

Miami-Dade County HVHZ Electronic Roof Permit Form
Sprayed Polyurethane Foam Permit Form

"Delivering Excellence Every Day"

**Denotes required user inputs. If an item does not apply enter n/a in that line.*

*Master Permit No. : *Job Address: 12020 SW 77 AVE
*Application Date: 11/21/2024 *Process Number:
*Polyurethane Foam "PUFF" Assembly Manufacturer Name: GACO
*Product Approval Number (NOA): 24-0625.07

Does this roof assembly comply with the requirements for a fire rating per the HVHZ Florida Building Code? * ☐ Yes ☐ No

*Deck Type: CONCRETE

*Primer: GACOFLEX A4121

Primer Coverage: 0.4 gal / 100 ft²

*Existing Roof (recovery only): N/A

*Insulation / Barrier Board (only if listed in the "Puff" NOA product approval);

N/A

* Base/Anchor Sheet (only if listed in the "Puff" NOA product approval);

N/A

*Fastener Type for Base/Anchor Sheet Attachment:

N/A

*Fastener Type for Insulation Attachment:

N/A

* ☒ New Roof

* ☐ Reroof

* ☐ Recovery

* ☐ Other

*Slope: 0 " / 12 "

*Roof Mean Height: 20 ft.

*Roof Length: 92 ft.

*Roof Width: 74 ft.

*Max. Design Pressure: -435 psf

*Estimated Value: \$ 87000

*Approved applicator letter submitted:

☒ Yes ☐ No

*Fastener spacing for Base / Anchor Sheet attachment:

(1) Field: " o/c @ laps & rows " o/c @ field of basesheet

(2) Perimeter: " o/c @ laps & rows " o/c @ field of basesheet

(3) Corners: " o/c @ laps & rows " o/c @ field of basesheet

*Number of Fasteners per Insulation / Barrier Board:

(1) Field: (2) Perimeter: (3) Corners:

*Base Coat Polyurethane Foam:

GACOROOFFOAM

*Base Coat Polyurethane Foam Coverage: 1 " Minimum Thickness

*Top Coat Polyurethane Foam:

GACOROOFFOAM

*Top Coat Polyurethane Foam Coverage: 1 " Minimum Thickness

*Polyurethane Foam Protective Coating / Surfacing:

SILICONE

*Protective Coating Coverage:

Base Coat: gal / 100 ft²

2nd Coat: gal / 100 ft²

Top Coat: 2.25 gal / 100 ft²

* Optional Granules: 0.5 lb/sq

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High Velocity Hurricane Zone Uniform Roofing Application Form for Miami-Dade County

INSTRUCTION PAGE

COMPLETE THE NECESSARY SECTIONS OF THE UNIFORM ROOFING PERMIT APPLICATION FORM AND ATTACH THE REQUIRED DOCUMENTS 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
Asphaltic 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 Product Approval
5.	Municipal Permit Application
6.	Owner's Notification for Roofing Considerations (Reroofing Only)
7.	Any Required Roof Testing / Calculation Documentation

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Section A (General Information)

Master Permit Number: _____

Process Number: _____

Contractor's Name: EGUARD ROOF AND SAFETY SYSTEMS

Job Address: 12020 SW 77 AVE, PINECREST, FL 33156

ROOF CATEGORY

- ☒ Low Slope ☐ Mechanically Fastened Tile ☐ Mortar / Adhesive Set Tile
☐ Asphaltic Shingles ☐ Metal Panel/ Shingles ☐ Wood Shingles / Shakes

