

# **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

# Shutters Application Package

# Who Can Apply (A or B)

**A. Licensed Contractors for Residential Permit** can be issued to **Licensed Contractors** properly registered in the Building Division-Community & Economic Development. Contractors shall provide all required applications properly signed and notarized.

### ATTENTION HOMEOWNER - FOR RESIDENTIAL APPLICATION ONLY- READ CAREFULLY

- **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 ExemptionHUTTE

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

Required Documents
·
Owner Builder Disclosure Statement. This is only applicable to owner/builder. To understand his/her responsibilities as Owner/Builder, the owner should carefully read the Disclosure Statement before signing this document.
Affidavit of Awareness of Homeowner's Association (Included in this package). This is a mandatory affidavit which shall be submitted even if the property is not located in a Homeowner's Association.
<b>Building Permit Valuations. FBC 109- 109.3.1</b> 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.
One (1) set of <b>Floor Plan Sketch</b> , indicating location & dimensions for every proposed shutter. Provide a neat or well-organized floor plan sketch clearly identifying openings to be shuttered. <b>Floor sketch shall not exceed</b> 11" X 17" page size
One (1) set of Product Approval or Miami Dade Notice of Acceptance (N.O.A) for the shutters (Accordions or Storm Panels, etc.). On Product approvals (N.O.A, s) marked (Circled) all applicable options based on the proposed scope of work. <b>DO NOT HIGHLIGHT PERMITTING DOCUMENTS.</b>
One (1) set of the table "Shutters Opening Information" (Included in this package).
One (1) set of Wind Load Pressure Calculations prepared by Professional Engineer (PE). In lieu of the Engineering Calculations, Broward County Fenestration Voluntary Wind Load Chart can be used (Included in this package).
One (1) set of the table "Shutters Opening Information" (Included in this package).
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).
Construction Debris Removal Affidavit. (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. The recorded Notice of Commencement should be available at the first inspection. Notice of commencement can be recorded at the office of Broward County Government Center / Records Division 115 S. Andrews Ave. Fort Lauderdale, FL 33301.

# **BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

Revised 11-17-2022

Select One Trade: Building Electrica	al Plumbing Mecha	anical 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	Alteration 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:	Owne	r-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 (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: Zin:

# **BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

and installations as indicated. I certify that no work or installation or inst
tion is accurate and that all work will be done in compliance wit
A NOTICE OF COMMENCEMENT MAY RESULT IN YOU ROPERTY. A NOTICE OF COMMENCEMENT MUST BE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN AN ATTORNEY BEFORE COMMENCING WORK O
XSignature of Qualifier
STATE OF FLORIDA COUNTY OF
Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of
, 20 by
(Type/Print Qualifier or Agent Name)
NOTARY'S SIGNATURE as to Qualifier or Agent's Signature
Notary Name (Print, Type or Stamp Notary's Name)
Personally Known Produced Identification

A jurisdiction may use a supplemental page requesting additional information and citing 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.



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

# Owner/Builder Disclosure Statement

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 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.
- 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.



Building, Planning & Zoning Department 2200 Civic Center Place | Miramar, Florida 33025

Tel: 954.602.3200 | Fax: 954.602.3635

www.miramarfl.gov

# 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.

Owner Signature	_	Date Signed	
STATE OF FLORIDA, COUNTY OF BROWARD.	Sworn to and subscribed before me this	day of	, 20_

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.



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

# 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 my property is not located in a Homeowners' Association.  Name:  Homeowner - Print Name  Job Address:  Miramar, Florida Zip Code :
Homeowner - Print Name  Job Address:  Miramar, Florida Zip Code :
Job Address: Miramar, Florida Zip Code :
Miramar, Florida Zip Code :
Signature:
oignature
Homeowner - Signature
STATE OF FLORIDA. Sworn to and subscribed before me thisday of, 20



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

# Construction Debris Removal Affidavit

## PLEASE 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

Read and initial to the left of the applicable statement.

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

Phone: (954) 967-4200 Fax: (954) 241-4489

Website: www.wasteprousa.com



# 



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

# NOTICE OF COMMENCEMENT

In accordance with Section 713.13 of the Florida Statutes, a Notice of Commencement is required for the construction of, improvements to, alteration of or repair of real property. The Notice of Commencement must be recorded with Broward County Records, Taxes and Treasury Division.

- If the direct contract is greater than \$2,500, the applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded notice of commencement or a notarized statement that the notice of commencement has been filed for recording, along with a copy thereof.
- If the direct contract for repair or replace an existing heating or air conditioning exceed the amount of \$7,500, a certified copy of the recorded notice of commencement is required.
- In the absence of the filing of a certified copy of the recorded notice of commencement, the issuing authority or a private provider performing inspection services may not perform or approve subsequent inspections until the applicant files by mail, facsimile, hand delivery, or any other means such certified copy with the issuing authority.
- The certified copy of the notice of commencement must contain the name and address of the owner, the name and address of the contractor, and the location or address of the property being improved.
- The issuing authority shall verify that the name and address of the owner, the name of the contractor, and the location or address of the property being improved which is contained in the certified copy of the notice of commencement is consistent with the information in the building permit application.

