

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel 772-287-2455 Fax 772-220-4765

PRODUCT APPROVAL CHECKLIST

Permit Type:	Permit Number:		Date	
Owner's Name:	Job Site Location:			
	ring information as promu		Commission. In the event that inform dicate page number on the affidavit.	ation required for produc
Product	Model Number	Manufacturer	Evaluation Agency	Expiration Date
Windows				
Exit Doors				
Garage Doors				
Ridge Vents				
Soffits				
Skylights				
Shutters				
Roofing Materials				
Panel Walls				
Structural Components and				
Cladding				
New/Alternative Materials				
In accordance with the Florida evaluation as required by the Fl		product approval system, this a	ffidavit certifies that I have performe	d the building envelope
Architect/Engineer Signature & Seal		FL Certification/Registration Number		
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