

City of Miramar | Building Division

Building, Planning & Zoning Department 2200 Civic Center Place | Miramar, Florida 33025 Tel: 954.602.3200 | Fax: 954.602.3635 www.miramarfl.gov

WINDOWS & DOORS APPLICATION PACKAGE

Who Can Apply (A or B)

A. For Residential & Commercial Applications, Licensed Contractors properly registered in the Building Division can apply for permit. Contractors shall provide all required applications properly signed and notarized.

B. Owner/Builder for Residential Only. Permit can be issued to owner/builder as per the following requirements:

- Picture ID (Driver License, ID card) matching the address where the work will be conducted.
- Proof of ownership (Recorded warranty deed, tax statement, settlement statement).
- Verification or confirmation of Homestead Exemption

If a contractor is hired, then the contractor must pull the permit.

Required Documents

- □ Complete Permit application base on scope of work, along with a Construction Cost Breakdown including labor, materials & equipment.
- □ Building Permit Valuations. FBC 109.3 109.3.1 The Building Official may require an estimate of the cost utilizing RSMeans and/or other descriptive data as a basis for determining the permit fee. The applicant for a permit shall provide an estimated permit value at a time of application. Permit valuations, shall include total value of work, including materials and labor. IF in the opinion of the building official, the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the Building Official. Final building permit valuation shall be set by the Building Official.

Owner – Builder Disclosure Statement. For Homeowner applicants only.

- □ Affidavit of Awareness of Homeowner's Association (Included in this package). This is a required affidavit which shall be submitted even if the property is not located in a Homeowner's Association.
- □ Construction Debris Removal Affidavit (Included in this package)
- One (1) set of Floor-Plan Sketch indicating location & dimension for every proposed doors & windows. Please, clearly indicate the openings ID on the door-windows schedule as per the Broward County Uniform Windows & Doors schedule. (Include in this Application Package).
- □ Current Florida Product Approvals or Miami Dade Notice of Acceptance (NOA) for the proposed windows and Doors. On Product Approvals, circle all applicable options based on the wind pressures and openings sizes.
- The Broward County Fenestration Wind Load Chart marking (circle) the applicable option based on building height.
- □ Signed & Sealed Engineering Wind Load Calculations can be used in lieu of the Broward County Fenestration Voluntary Wind Load Chart.
- □ A complete Affidavit of Identical Documents is required for Engineered Plans & Calculations submitted with digital signature of a Professional Engineer or Registered Architect. (Included in this package).

Attention Applicant: As per Florida Statutes 713.13, a Recorded Notice of Commencement is required when construction, renovation, alterations values exceed \$5,000. Notice of commencement can be recorded at the office of Broward County Government Center / Records Division 115 S. Andrews Ave. Fort Lauderdale, FL 33301.

The recorded Notice of Commencement should be available at the first inspection.

BROWARD COUNTY UNIFOR	RM BUILDING PERMIT APPLICATION Revised 11-17-2022
Select One Trade: Building Electrical	Plumbing Mechanical Other
Application Number:	Application Date:
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:	
New Addition Repair Alterat	ion Demolition Revision Other:
Legal Description:	Attachment
Property Owner: Phone:	Email:
Owner's Address:	City: State: Zip:
Contracting Co.: Phone:	Email:
Company Address:	City: State: Zip:
Qualifier's Name:	Owner-Builder License Number:
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 (<i>If other than the owner</i>)	
Fee Simple Titleholder's Name (If other than the owner)	City: State: Zip:
Mortgage Lender's Name:	
Mortgage Lender's Address:	City: State: Zip:

inquire.

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.

X Signature of Property Owner or Agent (Including Contractor)	XSignature of Qualifier
STATE OF FLORIDA COUNTY OF	STATE OF FLORIDA COUNTY OF
Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of	Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of
, 20 by	, 20 by
(Type/Print Property Owner or Agent Name)	(Type/Print Qualifier or Agent Name)
NOTARY'S SIGNATURE as to Owner or Agent's Signature	NOTARY'S SIGNATURE as to Qualifier or Agent's Signature
Notary Name (Print, Type or Stamp Notary's Name)	Notary Name (Print, Type or Stamp Notary's Name)
Personally Known Produced Identification	Personally Known Produced Identification
Type of Identification Produced	Type of Identification Produced
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 requesting additional information and citing other conditions, please

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.



