



**Town of Golden Beach**  
**Florida Building Code 8th Edition (2023)**  
**High Velocity Hurricane Zone Uniform Roofing Application Form**  
**for Miami-Dade County**

**INSTRUCTION PAGE**

**COMPLETE THE NECESSARY SECTIONS OF THE UNIFORM ROOFING PERMIT APPLICATION FORM AND ATTACH THE REQUIRED DOCUMENTS BELOW:**

<b>Roof System</b>	<b>Required Sections of the Permit Application Form</b>	<b>Attachments Required See List Below</b>
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

**Town of Golden Beach Florida Building Code 8th Edition (2023)**  
**High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County**

**Section A (General Information)**

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Master Permit Number: \_\_\_\_\_ Process Number: \_\_\_\_\_  
Contractor's Name: \_\_\_\_\_  
Job Address: \_\_\_\_\_

**ROOF CATEGORY**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Low Slope          | <input type="checkbox"/> Mechanically Fastened Tile | <input type="checkbox"/> Mortar / Adhesive Set Tile |
| <input type="checkbox"/> Asphaltic Shingles | <input type="checkbox"/> Metal Panel/ Shingles      | <input type="checkbox"/> Wood Shingles / Shakes     |

**ROOF TYPE**

- |                                   |                                 |                                      |                                    |                                     |
|-----------------------------------|---------------------------------|--------------------------------------|------------------------------------|-------------------------------------|
| <input type="checkbox"/> New Roof | <input type="checkbox"/> Repair | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Reroofing | <input type="checkbox"/> Recovering |
|-----------------------------------|---------------------------------|--------------------------------------|------------------------------------|-------------------------------------|

**ROOF SYSTEM INFORMATION**

Low Slope Roof Area (ft <sup>2</sup> )	Steep Sloped Roof Area (ft <sup>2</sup> )	Total (ft <sup>2</sup> )
_____	_____	_____

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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**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

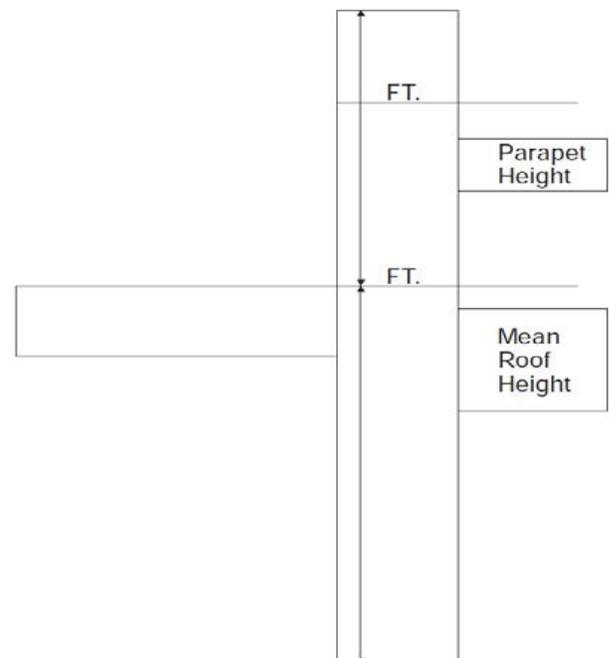
**Number of Fasteners Per Insulation Board**

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.



**Town of Golden Beach**

**Florida Building Code 8th Edition (2023)**

**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:     $\geq 2:12$  to  $\leq 4:12$      $> 4:12$  to  $\leq 6:12$      $> 6:12$  to  $\leq 12:12$

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

Deck Type:

Underlayment Type:

Roof Slope:  
\_\_\_\_\_: 12

Insulation:

Fire Barrier:

Ridge Ventilation?  
\_\_\_\_\_

Fastener Type & Spacing:

Cap Sheet Type:

Mean Roof Height: \_\_\_\_\_

Cap Sheet Attachment:

Roof Covering:

Drip Edge Type & Size:

**Town of Golden Beach**  
**Florida Building Code 8th Edition (2023)**  
**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  $\lambda$  \_\_\_\_\_ = \_\_\_\_\_ ) –  $M_g$ : \_\_\_\_\_ =  $M_{r1}$  \_\_\_\_\_ Product Approval  $M_f$ : \_\_\_\_\_  
 ( Zone 2: \_\_\_\_\_ x  $\lambda$  \_\_\_\_\_ = \_\_\_\_\_ ) –  $M_g$ : \_\_\_\_\_ =  $M_{r2e}$  \_\_\_\_\_ Product Approval  $M_f$ : \_\_\_\_\_  
 ( Zone 3: \_\_\_\_\_ x  $\lambda$  \_\_\_\_\_ = \_\_\_\_\_ ) –  $M_g$ : \_\_\_\_\_ =  $M_{r2n}$  \_\_\_\_\_ Product Approval  $M_f$ : \_\_\_\_\_

**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  $F_r$ . If the  $F'$  values are greater than or equal to the  $F_r$  values for each area of the roof, then the tile attachment method is acceptable.

