



"Delivering Excellence Every Day"

**Miami-Dade County
HVHZ Electronic Roof Permit Form
Waterproofing or Liquid Applied Roof Systems**

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

***Master Permit Number:** ***Job Address:**

***Application Date:** ***Process Number:**

***Waterproofing Manufacturer Name:**

***NOA Product Approval Number:**

Does this roof assembly comply with the requirements for a fire rating per section 1519.16.3 HVHZ Florida Building Code? * ☒ Yes ☐ No

Note: Submit current copies of the fire directory listing for the waterproofing assembly, manufacturer's installation details, and the current Miami-Dade County NOA Product Control Approval for review prior to issuing the waterproofing permit.

Note: This waterproofing assembly shall comply with all the requirements as listed in section 1519.16 Waterproofing located in the HVHZ section of the Florida Building Code.

* ☐ Plaza Deck

* ☐ Parking Garage

* ☒ Balcony

* ☐ Other

***Slope:** **"/12"**

***Roof Mean Height:** **ft.**

***Roof Length:** **ft.**

***Roof Width:** **ft.**

***Maximum Design Pressure:**

psf

***Estimated Value:** \$

***Deck Type:**

***Primer:** **ft²/gal**

***Insulation/Fire Barrier:**

***Number of Fasteners per Insulation Board**

P(1) Field: **P(2) Perimeter:** **P(3) Corner:**

***Base Coat:**

***Coverage:** **ft²/gal**

***Membrane:**

***Intermediate Coat:**

***Coverage:** **ft²/gal**

***Top Coat:**

***Coverage:** **ft²/gal**

***Surfacing:**

***Overburden:**