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Affidavit of Awareness of Homeowner's Association Regulations

The following "Affidavit" is required as per City's ordinance. This is a mandatory affidavit which is required even if your property is not located in a Homeowner's Association.

ATTENTION APPLICANT. READ CAREFULLY

- For homeowner/Builder applicants, this affidavit can be notarized by Permit Clerk at the Building Division. Homeowner should appear in person with required picture I.D. (i.e. Driver License) and proof of ownership (i.e. Recorded Warranty, County Tax Statement). The physical address on I.D. shall match the address on the proof of ownership (i.e. Recorded Warranty Deed).
- For Licensed Contractor applicants, this affidavit can be notarized outside the Building Division by any Notary Public.

Homeowner or Condominium Association Affidavit Requirement. **Miramar - City Code Sec. 22-29.(c)(1)** As part of the application process for a building permit in accordance with this chapter and with Section 713.20 of the Land Development Code, each applicant shall sign an affidavit (the "affidavit of awareness") indicating that the applicant is aware that, if the subject property is located in a Homeowners' Association or Condominium Association, as defined in this section, the applicant's property may be subject to additional regulations despite the issuance of a building permit by the city.

This serves to notify such homeowner that the issuance of a Building, Landscaping, or other permits by the City of Miramar, Florida does not exempt he/she from any and all other regulations imposed by the Homeowner's Association (HOA) in which his/her property is located. Be aware that despite the issuance of a building permit by the city, the applicant's property may result in additional regulations or denial to perform the work in your property located at HOA community.

Read and Initial to the left of the applicable statement

I acknowledge that I am the ow	vner of property located	d in the following Homeo [,]	wner's Association:
--------------------------------	--------------------------	---------------------------------------	---------------------

Print Name of Homeowner's Association		
I acknowledge that my property is not located in a Homeo	wners' Associatio	n.
Name:		
Homeowner - Print Name		
Job Address:		
Miramar, Florida Zip Code :		
Signature:		
Homeowner - Signature		
STATE OF FLORIDA. Sworn to and subscribed before me this	day of	, 20

Notary Public



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Owner Builder Disclosure Statement

(For Owner Builder Only)

Owner Name:			
Address:		Miramar, FL, Zip Code:	
LOT:	BLOCK:	SUBDIVISION:	

I am submitting an application for a Building Permit as an Owner-Builder in accordance with the exemption set forth in Florida Statute 489.103. Florida law requires construction to be done by a licensed contractor. It's a requirement by law you read and sign the following statements, and hence you can understand your responsibilities as an owner-builder. By signing the following statements, you attest that:

DISCLOSURE STATEMENT (Read and Initial to the left of each statement)

- 1. 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.
- 2. 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.
- 3. 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.
- 4. 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.
- 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
- 6. 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.
- 7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an ownerbuilder 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.
- 8. 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.
- 9. 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.



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Owner/Builder Disclosure Statement

(Continuation)

- 10. 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 (telephone number) or (Internet website address) for more information about licensed contractors.
- 11. 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 listed above.
- 12. I agree to notify (issuer of disclosure statements) 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.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

I have read the foregoing instructions and I am aware of my responsibilities.

Owner Signature

Date Signed

STATE OF FLORIDA, COUNTY OF BROWARD. Sworn to and subscribed before me this _____day of _____, 20____

Notary Public

F.S 489.103. 3(c). If any person violates the requirements of this subsection, the local permitting agency shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.



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Construction Debris Removal Affidavit

ATTENTION APPLICANT. READ CAREFULLY

Section 18-7 of the Code of Ordinances of the City of Miramar ("City Code") requires any debris from demolition work, renovations, re-roofs, and new construction to be removed by the City's trash vendor, Waste Pro of Florida ("Waste Pro"). Failure to adhere to this requirement shall be deemed a violation of the City Code Section 18-7 and shall be subject to code compliance activities that may result in fines/penalties, as provided in the City Code. For roll-off collection services, homeowners/builders and licensed contractors shall contact Waste Pro at the information below.