**Method 3\* "Uplift Based Tile Calculations per RAS 127"**

(Zone 1: \_\_\_\_\_ x L = \_\_\_\_\_ x W = \_\_\_\_\_ ) – ( w ) x  $\cos \theta$  \_\_\_\_\_ ) =  $F_{r1}$  \_\_\_\_\_ Product Approval  $F'$ : \_\_\_\_\_  
 (Zone 2: \_\_\_\_\_ x L = \_\_\_\_\_ x W = \_\_\_\_\_ ) – ( w ) x  $\cos \theta$  \_\_\_\_\_ ) =  $F_{r2}$  \_\_\_\_\_ Product Approval  $F'$ : \_\_\_\_\_  
 (Zone 3: \_\_\_\_\_ x L = \_\_\_\_\_ x W = \_\_\_\_\_ ) – ( w ) x  $\cos \theta$  \_\_\_\_\_ ) =  $F_{r3}$  \_\_\_\_\_ Product Approval  $F'$ : \_\_\_\_\_

<b>Where to obtain information</b>		
<b>Description</b>	<b>Symbol</b>	<b>Where to Find</b>
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	$\theta$	Job Site
Aerodynamic Multiplier	$\lambda$	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.



Town of Golden Beach  
Building and Zoning Department  
100 Ocean Blvd.  
Golden Beach, FL 33160

goldenbeach.us

## AFFIDAVIT OF COMPLIANCE WITH ROOF-TO-WALL CONNECTION Hurricane Mitigation Retrofit for Existing Site-Built Single Family Residential Structures

OWNER'S NAME	ROOFING PERMIT NUMBER	DATE
PROPERTY ADDRESS	CITY	STATE
		ZIP

Dear Building Official:

I, \_\_\_\_\_ qualifying agent, certify that I have improved the roof-to-wall connections of the referenced property using one of the prescriptive retrofit solutions provided in Florida Building Code, Existing Volume Sections 706.8.1.1 through 706.8.1.7.

\_\_\_\_\_  
Signature of Qualifying Agent

\_\_\_\_\_  
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 \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Print Name \_\_\_\_\_

Personally known \_\_\_\_\_

or Produced Identification \_\_\_\_\_

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

**NOTARY  
(SEAL)**



Town of Golden Beach  
Building and Zoning Department  
100 Ocean Blvd.  
Golden Beach, FL 33160

goldenbeach.us

## OWNER'S AFFIDAVIT OF EXEMPTION Roof-to-Wall Connection Hurricane Mitigation Retrofit for Existing Site-Built Single Family Residential Structures

OWNER'S NAME	ROOFING PERMIT NUMBER	DATE
PROPERTY ADDRESS	CITY	STATE
		ZIP

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), OR**
- 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), OR**
- 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). **(Provide a copy of the building permit) & (If built before 1994 provide a compliance letter from a Florida Registered Engineer or Architect), OR**
- 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 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 \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Print Name \_\_\_\_\_

Personally known \_\_\_\_\_

or Produced Identification \_\_\_\_\_

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

**NOTARY  
(SEAL)**



Town of Golden Beach  
Building and Zoning Department  
100 Ocean Blvd.  
Golden Beach, FL 33160

goldenbeach.us

**AFFIDAVIT OF COMPLIANCE WITH ROOF DECKING ATTACHMENT  
AND  
SECONDARY WATER BARRIER Hurricane Retrofit for Existing Site-Built  
Single Family Residential Structures**

OWNER'S NAME	ROOFING PERMIT NUMBER	DATE	
PROPERTY ADDRESS	CITY	STATE	ZIP

Dear Building Official:

I, \_\_\_\_\_ qualifying agent, certify that the roof decking attachment has been completed in accordance with Florida Building Code, Existing Volume Section 706.7.1.1 or 706.7.1.2 and a secondary water barrier has been provided in accordance with Florida Building Code, Existing Volume Section 706.7.2.

