CITY OF COOPER CITY
COMMUNITY DEVELOPMENT DEPARTMENT/BUILDING DIVISION
ROOF PERMIT SUBMITTAL CHECKLIST

9090 SW 50 PLACE
COOPER CITY, FL 33328
(954) 434-4300

REQUIRED DOCUMENTATION:

☐ COMPLETED BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

☐ COMPLETE ROOFING APPLICATION PACKAGE

☐ DBPR OR MIAMI-DADE COUNTY PRODUCT APPROVALS

☐ SIGNED AND SEALED ENGINEERING CALCULATIONS ***(If applicable)***

☐ STATEMENT OF RESPONSIBILITIES REGARDING ASBESTOS

☐ COPY OF THE ROOF-TOP EQUIPMENT AFFIDAVIT ***(Commercial Only)***

☐ COMMERCIAL ROOFING STATEMENT FOR EXISTING BUILDING ***(If applicable)***

☐ COPY OF THE HOMEOWNERS ASSOCIATION APPROVAL ***(If applicable)***

☐ NOTICE OF COMMENCEMENT ***(Certified Copy or Electronic Copy)*** (STATEMENT OF FLORIDA EFFECTIVE JANUARY 1, 1991 REQUIRES A NOTICE OF COMMENCEMENT WITH THE FAIR MARKET OF $5,000 OR GREATER)

☐ **RE-ROOFS *(Single-Family residence)* WITH AN ASSESSED VALUE OF $300,000 OR MORE REQUIRE A HURRICANE MITIGATION AFFIDAVIT**

OSHA Section 1918.24 (c)
Where portable straight ladders are used, they shall be od sufficient length to extend three (3) feet (0.91 m) above the upper landing surface, and be **positively secured**, which means that it must be physically secured with fasteners of some sort that do not rely on friction or weight to keep the equipment in place; or held against shifting or slipping.

NOTICE TO ALL ROOFING CONTRACTORS

Re-roofing of multi-unit structures. At the time of repair or replacement of roofs on all duplex, townhouse and/or multiple-family dwellings that have attached or continuous roofs, the new roof area shall be installed in the IDENTICAL COLOR AND MATERIALS as the existing roof. Should all unit owners repair or replace their roof area, they may deviate from the original color and roof material; so long as the new roof is identical throughout the structure. (Per City of Cooper City Ordinance #23-91(h)

Section 1524 FBC
HIGH VELOCITY HURRICANE ZONES
REQUIRED OWNERS NOTIFICATION FOR ROOFING CONSIDERATIONS

1524.1 Scope. 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 section. The following items should be addressed as part of the agreement between the owner and the contractor. 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) issues 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 System:** 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 Code: _____

SECTION 1525
HIGH-VELOCITY HURRICANE ZONES—UNIFORM PERMIT APPLICATION

Florida Building Code 8th Edition (2023)
High-Velocity Hurricane Zone Uniform Permit Application Form

INSTRUCTION PAGE

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

Roof System	Required Sections of the Permit Application Form	Attachments Required See List Below
Low Slope Application	A,B,C	1,2,3,4,5,6,7
Prescriptive BUR-RAS 150	A,B,C	4,5,6,7
Asphalt 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 of Product Approval
5.	Municipal Permit Application
6.	Owners Notification for Roofing Considerations (Reroofing Only)
7.	Any Required Roof Testing/Calculation Documentation

Florida Building Code 8th Edition (2023)
High-Velocity Hurricane Zone Uniform Permit Application Form

Section A (General Information)

