

GARAGE DOOR REPLACEMENT CHECKLIST 2017 FBC

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included. This review sheet must accompany the application submittal.

Please make sure you have ALL required copies before submitting permit application
1 Copy Completed permit application including,
• Legal Description
 Notarized signature of owner & contractor
• Proof of ownership (Recorded warranty deed or tax bill)
1 Copy Manufacturer's product approval w/design pressures shown. (**Indicate the size of the proposed replacement garage)
1 Copy FBCR table R301.2(3)& R301.2(2) (attached) – Circle or Hi-light the appropriate height & exposure adjustment coefficient * R301.2(2) and the appropriate +/- minimum pressures required (R301.2(4)
NOTE: The values arrived in these charts are the minimum design pressures required for the replacement garage door. Use the wind speed conversion chart t convert basic wind speed to ultimate wind speed
1 Copy Notice of Commencement, if replacement value is over \$2500.00. Must be submitted prior to the first inspection.

SPECIFICATIONS AND PRODUCT APPROVALS

- Specs. For all garage doors must be tested by an approved testing lab and design pressures stated
- Garage doors cannot have any glazed openings unless the glazed openings are impact resistant glass.

Town of Sewall's Point									
Date: BUILDING	PERMIT APPLICATION Permit Number:								
OWNER/LESSEE NAME:	Phone (Day) (Fax)								
Job Site Address:	City: State:Zip:								
Legal Description	_ Parcel Control Number:								
Fee Simple Holder Name:	Address:								
City: State: Zip:	Telephone:								
*****PLEASE NOTE – YOUR PERMIT MAY BE REJECTED WI	THOUT FILLING IN ALL ENTRIES - INCLUDING THE SCOPE OF WORK****								
*SCOPE OF WORK (PLEASE BE SPECIFIC):									
WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YESNO	COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$								
YES (YEAR) NO (Must include a copy of all variance approvals with application)	* Is subject property located in flood hazard area? VE8_VE7_AE8_AE7_AE6_ FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION								
Construction Company:	Phone: Fax:								
Qualifiers name:Street:									
State License Number: OR: Municipa	ality:License Number:								
LOCAL CONTACT:	Phone Number:								
DESIGN PROFESSIONAL:	Fla. License#								
Street:City:	State: Zip: Phone Number:								
AREAS SQUARE FOOTAGE: Living: Garage:	Covered Patios/ Porches: Enclosed Storage:								
Carport: Total under Roof Elevate * Enclosed non-habitable areas below the Base Flood Eleva	ed Deck: Enclosed area below BFE*: ation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.								
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Build National Electrical Code: 2014, Florida Energy Code: 2017, Flori	ing Code (Structural, Mechanical, Plumbing, Exi <mark>stin</mark> g, Gas): 2017 ida Accessibility Code: 2017, Florida F <mark>ire</mark> Prevention Code: 2017								
WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.15.									
*****A FINAL INSPECTION IS RE	QUIRED ON ALL BUILDING PERMITS*****								
THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT T	RMIT TO DO THE WORK AS SPECIFICALLY INDICATED ABOVE. I CERTIFY TO THE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE O THE BEST OF MY KNOWLEDGE. I AGREE TO COMPLY WITH ALL N OF SEWALL'S POINT. CONTRACTOR/OWNER'S INITIALS								
OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:	CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:								
X	X								
State of Florida, County of:	State of Florida, County of:								
On This theday of,20	On This theday of20								
bywho is personally	bywho is personally								
known to me or produced	known to me or produced								
As identification.	As identification.								
Notary Public My Commission Expires:	Notary Public My Commission Expires:								

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

TABLE R301.2(3) HEIGHT AND EXPOSURE ADJUSTMENT COEFFICIENTS FOR TABLE R301.2(2)

MEAN	EXPOSURE							
ROOF HEIGHT	В	С	D					
15	1.00	1.21	1.47					
20	1.00	1.29	1.55					
25	1.00	1.35	1.61					
30	1.00	1.40	1.66					
35	1.05	1.45	1.70					
40	1.09	1.49	1.74					
45	1.12	1.53	1.78					
50	1.16	1.56	1.81					
55	1.19	1.59	1.84					
60	1.22	1.62	1.87					

FORMULA FOR DESIGN PRESSURES

Example: 25 ft mean roof height, exposure C – 16 X 7 Door 160 mph.

24.3	Χ	1.35	=	+32.805
-23.3	Χ	1.35	=	-31.455

Garage Door must be rateD at +32.8/-31.5 minimum.