\_\_\_\_\_  
Signature of Qualifying Agent

\_\_\_\_\_  
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 \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_

Print Name \_\_\_\_\_

Personally known \_\_\_\_\_

or Produced Identification \_\_\_\_\_

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

**NOTARY  
(SEAL)**



## Section 1524 FBC

### HIGH VELOCITY HURRICANE ZONES

#### REQUIRED OWNERS NOTIFICATION FOR ROOFING CONSIDERATIONS

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 form. The owner's initials in the designated space indicates that the item has been explained.

**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) 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 Chapter 16 (High Velocity Hurricane Zones) of the Florida Building Code. (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 work to be performed.

**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 owner provides the option of maintaining this 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. 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.

**6. Overflow scuppers (wall outlets):** It is required that rainwater flow off so that the roof is not overloaded from a buildup 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 requirements of: Chapter 15 and 16 herein and the Florida Building Code, Plumbing.

**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.

**8. Existing Solar Systems:** The re-installation of an existing roof mounted photovoltaic system requires a separate permit. Permit must be obtained in order to finalize the roofing permit.

\_\_\_\_\_  
Contractor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner's/Agent's Signature

\_\_\_\_\_  
Date

Property Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_



**Town of Golden Beach  
HVHZ Electronic Roof Permit Form  
Waterproofing or Liquid Applied Roof Systems**

**\*Denotes required user inputs. If an item does not apply enter n/a in that line.**

**\*Master Permit Number:**

**\*Job Address:**

**\*Application Date:**

**\*Process Number:**

**\*Waterproofing Manufacturer Name:**

**\*NOA Product Approval Number:**

**Does this roof assembly comply with the requirements for a fire rating per section 1519.16.3 HVHZ Florida Building Code? \* Yes No**

**Note: Submit current copies of the fire directory listing for the waterproofing assembly, manufacturer's installation details, and the current Miami-Dade County NOA Product Control Approval for review prior to issuing the waterproofing permit.**

**Note: This waterproofing assembly shall comply with all the requirements as listed in section 1519.16 Waterproofing located in the HVHZ section of the Florida Building Code.**

<p>* Deck</p> <p>* Balcony</p> <p>* Other</p>	<p><b>*Deck Type:</b></p> <p><b>*Primer:</b> <span style="float: right;">ft<sup>2</sup>/gal</span></p> <p><b>*Insulation/Fire Barrier:</b></p> <p><b>*Number of Fasteners per Insulation Board</b></p> <p><b>P(1) Field:                  P(2) Perimeter:                  P(3) Corner:</b></p> <p><b>*Base Coat:</b></p> <p><b>*Slope:</b>                  "/12"</p> <p><b>*Roof Mean Height:</b>                  ft.</p> <p><b>*Roof Length:</b>                  ft.</p> <p><b>*Roof Width:</b>                  ft.</p> <p><b>*Maximum Design Pressure:</b></p> <p style="padding-left: 40px;">psf</p> <p><b>*Estimated Value: \$</b></p>	<p><b>*Coverage:</b>                  ft<sup>2</sup>/gal</p> <p><b>*Membrane:</b></p> <p><b>*Intermediate Coat:</b></p> <p><b>*Coverage:</b>                  ft<sup>2</sup>/gal</p> <p><b>*Top Coat:</b></p> <p><b>*Coverage:</b>                  ft<sup>2</sup>/gal</p> <p><b>*Surfacing:</b></p> <p><b>*Overburden:</b></p>
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**Town of Golden Beach  
HVHZ Electronic Roof Permit Form  
Waterproofing or Liquid Applied Roof Systems**

**Section A (General Information)**

**Master Permit Number:**

**Process Number:**

**Job Address:**

**Contractor Name:**

**Waterproofing Category**

Balcony

Deck

Other:

**Waterproofing System Information**

Low slope roof area (ft.<sup>2</sup>)

Steep Sloped area (ft.<sup>2</sup>)

Total (ft.<sup>2</sup>)

**Section B (Section Plan)**

**Sketch Section 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.

**Perimeter Width (a'):**

**Corner Size (a' x a'):**

Yes [ See Attached Roof Plan]

No

Large empty rectangular box for sketching the section plan.