Master Permit No._____ Process No. _____

Contractor's Name_____

Job Address_____

ROOF CATEGORY

☐ Low Slope ☐ Mechanically Fastened Tile ☐ Mortar/Adhesive Set Tiles

☐ Asphalt Shingles ☐ Metal Panel/Shingles ☐ Wood Shingles/Shakes

☐ Prescriptive BUR-RAS 150

ROOF TYPE

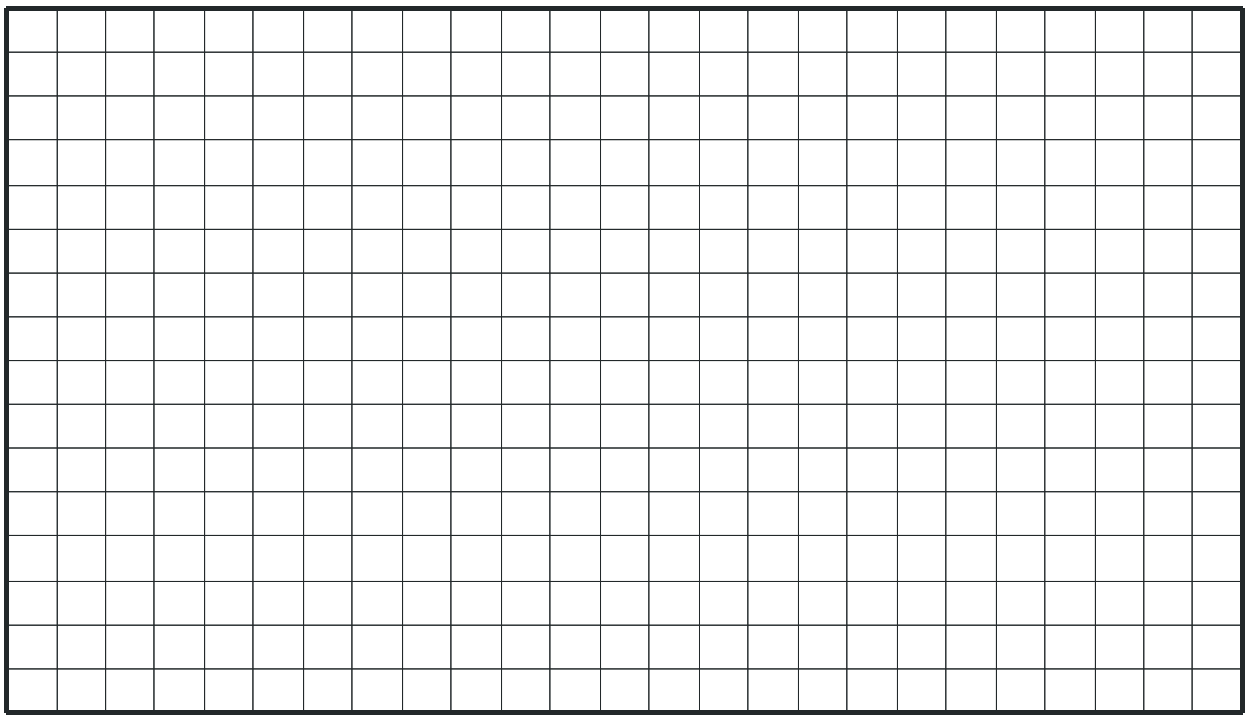
☐ New roof ☐ Repair ☐ Maintenance ☐ Reroofing ☐ Recovering

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF)_____ Steep Sloped Roof Area (SF)_____ Total (SF)_____

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.



Florida Building Code 8th Edition (2023)
High-Velocity Hurricane Zone Uniform Permit Application Form

Section C (Low Slope Application)

Fill in specific roof assembly components and identify manufacturer

(If a component is not used, identify as "NA")

System Manufacturer:_____

Product Approval No.:_____

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) & 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 @ Lap, # Rows ____ @ ____" oc