Waste Pro: 17302 Pines Blvd, Pembroke Pines, FL 33029 Phone: (954) 967-4200 Fax: (954) 241-4489 Website: <u>www.wasteprousa.com</u>

Read and initial to the left of the applicable statement

Initials	I acknowledge that I have to contact Waste Pro for the removal of all construction and demolition debris
Name:	
Job Add	ress:
	City, State Zip Code
Signatur	e:
STATE O	F FLORIDA. Sworn to and subscribed before me this day of, 20, 20

Notary Public





City of Miramar | Building Division

Community Development Department 2200 Civic Center Place | Miramar, Florida 33025 Tel: 954.602.3200 | Fax: 954.602.3635 www.miramarfl.gov

Affidavit of Identical Documents for Digital Submittal

Attention: All documents digitally submitted for permitting purpose shall be in True PDF format. Other formats, including pictures converted to PDF won't be accepted.

I, (print full name)	_Architect/Engineer of
Record with registration number AR/PE #	with
the Architectural/Engineering Firm (Name)	

_____, hereby attest or

affirm that the electronic files submittal of the plans for project located at the location shown below are an exact and accurate duplicate of the complete hardcopy set of plans submitted to the Building Division.

Project Name		
Property Address:		

Folio No.:

I also hereby acknowledge that if there are any discrepancies between the two versions, the review process for said project will be terminated, become null and void, and require re-application under a new permit application number. Previously reviewed plans and comments will be discarded. This affidavit will apply to all documents submitted electronically throughout the life of the project including initial submittal, re-works, revisions, shop drawings, etc.

Description of digitally signed & sealed documents: _____

			e:	
Architect/Engineer of Record Si	anature & Seal			
	ofessional Engineer/Architect is in	digital format, a n	otarization is required.	
Sworn to (or affirmed and	subscribed before me this	day of	20	
Personally known	\Box Produced Identification _		ID #	
Notary Name:				
Notary Signature:				
			Notary Seal	

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 Statues 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 IMPROV	VEMENT:				
3. OWNER INFORMATION: a. Name					
b. Address			c. Interest	in property	
 d. Name and address of fee simple titleholder (i. 4. CONTRACTOR'S NAME, ADDRESS A 	· · · · · · · · · · · · · · · · · · ·				
5. SURETY'S NAME, ADDRESS AND PH	ONE NUMBER AND BOND AN	IOUNT:			
6. LENDER'S NAME, ADDRESS AND PH	ONE NUMBER:				
7. Persons within the State of Florida Section 713.13 (1) (a) 7., Florida Statu NAME, ADDRESS AND PHONE NUMBER	tes:	whom notices or of	her document	ts may be serve	1 as provided by
8. In addition to himself or herself, Ov 713.13 (1) (b), Florida Statutes: NAME, ADDRESS AND PHONE NUMBER	-	ng to receive a copy	of the Lieno	r's Notice as pr	ovided in Section
9. Expiration date of notice of comme specified):		e is 1 year from the	e date of recor	ding unless a d	fferent date is
WARNING TO OWNER: ANY PAYME ARE CONSIDERED IMPROPER PAYM RESULT IN YOUR PAYING TWICE FO RECORDED AND POSTED ON THE JO WITH YOUR LENDER OR AN ATTOR!	ENTS UNDER CHAPTER 71. R IMPROVEMENTS TO YO B SITE BEFORE THE FIRST	3, PART I, SECTION UR PROPERTY. A INSPECTION. IF Y	N 713.13, FLO NOTICE OF C OU INTEND	RIDA STATUTE OMMENCEME TO OBTAIN FIN	<u>ES, AND CAN</u> <u>NT MUST BE</u> JANCING, CONSULT
Signature of Owner or Owner's Authorized Officer/Directo	or/Partner/Manager	Print Name	and Provide	Signatory's Ti	tle/Office
State of Florida County of Broward					
The foregoing instrument was acknow	ledged before me this	day of		_, 20	
By		_, as			
For	n)	(type of aut	hority,e.g. (officer, trustee,	attorney in fact)
(name of party on behalf of whom	instrument was executed)				
Personally known or pro	duced the following type of	identification:	_ 1		
Notary			(Signat	ture of Notary I	Public)
Under Penalties of perjury, I declare the belief (Section 92.525, Florida Statute	6 6	g and that the facts	in it are true to	o the best of my	v knowledge and
Signature(s) of Owner	(s) or Owner(s)' Authorized (Officer/ Director / Pa	artner/Manag	er who signed at	ove:



