



Windows, Garage Doors, Skylights and/or Hurricane Shutters

Please submit two (2) complete sets of plans, two (2) sets of product approvals and installation instructions with application.

Job Address: \_\_\_\_\_

Owner: \_\_\_\_\_

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

Legal Description: Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision: \_\_\_\_\_

Contractor: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Valuation of work to be performed: \_\_\_\_\_

**Required Building Data:**

Mean Roof Height \_\_\_\_\_ ft Building Width \_\_\_\_\_ ft Building Length \_\_\_\_\_ ft Roof Slope \_\_\_\_\_

Window Height \_\_\_\_\_ ft Window Width \_\_\_\_\_ ft Window Elevation from Grade \_\_\_\_\_ ft

Measurement from corner of building to window \_\_\_\_\_ ft

Number of Windows/skylights or shutters to be installed \_\_\_\_\_

Garage Door height \_\_\_\_\_ ft Garage Door Width \_\_\_\_\_ ft

**Total Square Footage of Glass or Area** (Square footage subject to state surcharge): \_\_\_\_\_

**Include two (2) drawings of the elevation(s) of the building showing the windows and/or doors to be replaced.**

Procedure: In order to expedite issuance of permits provide all information as appropriate. Incomplete applications may result in delay in issuance of permit.

In addition to the building data, the following information is required:

- 1) Manufacturer's Test report with uniform structural load (psi)
- 2) Installation procedures
- 3) Window description/type
- 4) Garage door description/type
- 5) Skylights description/type
- 6) Hurricane Shutter description/type
- 7) Elevation view of window locations

I hereby certify that all information provided with this application is correct.

Signature of Owner: \_\_\_\_\_ Date \_\_\_\_\_

I hereby certify that I have read and examined this application and know the same to be sure true and correct. All provisions of the laws and ordinances governing this type of work will be complied with, whether specified herein or not. The granting of a permit does not presume to give authority of construction or the performance of construction of the property. I understand that the issuance of this permit is contingent upon the above information being true and correct and that the plans and supporting data have been or shall be provided as required.

Signature of Contractor: \_\_\_\_\_ Date: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ date of \_\_\_\_\_, 2008.

State of Florida  
 County of Duval

- Personally Known
  - Produced identification
- Type of identification produced \_\_\_\_\_

**1609.1.2 Protection of openings.** In wind-borne debris regions, glazing in buildings shall be impact resistant or protected with an impact resistant covering meeting the requirements of SSTD 12, ASTM E 1886 and ASTM E 1996, ANSI/DASMA 115 (for garage doors and rolling doors) or Miami-Dade TAS 201, 202 and 203 or AAMA 506 referenced therein as follows:

1. Glazed openings located within 30 feet (9144 mm) of grade shall meet the requirements of the Large Missile Test.
2. Glazed openings located more than 30 feet (9144 mm) above grade shall meet the provisions of the Small Missile Test.
3. Storage sheds that are not designed for human habitation and that have a floor area of 720 square feet (67 m<sup>2</sup>) or less are not required to comply with the mandatory windborne debris impact standards of this code.
4. Openings in sunrooms, balconies or enclosed porches constructed under existing roofs or decks are not required to be protected provided the spaces are separated from the building interior by a wall and all openings in the separating wall are protected in accordance with Section 1609.1.2. Such spaces shall be permitted to be designed as either partially enclosed or enclosed structures.

**Exceptions:**

1. **Wood structural panels with a minimum thickness of  $\frac{7}{16}$  inch (11.1 mm) and a maximum span of 8 feet (2438 mm) shall be permitted for opening protection in one- and two-story buildings.** Panels shall be precut so that they shall be attached to the framing surrounding the opening containing the product with the glazed openings. Panels shall be predrilled as required for the anchorage method and all required hardware shall be provided. Attachment shall be designed to resist the components and cladding loads determined in accordance with the provisions of ASCE 7, with permanent corrosion-resistant attachment hardware provided and anchors permanently installed on the building. Attachment in accordance with Table 1609.1.2, with permanent corrosion resistant attachment hardware provided and anchors permanently installed on the building is permitted for buildings with a mean roof height of 45 feet (13 716 mm) or less where wind speeds do not exceed 140 mph (63 m/s)
2. Glazing in Occupancy Category I buildings as defined in Section 1604.5, including greenhouses that are occupied for growing plants on a production or research basis, without public access shall be permitted to be unprotected.
3. Glazing in Occupancy Category II, III or IV buildings located over 60 feet (18 288 mm) above the ground and over 30 feet (9144 mm) above aggregate surface roofs located within 1,500 feet (458 m) of the building shall be permitted to be unprotected.