ROOF TYPE

- ☒ New Roof ☐ Repair ☐ Maintenance ☐ Reroofing ☐ Recovering

ROOF SYSTEM INFORMATION

Low Slope Roof Area (ft²)
6730

Steep Sloped Roof Area (ft²)
0

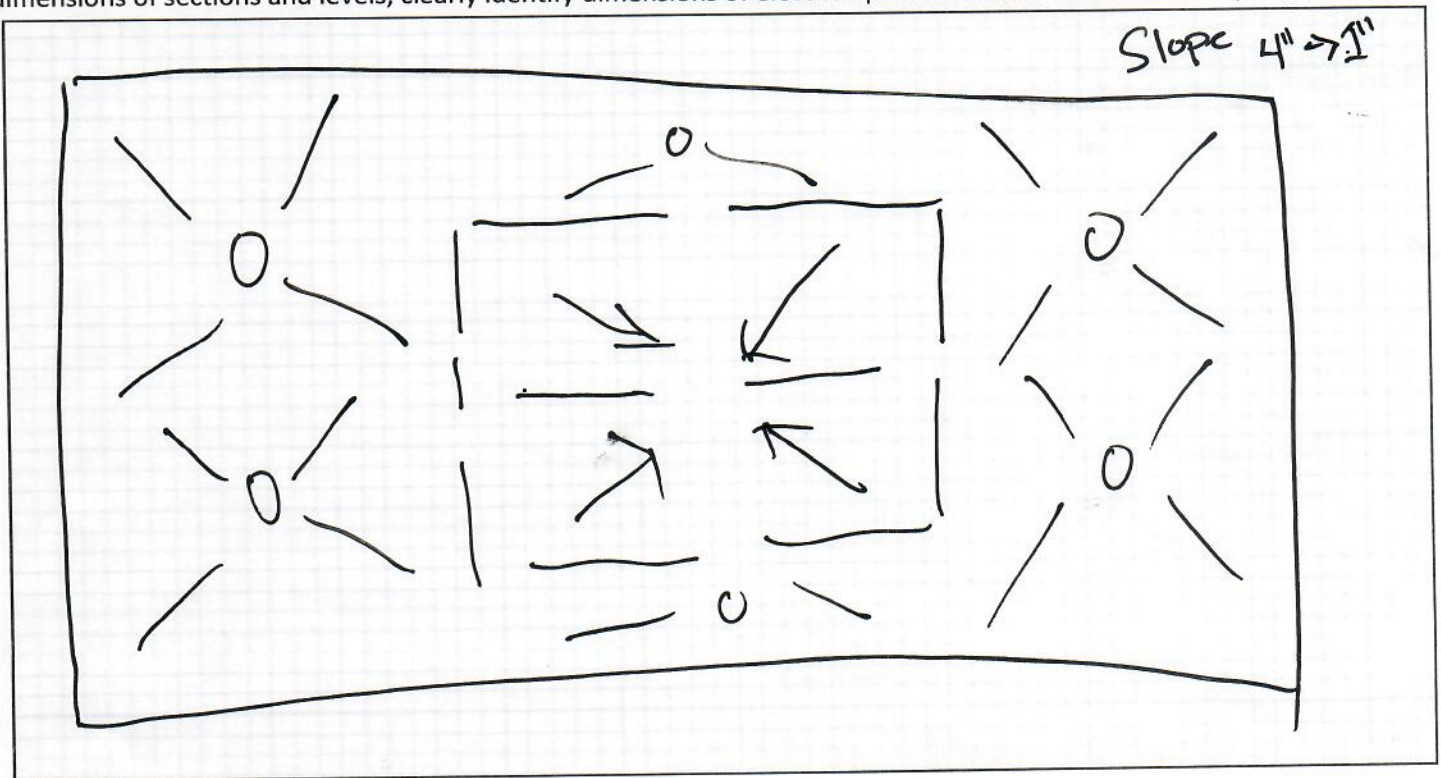
Total (ft²)
6730

Are there gas vents on the roof? ☐ Yes ☒ No If Yes what type? ☐ Natural ☐ LPX

Is there an existing roof top Solar System? ☐ Yes ☒ No If yes will it be reinstalled? ☐ Yes ☐ No

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.



