICIENT NOTICE  
TO THE OWNER OF REAL PROPERTY UPON WHICH CONSTRUCTION IS OCCURRING, OR ANY CONTRACTOR  
RESPONSIBLE FOR SAID CONSTRUCTION, TO SECURE LOOSE CONSTRUCTION DEBRIS AND LOOSE CONSTRUCTION  
MATERIALS AGAINST EFFECTS OF HURRICANE FORCE WINDS.**

**THIS INCLUDES BUT IS NOT LIMITED TO:**

<b>110.13.2.1 Road Right-of-Way shall remain clear of construction waste and trash</b>	
<b>110.13.2.2 Construction Waste and Trash Contained</b>	<b>110.13.2.3 Construction Materials; Loose Construction Debris; Roofing Tile &amp; Materials; Temporary Electric Service Poles; Temporary Toilets and Temporary Construction Trailer</b>
<b>AND PROTECT ALL GLASS AREAS</b>	