Zone 1: ____" oc @ Lap, # Rows ____ @ ____" oc

Zone 2: ____" oc @ Lap, # Rows ___ @ ____" oc

Zone 3: ____" oc @ Lap, # Rows ____ @ ____" oc

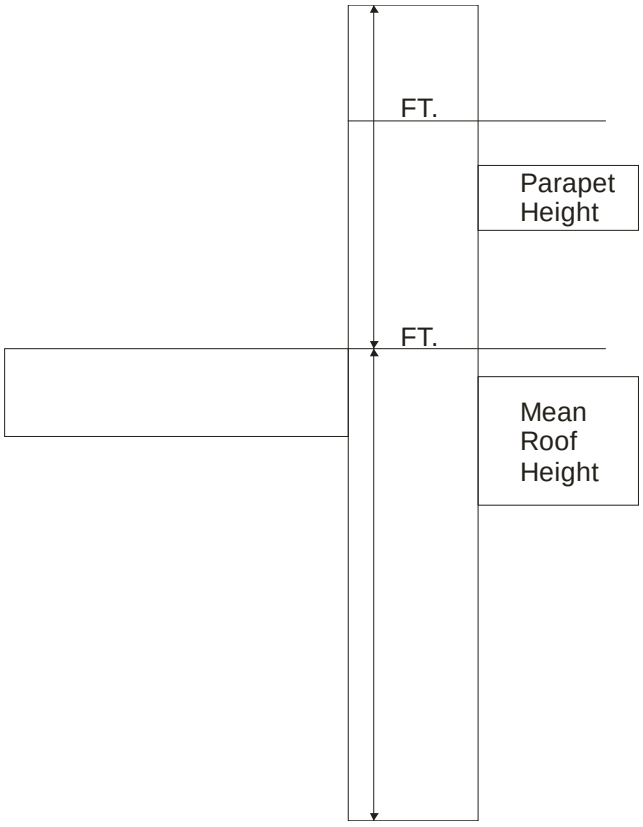
Number of Fasteners Per Insulation Board:

Zone 1′:_____ Zone 1:_____ Zone 2:_____ Zone 3:_____

Illustrate 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 of Base Flashing, Component Material, Material Thickness, Fastener Type, Fastener Spacing or Submit Manufacturers Details that Comply with RAS 111 and Chapter 16.



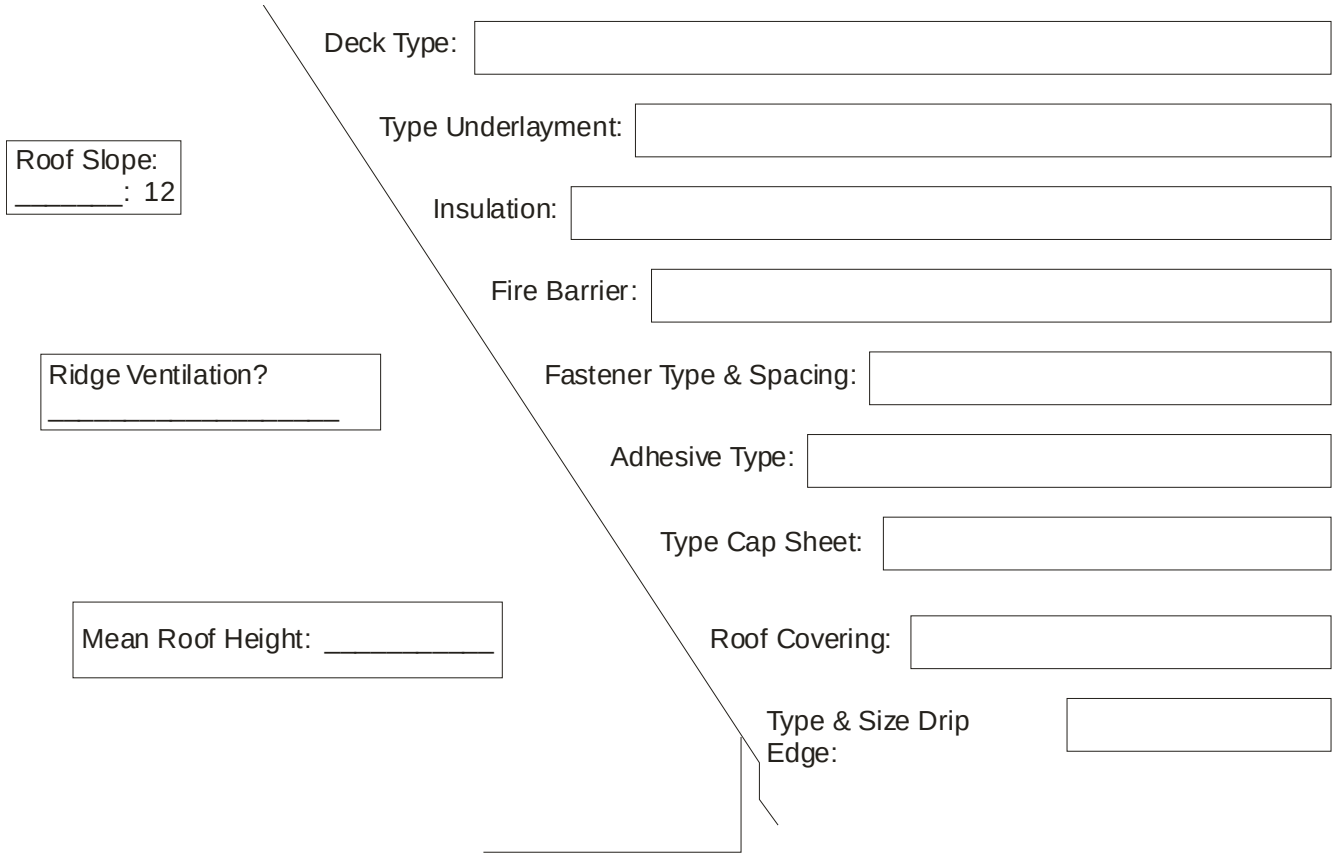
***Florida Building Code* 8th Edition (2023)**
High-Velocity Hurricane Zone Uniform Permit Application Form