Attention Applicant: Construction Cost of Improvement will be based on contract signed by both parties (owner & contractor) and/or as determined by the Building Official (Florida building Code 109.3).

# Recording a Notice of Commencement

- Complete the Notice of Commencement Form (See attached form).
- Recording the Notice of commencement at the. Broward County Records, Taxes and Treasury Division. Broward County Governmental Center Room 114. 115 S.
   Andrews Ave. Fort Lauderdale, FL 33301.

See attached information about eRecording Vendors in Broward County.



# **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 (Nam	e)
	, hereby attest or
	of the plans for project located at the location shown below are an
exact and accurate duplicate of the com	plete hardcopy set of plans submitted to the Building Division.
Project Name	
Property Address:	
Folio No.:	
project will be terminated, become null and Previously reviewed plans and comments wi electronically throughout the life of the projection.	any discrepancies between the two versions, the review process for said void, and require re-application under a new permit application number. Il be discarded. This affidavit will apply to all documents submitted ect including initial submittal, re-works, revisions, shop drawings, etc.
Description of digitally signed & sealed docu	ments:
į	
į.	
!	Designer of Record Contact Phone:
!	
!	Contact Email:
!	
!	
!	
!	
Architect/Engineer of Record Signature & Seal	
	- Andria a in the little forms a superior in the second
ii the above signature of Professional Engine	er/Architect is in digital format, a notarization is required.
Sworn to (or affirmed and subscribed befor	e me this day of
☐ Personally known ☐ Produce	d IdentificationID #
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.: TRACT LOT BLDG UNIT BLOCK 2. GENERAL DESCRIPTION OF IMPROVEMENT: 3. OWNER INFORMATION: a. Name 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 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 Print Name and Provide Signatory's Title/Office Owner's Authorized Officer/Director/Partner/Manager State of Florida County of Broward The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 By\_ (name of person) (type of authority,...e.g. officer, trustee, attorney in fact) (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

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

Rev .08-09-07 (S.Recording)

belief (Section 92.525, Florida Statutes).



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

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

### **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 8<sup>TH</sup> EDITION (2023) FORMAL INTERPRETATION (#24)

DATE: January 9, 2025 TO: All Building Officials

FROM: Dr. Ana Barbosa, Administrative Director

**SUBJECT:** Retrofit of Windows, Doors, Garage Doors,

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:

- 1. A Florida Professional Engineer or Architect may modify the buck or fasteners as 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.
  - 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).
- 3. 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.

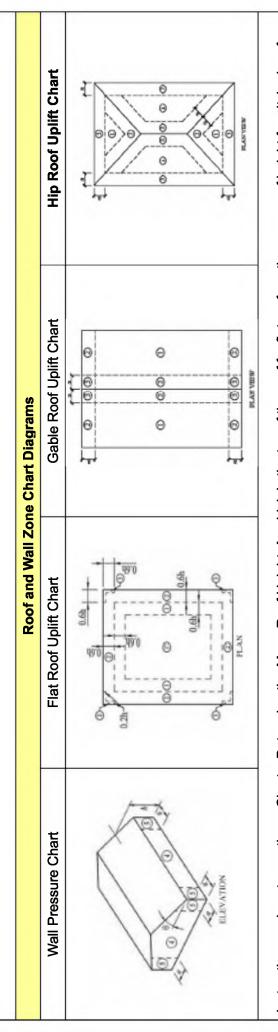
NOTE: Generic charts, graphs alone, etc., are not acceptable for buildings above 30 feet.

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

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

Page 1 of 2 F.I. #24

# **ASCE 7-22**



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 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 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 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 where your component is located. Door pressures shown are for the most common door sizes and are worst case for heights < = 30 Feet.

			Wall Pr	essure.	Wall Pressure for All Roof	Roof Ty	f Types						Overt	nead Gara	Overhead Garage Door Pressures	ssures
Mean Roof Height			15 ft.	ff.					20 ft.	Ĥ.				* *	< = 30 ft.	
Tributary Area	10	20	35	20	100	200	10	20	35	20	100	200	Effective \	Effective Wind Area	:	
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.	ij.					30 ft.	ij.			14	14	35.4	- 41.8
Tributary Area	10	20	35	50	100	200	10	20	35	20	100	200	6	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	28	- 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				