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Section C (Low Sloped Roof Systems)

Fill in Specific Roof Assembly Components and Identify manufacturer
(If a component is not used, identify as "NA")

System Manufacturer: GACO

Product Approval # 24-0625.07

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: -435

Deck Type: CONCRETE

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) and 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 @ Laps, # Rows @ " oc

Zone 1 " oc @ Laps, # Rows @ " oc

Zone 2 " oc @ Laps # Rows @ " oc

Zone 3 " oc @ Laps, # Rows @ " oc

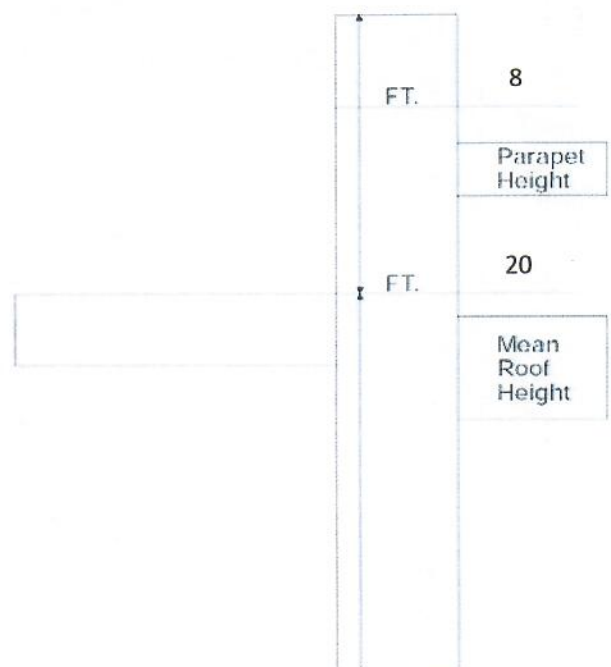
Number of Fasteners Per Insulation Board

Zone 1': Zone1: Zone 2: Zone 3:

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



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Section D (Steep Sloped Roof System)

Roof System Manufacturer: _____

Product Control Number: _____

Minimum Design Wind Pressures, From Applicable RAS 127 Table or Calculations:

Zone1: _____ Zone 2: _____ Zone3: _____

Slope Range: ☐ $\geq 2:12$ to $\leq 4:12$ ☐ $> 4:12$ to $\leq 6:12$ ☐ $> 6:12$ to $\leq 12:12$

Roof Shape: ☐ All Hip Roof ☐ Gable Roof or Partial Gable/Hip Roof

Deck Type: _____

Underlayment Type: _____

Roof Slope:

_____: 12

Insulation: _____

Fire Barrier: _____

Ridge Ventilation?

Fastener Type & Spacing: _____

Cap Sheet Type: _____

Mean Roof Height: _____

Cap Sheet Attachment: _____

Roof Covering: _____

Drip Edge Type & Size: _____

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Section E (Tile Calculations)

For Moment based tile systems, choose Method 1. 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"

Enter positive uplift pressures when using this table

(Zone 1: _____ x λ _____ = _____) - M_g : _____ = M_{f1} _____ Product Approval M_f : _____

(Zone 2: _____ x λ _____ = _____) - M_g : _____ = M_{f2e} _____ Product Approval M_f : _____

(Zone 3: _____ x λ _____ = _____) - M_g : _____ = M_{f2n} _____ Product Approval M_f : _____

Tile attachment method:

Alternate Tile attachment method :

***Method 2 "Simplified Tile Calculations" only applicable in Broward County.**

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: _____ x L = _____ x W = _____) - (w) x $\cos \theta$ _____) = F_{r1} _____ Product Approval F' : _____

(Zone 2: _____ x L = _____ x W = _____) - (w) x $\cos \theta$ _____) = F_{r2} _____ Product Approval F' : _____

(Zone 3: _____ x L = _____ x W = _____) - (w) x $\cos \theta$ _____) = F_{r3} _____ Product Approval F' : _____

Where to obtain information		
Description	Symbol	Where to Find
Design Pressure	Zones 1, 2, & 3	From the applicable Table in RAS- 127 or be an engineering analysis prepared by a PE based upon ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	θ	Job Site
Aerodynamic Multiplier	λ	Product Approval / Notice of Acceptance
Restoring Moment due to Gravity	M_g	Product Approval / Notice of Acceptance
Attachment Resistance	M_f	Product Approval / Notice of Acceptance
Required Moment Resistance	M_r	Calculated
Minimum Attachment Resistance	F'	Product Approval / Notice of Acceptance
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	w	Product Approval / Notice of Acceptance
Tile Dimensions	L =Length W = Width	Product Approval / Notice of Acceptance
All calculations must be submitted to the Building Official at the time of permit application.		