Section D (Steep Sloped Roof System)

Roof System Manufacturer: _____

Notice of Acceptance Number: _____

Minimum Design Wind Pressures, If Applicable (From RAS 127 or Calculations):
Zone 1:_____ Zone 2:_____ Zone 3:_____



Florida Building Code 8th Edition (2023)
High-Velocity Hurricane Zone Uniform Permit Application Form

Section E (Tile Calculations)

For Moment-based tile systems, choose either Method 1 or 2. 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"

(Zone 1:____ × λ ____ = ____) – Mg: ____ = M_{r1} ____ Product Approval M_f _____

(Zone 2:____ × λ ____ = ____) – Mg: ____ = M_{r2} ____ Product Approval M_f _____

(Zone 3:____ × λ ____ = ____) – Mg: ____ = M_{r3} ____ Product Approval M_f _____

Method 2 "Simplified Tile Calculations Per Table Below"

Required Moment of Resistance (M_r) From Table Below _____ Product Approval M_f _____

M_r required Moment Resistance*					
Mean Roof Height Roof Slope	15′	20′	25′	30′	40′
2:12	-46	-47.6	-49.4	-50.9	-53.3
3:12	-47.3	-48.9	-50.7	-52.2	-54.6
4:12	-47.2	-52.0	-53.8	-55.3	-57.9
5:12	-39.8	-41.5	-42.8	-43.7	-45.7
6:12	-39.6	-40.6	-41.9	-42.9	-44.8
7:12	-39.4	-40.3	-41.6	-42.6	-44.6

Method 2 may be utilized within Broward County Exposure C only.

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:____ × L ____ = ____ × w: = ____) – W: ____ × cos r ____ = F_{r1} ____ Product Approval F′ _____

(Zone 2:____ × L ____ = ____ × w: = ____) – W: ____ × cos r ____ = F_{r2} ____ Product Approval F′ _____

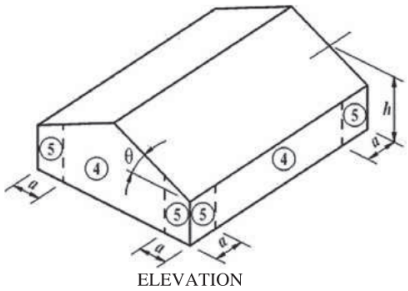
(Zone 3:____ × L ____ = ____ × w: = ____) – W: ____ × cos r ____ = F_{r3} ____ Product Approval F′ _____

Where to Obtain Information		
Description	**Symbol**	**Where to find**
Design Pressure	Zones 1, 2, 3	From applicable table in RAS 127 or by an engineering analysis prepared by PE based on ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	θ	Job Site
Aerodynamic Multiplier	λ	Product Approval
Restoring Moment due to Gravity	M_g	Product Approval
Attachment Resistance	M_f	Product Approval
Required Moment Resistance	M_g	Calculated
Minimum Attachment Resistance	F'	Product Approval
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	W	Product Approval
Tile Dimensions	L = length W = width	Product Approval
All calculations must be submitted to the building official at the time of permit application.		