# BUILDING DIVISION. CITY OF MIRAMAR **SHUTTERS OPENING INFORMATION**

# A FLOOR PLAN WITH OPENING IDENTIFICATION SHOULD BE PROVIDED WITH THIS SHEET

SHUTTERS ANCHORAGE  SHUTTERS ANCHORAGE  TOP  BOTTOM  BOTTOM	es than 4% of least horizontal dimension or 3 ft.    The Values of exercity tool, special knowledge or force greater than that requires than 4% of least horizontal dimension or 3 ft.    The Values on Column (F) Should be Greater Than The Values on Column (E) PRESSURE AS PER PRESSURE AS PER PRESSURE CHART    PRESSURE CHART	ol, special knowledge or fo ension or 3 ft.  DULD BE GREATER THAN T  F (*)  PRODUCT APPROVAL  SIGN PRESSURE LOAD!  (+) PSF (-) PSF	within the first floor of the dwell v, tool, special knowledge or for limension or 3 ft.  F (*)  PRODUCT APPROVAL  DESIGN PRESSURE LOADS  (+) PSF (-) PSF  (+) PSF	escape shall be w  Lt the use of a key least horizontal d  S ON COLUMN (F)  S AS PER  C+) PSF  (-) PSF	rided. The means of escape shall be wm the inside without the use of a ke not less than 4% of least horizontal to least than 4% of least horizontal to least than 4% of least horizontal to least than 4% of least horizontal than 1% of least horizontal	The ring of surface of a least one means of escape from the dwelling or cheeling unit stall be provided. If the nears of escape is hall be within the first form the dwelling or cheeling unit stall be provided. The means of escape is hall be within the use of a key, tool, special known of corner zone. 10% of least horizontal dimension or 40% of the mean roof height, whicherer is smaller, but not less than 4% of least horizontal dimension or 14%. Dis ADDRESS:  A B C C DANDON COLUMN (F) SHOULD BE GREEN ON TO COLUMN (F) SHOULD	secape from the dwellings half the mean roof half with 144  WAH/144	C C OPENING DIMENSIONS HEIGHT AREA (INCHES) WXH	width (inches)	B BC 2020 R310.4) nne - 10% of least NIND ZONE LOCATION CORNER - ZONE (5) or INTERIOR (4)	When door shutter protection is provid ide-hinged door leading directly to the not rescue opening, (FBC 2020 R310.4) refinition of Corner Zone - 10% of least DB ADDRESS:  A B WIND ZONE LOCATION CORNER - ZONE (5) or INTERIOR (4)
	ANCHOR TYPE	(-) PSF	(+) PSF	(-) PSF	(+) PSF			(	(	INTERIOR (4)	
UTTERS ANCHORAGE  SPACING		APPROVAL SSURE LOAD!	PRODUCT A	E AS PER OR FROM WIND E CHART	PRESSURE CALCULATION C PRESSURE	PRODUCT ACCEPTANCE NUMBER OR NOTICE OF ACCEPTANCE	AREA (SF). WxH/144	HEIGHT	WIDTH	LOCATION CORNER - ZONE (5) or	OPENING NUMBER
				NING DESIGN	REQUIRED OPE		MENSIONS	PENING DIR		WIND ZONE	
9		€	_		Ш	Q		٥		<b>a</b>	∢
æ	HE VALUES ON COLUMN (E	EATER THAN T	) SHOULD BE GRI	S ON COLUMN (F)	(*) THE VALUE						
					ĺ	MIRAMAR, FL					OB ADDRESS:
			limension or 3 ft	least horizontal d	not less than 4% of	reight, whichever is smaller, but	.0% of the mean roof h	imension or 4	horizontal di	BC 2020 R310.4) ine - 10% of least	nd rescue opening. (F efinition of Corner Zo
When door shutter protection is provided, at least one means of escape from the dwelling or dwelling unit shall be provided. The means of escape shall be within the first floor of the dwelling unit and shall not be located within a garage without decided door leading directly to the exterior. Such protecting shutters for doors shall be releasable or removable from the inside without the use of a key, tool, special knowledge or force greater than that required for the normal operation of the escap	ling or dwelling unit and sh rce greater than that requi	oor of the dwe	vithin the first flo y, tool, special kr	escape shall be w ut the use of a key	ided. The means of m the inside withou	ng or dwelling unit shall be prov Il be releasable or removable fro	escape from the dwelli shutters for doors shal	ne means of a	ed, at least o exterior. Suc	otection is providing directly to the	Vhen door shutter pro ide-hinged door leadii

A= Opening ID (Matching Floor Plan) B= Wind Zone Location.

- For openings located close to corner = Wind Zone 5 - For other openings = Wind Zone 4

C= Dimensions of proposed shutters
- Width & Height in inches
- Area = Width x Hegiht divided by 144

D= Product Approval No. r NOA No. for proposed shutters. E= Required (Imposed) Wind Pressures based on Engineering Calculations or from the Broward Fenestration Chart

F = Design Pressures from Product Approval based on Shutters Spans-Dimensions G= Anchors type & spacing based on the Design Pressure (F)