# TOWN OF GOLDEN BEACH

**BUILDING DEPARTMENT**  
 100 Ocean Blvd.  
 Golden Beach, FL 33160  
 Office: 305-932-0744 Fax: 305-933-3825  
[www.goldenbeach.us](http://www.goldenbeach.us)

<b>FOR OFFICE USE ONLY</b>	
Process No:	_____
Date Applied	_____
Clerk	_____

Master Permit Number: \_\_\_\_\_  
 Master                      Sub- Permit

## PERMIT APPLICATION

<b>1. OWNER INFORMATION</b>	Owner _____			<b>2. CONTRACTOR INFORMATION</b>	Company Name _____			
	Address _____				Qualifier Name _____			
City _____ ST _____ Zip _____				Address _____				
Job Address _____				City _____ ST _____ Zip _____				
Phone No. _____				Lic. No. _____ Phone No. _____				
<b>3. PERMIT TYPE</b>	Choose only One	Building	Revision	<b>4. TYPE OF IMPROVEMENT</b>	Choose only One	New Construction	Roof	Pool
		Electrical	Renewal			Addition Attached	Driveway	Gazebo-Pergola
		Mechanical	Shop Drawing			Alteration Interior	Fence	Demolition/ Partial
		Plumbing	Public Works			Alteration Exterior	Windows	Generator
		Landscape	_____			Repair/Replace	Doors	_____
		Roofing						
<b>5. ARCHITECT/ENGINEER INFO</b>	Name _____			<b>7. LEGAL/USE/WORK VALUE</b>	Folio No. 19-1235-_____			
	Address _____				Lot(s) _____ Block _____ PB _____			
City _____ ST _____ Zip Code _____				Square FT. _____ Linear FT. _____				
Lic. No. _____ Discipline _____				Estimated Value of the Work: _____				
Phone No. _____				Description of Work _____				
<b>6. CONTACT INFO</b>	Name _____			_____				
	E-mail _____			_____				
Phone No. _____				_____				

Application is hereby made to obtain a permit to do the work and/or 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, Plumbing, Mechanical, Windows, Doors, Roofing, Site Walls, Fencing, Driveways, Pools, Spas, Pool Decks, Outdoor Kitchens, Accessory Structures, Irrigation, Landscape and Landscape Lighting work and other categories not mentioned.

Owner's Affidavit: I certify that all the foregoing information is accurate and that work will be done in compliance with all applicable laws regulating construction and zoning.

**NOTICE REGARDING BUILDING PERMIT APPLICATIONS**

The Completion and submission of a Building Permit Application is a requirement of securing a Building Permit. The Town will rely upon the information contained in the Application in determining whether a Building Permit should be issued. The submission of inaccurate, misleading or misrepresented information in the Application shall subject the Building Permit to denial, suspension or revocation, and the individual applying for the permit, to all appropriate fines, penalties and other punishments authorized by law. **KINDLY GOVERN YOURSELF ACCORDINGLY.**

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

<b>8. OWNER INFORMATION</b>	Print Name _____	Owner's Signature _____	<b>9. QUALIFIER INFORMATION</b>	Print Name _____	Qualifier's Signature _____
	Date _____	Notary Public- State of Florida at Large		Date _____	Notary Public- State of Florida at Large
Notary Stamp		Notary Stamp			

**DO NOT WRITE BELOW - FOR OFFICE USE ONLY**

Approvals	APPROVED/DATE	DISAPPROVED/DATE	FEE CATEGORIES:	FEES \$
Building			Permit Fee	
Structural			Street Sweeping	
Electrical			Trash Removal	
Mechanical			Scanning	
Plumbing			Infrastructure	
Landscaping			BCCD	
Zoning			Education	
Building Dir			State Surcharge	
Publics Works			Sub-Total	
Grading / Drainage			Process Fee	
			<b>Total Fees</b>	

# NOTICE OF COMMENCEMENT

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION

PERMIT NO. \_\_\_\_\_ TAX FOLIO NO. \_\_\_\_\_

STATE OF FLORIDA:  
COUNTY OF MIAMI-DADE:

THE UNDERSIGNED hereby gives notice that improvements will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