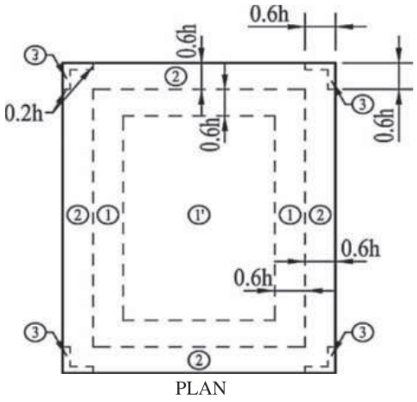
ASCE 7-22

Roof and Wall Zone Chart Diagrams

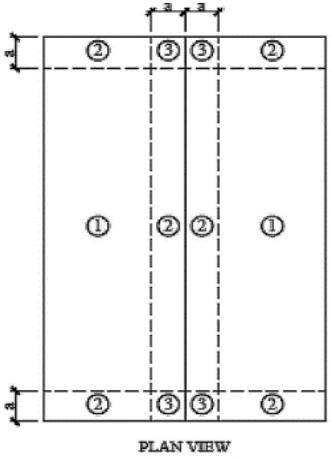
Wall Pressure Chart



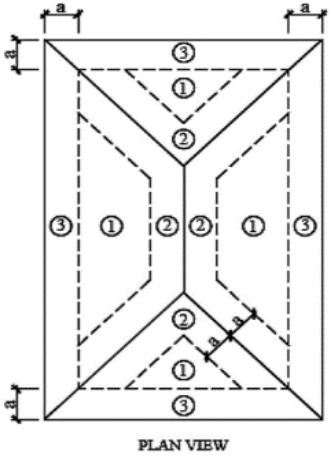
Flat Roof Uplift Chart



Gable Roof Uplift Chart



Hip Roof Uplift Chart



Instructions on how to use these Charts: Determine Mean Roof Height, ***h*** , which is top of roof for flat roofs or the mean roof height for pitched roofs. Find your least horizontal dimension for your building, not including a overhang if it occurs. Calculate the value of, ***a*** , = 10% of least horizontal dimension or 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 feet, you will need to go to the next higher roof height. If your Mean Foof Height is higher than 30 feet, these charts do not apply. Review the diagram which illustrate 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 where your component is located. Door pressures shown are for the most common door sizes and are worst case for heights <= 30 Feet.

Wall Pressure For All Roof Types

Mean Roof Height	15 Ft						20 Ft					
Tributary Area	10	20	35	50	100	500	10	20	35	50	100	500
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
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
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
Mean Roof Height	25 Ft						30 Ft					
Tributary Area	10	20	35	50	100	500	10	20	35	50	100	500
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
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

Garage/Door Pressures

<= 30 Ft			
Effective Wind Area		Positive	Negative
Width	Height		
8	8	38.6	-48.2
10	10	37.4	-45.7
14	14	35.4	-41.8
9	7	38.7	-48.3
16	7	37.0	-45.0
3	7	41.8	-54.6
6	7	39.8	-50.6

Effective Date: October 24, 2022
Revised: November 17, 2022

MANDATORY COUNTYWIDE ROOFTOP MOUNTED EQUIPMENT AFFIDAVIT

ALL EQUIPMENT THAT IS ROOFTOP MOUNTED IS REQUIRED TO BE IDENTIFIED BY THIS AFFIDAVIT AND SUBMITTED WITH THE HGH VELOCITY HURRICANE ZONE UNIFORM ROOFING PERMIT APPLICATION