1 N. University Drive, Suite 3500B Plantation, Florida 33324

Phone: 954-765-4500 Email: rulesboard@broward.org www.broward.org/CodeAppeals

2025 Voting Members

Chair Gregg D'Attile, Mechanical Contractor

Vice-Chair Ron Burr, Swimming Pool Contractor

Mr. Stephen Bailey, P.E., **Electrical Engineer**

Mr. John Famularo, **Roofing Contractor**

Mrs. Shalanda Giles Nelson, General Contractor

Mr. Robert A. Kamm, P.E., Mechanical Engineer

Mr. Daniel Lavrich, P.E., S.I., F.ASCE, F.SEI, Structural Engineer

Mr. Sergio Pellecer, Fire Service Professional

Mr. Daniel Rourke, Master Plumber

Mr. Peter Deveaugh. Master Electrician

Mr. Dennis A. Ulmer, **Consumer** Advocate

Ms. Lynn E. Wolfson, **Disabled Community Representative**

Mr. Abbas H. Zackria, CSI, Architect

2025 Alternate Board Members

Mr. Steven Feller, P.E., Mechanical Engineer

Mr. Jeff Falkanger, Architect

Mr. Alberto Fernandez, General Contractor

Mr. David Rice, P.E., **Electrical Engineer**

Mr. Robert Taylor, **Fire Service Professional**

Mr. James Terry, Master Plumber

Mr. David Tringo, Master Electrician

Mr. Derek A. Wassink, P.E,R.A.,S.I., S.T.S.2., Structural Engineer

Eduard C. Badiu, PhD, P.E. **Roofing Contractor**

Board Attorney Charles M. Kramer, Esq.

Administrative Director Dr. Ana Barbosa

Established 1971 –

BROWARD COUNTY BOARD OF RULES AND APPEALS

FBC 8TH EDITION (2023) **FORMAL INTERPRETATION (#24)**

DATE: January 9, 2025 All Building Officials Dr. Ana Barbosa, Administrative Director FROM: Retrofit of Windows, Doors, Garage Doors, SUBJECT: and Shutters FBC Existing Building, Alteration Level

At its meeting on October 12, 2023, the Board approved an interpretation of Retrofit of Windows, Doors, Garage Doors, and Shutters for detached one- and two-family dwellings and multiple single-family dwellings (townhouses) with common roof height < 30 feet.

Formal Interpretation:

3.

TO:

- A Florida Professional Engineer or Architect may modify the buck or fasteners as 1. specified in a Notice of Acceptance. Such modification must be documented with a signed and sealed letter or drawing. 2.
 - To obtain the required design pressure for a specific opening at a specific site, an individual must utilize one of the following and submit documentation as indicated.
 - a) A site-specific plan (signed and sealed) by a Florida Professional Engineer or Architect indicating the location of all retro openings and the required design pressures.
 - b) A site-specific plan (not sealed) indicating the location of all retro openings accompanied by a worst-case design pressure chart (signed and sealed) prepared by a Florida P.E. or Architect.
 - c) A site-specific plan (not sealed) indicating the location of all openings and indicating the required design pressures based on the Broward County Fenestration Voluntary Wind Load Chart. (See attached chart).
 - Buildings with a (height) > 30 feet or more shall have a site-specific design (signed and sealed) by a Florida Professional Engineer or Architect, indicating the location of all retro openings and the required design pressures for each opening.