Space above reserved for use of recording office

1. Legal description of property and street/address: \_\_\_\_\_

2. Description of improvement: \_\_\_\_\_

3. Owner(s) name and address: \_\_\_\_\_

Interest in property: \_\_\_\_\_

Name and address of fee simple titleholder: \_\_\_\_\_

4. Contractor's name, address and phone number: \_\_\_\_\_

5. Surety: (Payment bond required by owner from contractor, if any)

Name, address and phone number: \_\_\_\_\_

Amount of bond \$ \_\_\_\_\_

6. Lender's name and address: \_\_\_\_\_

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, Owners designates the following person(s) 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 this Notice of Commencement: \_\_\_\_\_

(the expiration date is 1 year from the date of recording unless a different date is specified)

**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(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/Manager

Prepared By \_\_\_\_\_ Prepared By \_\_\_\_\_

Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

Title/Office \_\_\_\_\_ Title/Office \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

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

By \_\_\_\_\_

Individually, or  as \_\_\_\_\_ for \_\_\_\_\_

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

Signature of Notary Public: \_\_\_\_\_

Print Name: \_\_\_\_\_

(SEAL)

## VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true, to the best of my knowledge and belief.

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

By \_\_\_\_\_ By \_\_\_\_\_

This instrument prepared by:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTICE OF TERMINATION**  
(of Notice of Commencement)

STATE OF FLORIDA:  
COUNTY OF MIAMI-DADE:

Space above reserved for use of recording office

The undersigned hereby gives notice that the effective period of that certain Notice of Commencement dated \_\_\_\_\_, recorded in O.R. Book / Page \_\_\_\_\_ / \_\_\_\_\_ of the Public Records of Dade County, Florida, will terminate; and, in accordance with Section 713.132, Florida Statutes, the following information is provided:

1. The date and recording information for the Notice of Commencement being terminated are as described above, and all information contained therein is hereby expressly incorporated into this NOTICE OF TERMINATION.
2. The Notice of Commencement shall be terminated as of \_\_\_\_\_, or 30 days from the recording date of this Notice of Termination, whichever date is later.
3. This Notice of Termination applies to:
  - all the real property subject to the above described Notice of Commencement.
  - only to the portion of such real property described as:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. All lienors have been paid in full or prorata in accordance with Section 713.06(4), Florida Statutes.
5. A copy of this notice has been served on the contractor and on each lienor who has given notice, if any.

Owner Signature: \_\_\_\_\_ Owner Signature: \_\_\_\_\_  
Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_  
by: \_\_\_\_\_

Personally known to me, or produced \_\_\_\_\_ as identification.

Notary Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

seal

**Exhibit attached:**

- Contractor's Final Payment Affidavit
- Property Legal Description
- Copy of Notice of Commencement

# RELEASE OF LIEN AND AFFIDAVIT

Space above reserved for use of recording office

1. The undersigned contractor, for an in consideration of the payments of the sum of \_\_\_\_\_ paid by receipt of which is hereby acknowledged, hereby releases and quit claims to \_\_\_\_\_, the owner of the hereinafter described property, all liens, lien rights, claims or demands of any kind whatsoever, which the undersigned now has to might have against the building located on, or premises legally described as \_\_\_\_\_

\_\_\_\_\_ on account of labor performed and/or materials furnished for the construction of any such improvements on said premises.

2. All labor and materials used by the undersigned in the erection of said improvements have been paid in full, except as follows: \_\_\_\_\_

3. All lienors furnishing labor, services, or materials for said improvements have been paid in full, except as follows: \_\_\_\_\_

4. This instrument is executed and delivered to the owner in compliance with Chapter 713, Florida Statutes.

5. The undersigned contractors does hereby consent to the payment by the owner of all lienors giving notice and those lienors above named.

IN WITNESS WHEREOF, I have hereunto set by hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Witnesses:

1. \_\_\_\_\_ (Contractor) (SEAL)

2. \_\_\_\_\_ By \_\_\_\_\_ (President)

**STATE OF FLORIDA:**

**COUNTY OF MIAMI-DADE:**

I, hereby acknowledge that the statements contained in the foregoing Release of Lien and Affidavit are true and correct. Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public \_\_\_\_\_

Print Notary's Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



## MIAMI-DADE COUNTY CONSTRUCTION LIEN LAW FOR OWNERS

**NOTE: IF YOU SIGNED AS THE OWNER'S AGENT YOU ARE RESPONSIBLE FOR DELIVERING THIS INFORMATION SHEET TO THE OWNER OF THE PROPERTY.**

### **WARNING TO OWNER**

Florida's Construction Lien Law (Chapter 713, Part One, Florida Statutes) requires the recording with the Clerk of the Courts a Notice of Commencement for real property improvements greater than \$2,500.00. However, it does not apply to the repair or replacement of an existing heating or air conditioning system less than \$7,500.00 in value. This notice must be signed by you, the property owner.