**TABLE 1609.1.2 WIND-BORNE DEBRIS PROTECTION FASTENING SCHEDULE FOR WOOD STRUCTURAL PANELS**

FASTENER TYPE	FASTENER SPACING (inches) <sup>1,2</sup>			
	Panel Span ≤ 2 ft	2 foot < panel Span ≤ 4 feet	4 feet < Panel Span ≤ 6 feet	6 feet < Panel Span ≤ 8 feet
#8 Wood screw-based anchor with 2-inch embedment length <sup>3</sup>	16	16	10	8
#10 Wood screw-based anchor with 2-inch embedment length <sup>3</sup>	16	16	12	9
$\frac{1}{4}$ Lag screw-based anchor with 2-inch embedment length <sup>3</sup>	16	16	16	16

For SI: 1 inch = 25.4 mm, 1 foot = 305 mm.

1. This table is based on a maximum wind speed of 140 mph (63 m/s) and mean roof height of 45 feet (13 716 mm) or less.
2. Fasteners shall be installed at opposing ends of the wood structural panel.
3. Where screws are attached to masonry or masonry/stucco, they shall be attached using vibration-resistant anchors having a minimum withdrawal capacity of 1500 lb (6673 kN).

**1609.1.2.2 Impact resistant coverings.**

**1609.1.2.2.1** Impact resistant coverings shall be tested at 1.5 times the design pressure (positive or negative) expressed in pounds per square feet as determined by the *Florida Building Code, Building* Section 1609 for which the specimen is to be tested.

**1609.1.2.2.2** Impact resistant coverings. Impact resistant coverings shall be labeled in accordance with the provisions of Section 1714.8.

# Window Replacement Worksheet\*

Job Address: \_\_\_\_\_

Exposure: B  C

Product approval for window # \_\_\_\_\_ Product approval for shutters # \_\_\_\_\_

Method of opening protection:     Impact Glass     Plywood     Shutters (requires separate permit)

## *Component and Cladding Charts*

B Exposure 30' mrh			C Exposure 30' mrh		
Opening Size in SqFt	End Zone** PSF	Interior Zone PSF	Opening Size in SqFt	End Zone** PSF	Interior Zone PSF
0-10	25.9- • 34.7	25.9- • 28.1	0-10	25.9- • 48.6	25.9- -39.4
11-20	24.7- • 32.4	24.7- • 26.9	11-20	24.7- • 45.4	24.7- -37.8
21-50	23.2- • 29.3	23.2- • 25.4	21-50	23.2- • 41.0	23.2- -35.6
51-100	22- • 26.9	22- • 24.2	51-100	22.0 - • 37.8	22.0- -34.0

**Sketch footprint of building; indicate size and location of windows to be replaced and location of bedrooms.**

A large grid for sketching the building footprint, window locations, and bedroom locations. The grid is approximately 20 units wide by 20 units high.

\*Opening protection is required in the wind-borne debris region when the replacement glazing exceeds 25 percent of the aggregate area of glazed openings in the dwelling.

\*\*End Zone 10% of the length of wall and not less than 3 feet.

Permit Number \_\_\_\_\_

Tax Folio Number \_\_\_\_\_

*NOTICE OF COMMENCEMENT*

**STATE OF FLORIDA  
COUNTY OF DUVAL**

THE UNDERSIGNED hereby gives notice that improvement 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.

1. Description of property (Street address): \_\_\_\_\_  
Legal Description: \_\_\_\_\_
2. General description of improvement: \_\_\_\_\_
3. Owner information:
  - a. Name and Address: \_\_\_\_\_
  - b. Interest in property: \_\_\_\_\_
  - c. Name and address of fee simple titleholder (other than owner):  
\_\_\_\_\_
- 4.a. Contactor's name and address: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_ Fax number: \_\_\_\_\_
5. Surety Information:
  - a. Name and address: \_\_\_\_\_
  - b. Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_
  - c. Amount of Bond: \_\_\_\_\_
6. a. Lender's name and address: \_\_\_\_\_  
b. Phone Number: \_\_\_\_\_
- 7.a. Person within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by 713.12(1) (a) 7. Florida Statutes.
  - a. Name and address: \_\_\_\_\_
  - b. Phone numbers of designated persons: \_\_\_\_\_
8. a. In addition to himself/herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1) (b), Florida Statutes.  
b. Phone number of person or entity designated by owner: \_\_\_\_\_
9. Expiration date of notice of commencement (the expiration date is one (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 of Owner (Owner's Authorized Officer/Director/Partner/Manager):

\_\_\_\_\_  
(Signatory's Title/Office)

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
by \_\_\_\_\_ as \_\_\_\_\_ for \_\_\_\_\_.

Notary:

\_\_\_\_\_

Personally Known \_\_\_\_\_ Or Produced Identification \_\_\_\_\_ Type of identification Produced: \_\_\_\_\_

My commission expires: \_\_\_\_\_

**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.**