Permit Number: _____

Site Address: _____

Company Name: _____

Address: _____

Name of Qualifier: _____

License Number: _____ Contact No: _____

PLEASE CHECK ALL APPLICABLE EXISTING ROOFING EQUIPMENT:

☐ A/C EQUIPMENT ☐ PHOTOVOLTAIC PANELS ☐ SOLAR THERMAL ☐ GAS VENTS

☐ WATERLINES ☐ ELECTRICAL CONDUITS

PERMITS ARE REQUIRED FOR:

- REMOVAL AND REINSTALLATION OF PHOTOVOLTAIC PANELS.
- REMOVAL AND REINSTALLATION OF SOLAR THERMAL.
- REMOVAL AND REINSTALLATION OF GAS VENTS.

IF A/C EQUIPMENT IS CHECKED ABOVE:

- IS THERE AN EXISTING CODE APPROVED CURB OR STAND? ☐ YES ☐ NO

IF YOU ANSWERED NO, A MECHANICAL PERMIT IS REQUIRED FOR THE INSTALLATION OF THE PROPOSED CURB OR STAND.

ANY ROOFTOP EQUIPMENT REMOVED DURING REROOFING, SHALL BE REINSTALLED IN COMPLIANCE WITH THE CODE IN EFFECT AT THE TIME A REROOFING PERMIT IS ISSUED

NOTE: All above permits may be considered as deferred submittals.

_____ _____

CONTRACTOR/OWNER BUILDER SIGNATURE DATE

_____

PRINT CONTRACTOR/OWNER BUILDER NAME

CITY OF COOPER CITY
COMMUNITY DEVELOPMENT DEPARTMENT/BUILDING DIVISION
HURRICANE MITIGATION AFFIDAVIT

9090 SW 50 PLACE
COOPER CITY, FL 33328
(954) 434-4300

Prescriptive Method: To comply with **Section 706.8** Florida Existing Building Code Eighth Edition (2023), Roof-to-wall connections on an existing structure with a sawn lumber, wood plank or wood structural panel roof deck:
Options 1 or 2 must be completed by one of the following: **Florida Professional Engineer, Registered Architect, Licensed General Contractor, Building Contractor, Residential Contractor, or persons certified in the structural discipline under FS468 excluding Standard Roofing Inspector prior to final building inspection.** Where mandated re-reroofs are required pursuant to F.B.C. 2023 8th Edition Existing Building Section 706.8 and Broward County Amendments, the intersection of roof framing with wall below shall be improved as specified in Table 706.8.1. As an alternative to an engineered design, the prescriptive retrofit solutions provided in Sections 706.8.1.3 through 706.8.1.6 shall be accepted as meeting the mandated roof-to-wall retrofit requirements **pending final inspection** and after completion of Option 1, or Option 2.

I _____, Contractor/Qualifier do affirm and certify that the Hurricane Mitigation Retrofits installed at _____, meet at least one of the following options (see option 1 or option 2). Please complete the appropriate option information. Qualifier's License #: _____.

Option 1 Hurricane Retrofit Mitigation **Building Permit Number** _____ Metal connectors, clips straps, and fasteners were installed under my supervision; and the Mitigation Retrofits are installed in compliance with the prescriptive methods of 706.8.1.3 through 706.8.1.6. Existing anchors were found to have _____ (# of) fasteners and additional fasteners were installed to make a total of _____ per anchor. Photos may be provided with this affidavit for verification.
Additional anchors (Manufacturer and Model No.) _____ were installed using (Quantity, Size & Type) _____fasteners.
If other methods of retrofit were used, describe them in detail or attach additional sheets.

Option 2 The existing straps were **verified** to have _____ (# of) _____type of fasteners per strap and additional fasteners are not required. I am providing photo documentation and a report affirming that the inspection was performed and by what method or means those systems were inspected inclusive of the existing metal connectors, clips straps, fasteners, and his findings.
By his/her signature below, the Contractor/Qualifier does affirm and certify that the above applicable information for Hurricane Mitigation Retrofit for the replacement of roofing system at_____ is true and accurate and this inspection and work was done under his/her direct supervision.