This must be used for exposure C* & D**:

- ** MOST RIVERFRONT PROPERTIED ALONG THE INDIAN RIVER ARE EXPOSURE D
- * ALL OTHER PROPERTIES IN THE TOWN OF SEWALL'S POINT ARE EXPOSURE C

<u>Pressure</u>	Exposure C multiplie	r	Req. Design Pressure			
Х		=		(+)		
		_		(<u>-</u>)		
^		_		(-)		

TOWN OF SEWALL'S POINT ULTIMATE WIND SPEED IS 160 MPH

TABLE R301.2(4) NOMINAL (ASD) GARAGE DOOR LOADS FOR A BUILDING WITH A MEAN ROOF HEIGHT OF 30 FEET LOCATED IN EXPOSURE B (PSF). <u>SUBTRACT 1.5 PSF FROM + & - PRESSURES FOR 18 FT. DOOR</u>

Roof Angle > 10 degrees ULTIMATE DESIGN WIND SPEED (Vult) DETERMINED IN ACCORDANCE WITH SECTION R301.2.1 (MPH - 3 SECOND GUST)																							
Width (ft)	Height (ft)	100	mph	110	mph	120	mph	130	mph	140	mph	150	mph	160	mph	170	mph	180	mph	190	mph	200	mph
9	7	9.6	-10.9	11.4	-12.9	13.7	-15.5	16.1	-18.2	18.5	-20.9	21.3	-24.1	24.3	-27.5	27.6	-31.2	30.6	-34.6	34.2	-38.6	38.0	-43.0
16	7	9.2	-10.3	10.9	-12.2	13.1	-14.6	15.5	-17.2	17.7	-19.7	20.4	-22.7	23.3	-26.0	26.4	-29.4	29.3	-32.6	32.7	-36.5	36.4	-40.6
78 mph 85 mph 93 mph 101 mph 108 mph 116 mph 124 mph 132 mph 139 mph 147 mpl								mph	155	mph													
	Nominal Design Wind Speed (V _{asd}) converted from V _{ult} per Section R301.2.1.3																						

For SI: 1 foot = 304.8 mm, 1 mile per hour = 1.609 km/h, 1 psf = 47.88 N/m².

^{1.} For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower effective area.

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 (\$7,500 Mechanical)

PERMIT #:_		TAX FOLIO #:									
STATE OF F	LORIDA	COUNTY OF MAR	ΓΙΝ								
THE UNDER	RSIGNED HI	REBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO	CERTAIN REAL	PROPERTY, AND IN	ACCORDANCE WITH CHAPT	ER 713,					
LORIDA ST	TATUTES, T	HE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE	OF COMMENC	EMENT.							
	LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):										
		· · · · · · · · · · · · · · · · · · ·									
	GENERAL DESCRIPTION OF IMPROVEMENT:										
	OWNER NAME OR LESSEE INFORMATION, IF LESSEE CONTRACTED FOR THE IMPROVEMENT NAME:										
		ADDRESS:									
		PHONE NUMBER:	FAX		NUMBER:						
	NAME ANI	O ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN ON									
	CONTRACT	OR:									
		ADDRESS:									
		PHONE NUMBER:	FAX NUMBE	:R:							
	SURETY CO	SURETY COMPANY (IF APPLICABLE, A COPY OF THE PAYMENT BOND IS ATTACHED)									
		ADDRESS: PHONE NUMBER:	FAX		NUMBER:						
		BOND AMOUNT:									
	LENDER/M	ORTGAGE			COMPANY:						
					NUMBER:						
					NUIVIBER:						
	NAME:										
		ADDRESS:PHONE NUMBER:	FAX NI IMRE	·R·							
		ELF OR HERSELF, OWNER DESIGNATES_ R'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA		OF		TO RECEIVE					
		. , , ,									
		FAX NUMBER: E MAY NOT BE BEFORE THE COMPLETION OF CO									
		YEAR FROM THE DATE OF RECORDING UNLESS A				TORBOT					
	<u> </u>										
		VNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE									
		S UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA S OTICE OF COMMENCEMENT MUST BE RECORDED AND POS				-					
		CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE CO									
		PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING A 25, FLORIDA STATUTES).	ND THAT THE I	FACTS IN IT ARE TRU	E TO THE BEST OF MY KNO	WLEDGE AND					
SIGNATURE	E OF OWN	R OR LESSEE OR OWNER'S AUTHORIZED OFFICER/DIRECTO	R/PARTNER/M	ANAGER/ATTORNEY	'-IN-FACT						
SIGNATORY	Y'S TITLE/C	PFFICE									
THE FOREG	OING INST	RUMENT WAS ACKNOWLEDGED BEFORE ME THIS	DAY OF	, 20							
BY:		ASASTYPE OF AUTHORITY	FOR								
		PERSON TYPE OF AUTHORITY	P	ARTY ON BEHALF OF	WHOM INSTRUMENT WAS	EXECUTED					
PERSONALI	LY KNOWN	OR PRODUCED IDENTIFICATIONTYPE OF IDEN	ITIFICATION PR	ODUCED							
											

NOTARY SIGNATURE/ SEAL