Under Florida law, those who work on your property or provide materials and are not paid, have a right to enforce their claim for payment against your property. This claim is known as a construction lien.

### **YOU MUST FILE A NOTICE OF COMMENCEMENT**

For your protection under the Construction Lien Law and to avoid the possibility of paying twice for improvements to real property, you must record a Notice of Commencement in the Clerk of the Court's Office. You also must provide a certified copy of the recorded document at the construction site. The Notice of Commencement must be signed by you, the owner contracting the improvements, and not by your agent.

The Notice of Commencement form, provided with this information packet, must be completed and recorded within 90 days before starting the work.

A copy of the payment bond, if any is required by you and purchased by the contractor, must be attached as part of the Notice of Commencement when recorded.

If improvements described in the Notice of Commencement are not actually started within 90 days after the recording of the Notice, a new Notice of Commencement must be recorded.

You lose your protection under the Construction Lien Law if the payments are made to the contractor after the expiration of the Notice of Commencement. The Notice is good for one year after the recording date or up to the date specified under item nine of the form.

Florida law requires the Department of Regulatory and Economic Resources to be a second source of information concerning the improvements made on real property. The Building Permit Application (included with this packet) has been expanded to include information on the construction lender and the contractor's surety, if any. The new application requires your signature or your agent's, to inform you of the Construction Lien Law.

### **YOU MUST POST THE NOTICE OF COMMENCEMENT AT THE JOB SITE**

By law, the Department of Regulatory and Economic Resources is required to verify at the first inspection, after the building permit is issued, that a certified copy of the recorded Notice of Commencement, with attached bonds if any, is posted at the construction site. Failure to show the inspector a certified copy of the recorded Notice will result in a disapproved inspection, (Florida Statute 713.135(1)(d)).

### **NOTICE TO OWNER FROM SUBCONTRACTORS AND SUPPLIERS**

You may receive a Notice to Owner from subcontractors and material suppliers. This notice advises you that the sender is providing services or materials. Subcontractors and suppliers must serve a Notice to Owner within 45 days of commencing work to preserve their ability to lien your property.

If your address changes from that given in the Notice of Commencement, you should record a corrected Notice reflecting your current address. This is done to help ensure you will receive all notices.

### **RELEASE FROM LIEN FROM CONTRACTOR**

Prior to paying the contractor, you need to receive a Release of Lien and Affidavit to the extent of payment from the general contractor. The Release of Lien and Affidavit shall state either that all the subcontractors and suppliers have been paid or list those unpaid and the amount owed. The contractor is required to list on the Release of Lien and Affidavit any subcontractor or supplier that has not been paid. That amount may be withheld from the contractor's pay and paid directly to the subcontractor or suppliers after 10 days written notice to the contractor.

If the balance due to the contractor is not sufficient to pay in full all subcontractors and suppliers listed on the contractor's affidavit, you may wish to consult an attorney.

The general contractor shall furnish a final Release of Lien and Affidavit to the owner indicating all subcontractors and suppliers have been paid at the time he requests final payment. You can rely on the affidavit in making final payment to the general contractor. If you make final payment to the general contractor without obtaining the affidavit, your property can be liened for non-payment if the general contractor fails to pay the subcontractors or suppliers. You should always obtain a Release of Lien and Affidavit from the contractor to the extent of any payments being made.

### **RELY ON YOUR LENDER FOR COMPLIANCE WITH CONSTRUCTION LIEN LAW**

If you have a lender, you may rely on the lender to handle the recording of the Notice of Commencement. Learn more about the Construction Lien Law by contacting an attorney, your lender, or the Florida Department of Agricultural and Consumer Services, Division of Consumer Services.

**Documents are recorded at the Clerk of the Courts, MIAMI-DADE COUNTY RECORDER, COURTHOUSE EAST, 22 N.W. First Street, 1st Floor, Miami, FL 33128.**

You can record the Notice of Commencement by mail. The original Notice should be sent to the County Recorder, P.O. Box 011711, Flagler Station, Miami, Florida 33101. Please make sure the original Notice is signed and notarized. Also, remember to enclose the recording fee (for a single copy) and written instructions for recording and returning a certified copy of the recorded documents. For additional information on fees and recording documents call (305) 275-1155.