Option 3 Hurricane Retrofit Mitigation **Building Permit Number** _____. To be completed by the roofing contractor applying for the exception per 706.8.1 Florida Existing Building Code 8th Edition (2023):
I have determined that the cost to install connections at gable ends, or all corners cannot be completed for 15 percent of the cost of roof replacement. I am aware of the prescriptive retrofit solutions provided in Sections 706.8.1.3 through 706.8.1.6 and 706.8.1.7 of Florida Existing Building Code 8th Edition (2023) priority for mandated roof-to-wall retrofit expenditures and have submitted supporting documentation including a verifiable cost estimate.
Therefore, I am applying for a re-roof permit under this exception and hereby attest that the claim and investigation for the replacement of the roofing system at_____ is true and accurate and that this inspection and determination of exemption was done be me or under my direct supervision.

Qualifier's Name (Print): _____ Qualifier's Signature: _____
License # _____ Date: _____

STATE OF FLORIDA – BROWARD COUNTY
The foregoing instrument was acknowledged before me on this _____ day of _____, 20_____ by _____, as _____, who is

____ Personally known to me OR ____Produced the following type of identification _____

NOTARY SIGNATURE _____

(NOTARY SEAL)

NOTARY PRINTED NAME_____

CITY OF COOPER CITY
COMMUNITY DEVELOPMENT DEPARTMENT/BUILDING DIVISION
9090 SW 50 PLACE
COOPER CITY, FL 33328
(954) 434-4300

City of Cooper City HVHZ Electronic Roof Permit Form
Commercial Reroofing Statement for Existing Buildings

Contractor Name: _____ Project Number: _____

Job Address: _____

The following applicable statements, for low slope roof systems only, are required to be completed when applying for commercial reroofing permit applications.

Is there insulation in the existing roof system? Yes ☐ No ☐
If yes, then I attest that the insulation to be installed in the proposed roofing system shall have the same thickness and R-Value as the existing insulation. Note: Structures built after March 15, 1979 must comply with the Florida Energy Code.

☐ **No Change**
I attest that the proposed roofing system is an exact replacement of the existing roofing system. I also attest that existing overflow drains and/or scuppers are sized so that no more than 5" of water will accumulate on any portion of this roof, should the primary drainage system be blocked. 1616.3 FBC

☐ Architect ☐ P.E. ☐ Roofing Contractor License Number: _____

Signature: _____ (*required*) Date: _____

☐ **Change to the Roofing System**
Roofing permit applications in other than Group R-3 occupancy, involving a change in the roofing system and recovery applications must include signed and sealed calculations for the supporting structure, and a statement as follows.
"I have reviewed the structural and drainage adequacy of the existing roof structure with regard to the proposed roofing system and hereby approve the installation as proposed."

☐ Architect ☐ P.E. ☐ Roofing Contractor License Number: _____

Signature: _____ (*required*) Date: _____

State of Florida
County of _____
Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____,
by _____ (Name of Person Making the Statement).

(Seal)

_____
Signature of Notary Public

Personally Known: ☐
OR Produced ID: ☐
Type of ID Produced: _____

_____
Print, Type Name of Notary

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.

PERMIT NUMBER:_____

1. DESCRIPTION OF PROPERTY (Legal description & street address, if available) **TAX FOLIO NO.**_____

SUBDIVISION_____**BLOCK**_____**TRACT**_____**LOT**_____**BLDG**_____**UNIT**_____

_____

2. GENERAL DESCRIPTION OF IMPROVEMENT:

_____

3. OWNER INFORMATION: a. Name _____

b. Address_____**c. Interest in property**_____

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 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 or Owner's Authorized Officer/Director/Partner/Manager

Print Name and Provide Signatory's Title/Office

State of Florida
County of Broward

The foregoing instrument was acknowledged before me by means of ◯ physical presence or ◯ online notarization, this _____day of _____ 20_____

by_____, who is 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 belief (Section 92.525, Florida Statutes).

Rev. 02/14/2020 (Recording)

RESET FORM