NOTE: Generic charts, graphs alone, etc., are not acceptable for buildings above 30 feet.

December 31, 2023 **EFFECTIVE DATE: EFFECTIVE DATE:** January 9, 2025

***** PLEASE POST AT YOUR PERMIT COUNTER *****

Page 1 of 2 F.I. #24

ASCE 7-22

Roof and Wall Zone Chart Diagrams											
Wall Pressure Chart	Flat Roof Uplift Chart	Gable Roof Uplift Chart	Hip Roof Uplift Chart								
ELEVATION	0.2h 0.6h 0.6h 0.6h 0.6h 0.6h 0.6h		PLANVERW								

Instructions on how to use these Charts: Determine the Mean Roof Height, h, which is the top of the roof for flat roofs or the mean roof height for pitched roofs. Find the least horizontal dimension for your building, not including an overhang if it occurs. Calculate the value of, a, = 10% of least horizontal dimension or 0.4*h, whichever is smaller, but not less than either 4% of least horizontal dimension or 3 feet. If your roof height is less than 30 feet, but not exactly 15, 20, or 25 feet, you will need to go to the next higher roof height. If your Mean Roof Height is higher than 30 feet, these charts do not apply. Review the diagram that illustrates the wall and roof zones and determine the wind zone in which the component is located. Determine the tributary area of the component. If the tributary area falls in between values, use the value of the smaller tributary area. Select the positive and negative wind pressures corresponding to the wall or roof zone where your component is located. Door pressures shown are for the most common door sizes and are worst case for heights < = 30 Feet.

Wall Pressure for All Roof Types									Overhead Garage Door Pressures							
Mean Roof Height 15 ft.								20	ft.			< = 30 ft.				
Tributary Area	10	20	35	50	100	500	10	20	35	50	100	500	Effective Wind Area		Desitiva	Negetive
Wall Positive Pressure	38.1	36.3	35.0	34.1	32.4	28.4	40.4	38.5	37.1	36.1	34.3	30.1	Width	Height	Positive	Negative
Zone 4 Negative Pressure	- 41.4	- 39.6	- 38.2	- 37.3	- 35.6	- 31.6	- 43.8	- 42.0	- 40.5	- 39.6	- 37.7	- 33.5	8	8	38.6	- 48.2
Zone 5 Negative Pressure	- 51.0	- 47.5	- 44.8	- 43.0	- 39.6	- 31.6	- 54.0	- 50.4	- 47.5	- 45.6	- 42.0	- 33.5	10	10	37.4	- 45.7
Mean Roof Height	25 ft.				30 ft.					14	14	35.4	- 41.8			
Tributary Area	10	20	35	50	100	500	10	20	35	50	100	500	9	7	38.7	- 48.3
Wall Positive Pressure	42.2	40.3	38.8	37.8	35.9	31.5	43.9	41.9	40.3	39.3	37.3	32.8	16	7	37	- 45.0
Zone 4 Negative Pressure	- 45.8	- 43.9	- 42.4	- 41.4	- 39.5	- 35.1	- 47.6	- 45.7	- 44.1	- 43.1	- 41.1	- 36.5				
Zone 5 Negative Pressure	- 56.6	- 52.8	- 49.7	- 47.8	- 43.9	- 35.1	- 58.8	- 54.7	- 51.7	- 49.6	- 45.7	- 36.5				

BORA Policy 20-01

BROWARD COUNTY UNIFORM RETROFIT WINDOW & DOOR SCHEDULE PAGE___OF___

	A 1		C
- NI		ΝЛ	H * 1
1.1			E:

SITE ADDRESS:______ CONTACT #:_____

1	2	:	3		4	5			5		7	1	B	9	Ð	1	.0
OPENING LOCATION ID	PRODUCT ACCEPTANCE NUMBER	PRODUCT APPROVAL PRESSURE RATING		REQUIRED DESIGN PRESSURE		OPENING SIZES		ZONE		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											

IDENTIFY OPENINGS ALPHABETICALLY 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.).