



# Town of Manalapan

Building Department • 600 South Ocean Blvd., Manalapan, Florida 33462  
Website: <http://www.manalapan.org> • Phone: 561-585-9477 • Fax: 561-585-9498

## WINDOW/DOOR/STORM SHUTTER REPLACEMENT CHECKLIST FORM FBC 8<sup>th</sup> Edition 2023

THE FOLLOWING INFORMATION & DOCUMENTS ARE REQUIRED FOR PERMIT PROCESSING

The Town of Manalapan Building utilizes a new all-digital platform called My Government Online (MGO). You must first create an account to submit permits and schedule inspections which can be done by visiting: [MGOconnect.org](http://MGOconnect.org)

- Completed Building Permit Application
- Cost estimate on contractor letterhead. The cost estimate must include a description of the work and a breakdown of costs.
- Owner/Builder Affidavit, if applicable
- Notice of Commencement, if applicable
- Fully completed and signed Window, Door, Storm Shutter Worksheet Form
- Copy of floor plan
  - The floor plan must show the numbered locations of all the window(s)/door(s) being replaced. This layout to match the worksheet.
- Full and complete product approvals for all openings

# UNIVERSAL COUNTY-WIDE/MUNICIPAL BUILDING PERMIT APPLICATION FORM

January 2024 Edition

Approved for use throughout Palm Beach County and Municipalities

FOR OFFICE USE ONLY

FBC Version: \_\_\_\_\_ Permit Type: \_\_\_\_\_

Accepted By: \_\_\_\_\_ Application Date: \_\_\_\_\_

Application #: \_\_\_\_\_

**1**  
**KIND of PERMIT (CHECK ONE):**  
 PRIMARY PERMIT  
 SUB-PERMIT - If Fee & Value of a Sub-Permit are covered under a Primary Permit, complete boxes 1, 3, 4, 5, 6, & 8 only to apply. If not covered under a Primary Permit, complete the entire application to apply.  
PRIVATE PROVIDER  PLAN REVIEW  INSPECTIONS

**2**  
**PROPERTY OWNER:** \_\_\_\_\_  
**TENANT:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **UNIT:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_  
**EMAIL:** \_\_\_\_\_

**3**  
**TRADE (CHECK ONE):**  
 STRUCTURAL     ROOFING     ELECTRICAL  
 MECHANICAL     PLUMBING     FIRE     GAS  
 OTHER: \_\_\_\_\_  
**PRIMARY PERMIT #:** \_\_\_\_\_

**4**  
**PROJECT NAME:** \_\_\_\_\_  
**PCN:** \_\_\_\_\_  
**LEGAL DESCRIPTION:** \_\_\_\_\_  
**PROJECT ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_

**5**  
**FURTHER WORK DESCRIPTION:** \_\_\_\_\_  
Type of Work:  New     Addition     Alteration     Repair     Demo     Temporary     Other  
VALUE: \_\_\_\_\_ PERMIT FEE: \_\_\_\_\_ NET S.F (for SFD's): \_\_\_\_\_  
(SEE FEE SCHEDULE) (AS APPLIES) (AS APPLIES)

**6**  
 **OWNER BUILDER PER FL. ST. 489 (AS NAMED ABOVE, FOR CONTACT INFORMATION SEE BOX 2)**  
 **CONTRACTOR (CERT. HOLDER):** \_\_\_\_\_ License #: \_\_\_\_\_  
DBA (COMPANY NAME): \_\_\_\_\_ Contact Person: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ STE: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**7**  
\_\_\_\_\_  
(Signature of Owner or Agent) (including contractor)  
**Print Name:** \_\_\_\_\_  
NOTARY REQUIRED IF \$ 5,000 OR MORE, OR FOR ALL OWNER / BUILDERS REGARDLESS OF \$ VALUE STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_  
Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_  
\_\_\_\_\_  
(Name of person making statement)  
\_\_\_\_\_  
(Signature of Notary Public - State of Florida)  
\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)  
Physical Presence  OR Online Notarization   
Personally Known  OR Produced Identification   
Type of Identification Produced \_\_\_\_\_

**8**  
\_\_\_\_\_  
(Signature of Contractor)  
**Print Name:** \_\_\_\_\_  
NOTARY REQUIRED IF \$ 5,000 OR MORE, OR FOR ALL OWNER / BUILDERS REGARDLESS OF \$ VALUE STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_  
Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_  
\_\_\_\_\_  
(Name of person making statement)  
\_\_\_\_\_  
(Signature of Notary Public - State of Florida)  
\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)  
Physical Presence  OR Online Notarization   
Personally Known  OR Produced Identification   
Type of Identification Produced \_\_\_\_\_

FEE SIMPLE TITLEHOLDER, BONDING COMPANY, ARCHITECT/ENGINEER AND MORTGAGE LENDER INFO IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS & NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$5,000 OR MORE (EXCEPT HVAC REPAIR /REPLACEMENT < \$15,000). PLEASE ADDRESS ALL ITEMS.

<sup>9</sup>  
**Fee Simple Titleholder's Name** (If other than owner): \_\_\_\_\_  
\_\_\_\_\_  
**Fee Simple Titleholder's Address** (If other than owner): \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Same as Owner

<sup>10</sup>  
**Bonding Company:** \_\_\_\_\_  
\_\_\_\_\_  
**Bonding Company Address:** \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Not Applicable

<sup>11</sup>  
**Architect/Engineer's Name:** \_\_\_\_\_  
\_\_\_\_\_  
**Architect/Engineer's Name Address:** \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Not Applicable

<sup>12</sup>  
**Mortgage Lender's Name:** \_\_\_\_\_  
\_\_\_\_\_  
**Mortgage Lender's Address:** \_\_\_\_\_  
\_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Not Applicable

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY 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.

**NOTICE TO CONTRACTOR:** FOR A DIRECT CONTRACT GREATER THAN \$5,000 (EXCEPT FOR HVAC SYSTEM REPAIR OR REPLACEMENT LESS THAN \$15,000), FLORIDA STATUTES REQUIRE THE APPLICANT TO FILE WITH THE ISSUING AUTHORITY, PRIOR TO THE FIRST INSPECTION, EITHER A CERTIFIED COPY OF THE RECORDED (BY OWNER) NOTICE OF COMMENCEMENT OR A NOTARIZED STATEMENT (BY OWNER) THAT THE NOTICE OF COMMENCEMENT HAS BEEN FILED FOR RECORDING, ALONG WITH A COPY THEREOF. IN THE ABSENCE OF A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT, NO SUBSEQUENT INSPECTIONS CAN BE PERFORMED UNTIL THE APPLICANT FILES SUCH CERTIFIED COPY WITH THE ISSUING AUTHORITY. THE CERTIFIED COPY OF THE NOTICE OF COMMENCEMENT MUST CONTAIN THE NAME AND ADDRESS OF THE OWNER, THE NAME AND ADDRESS OF THE CONTRACTOR, AND THE LOCATION OR ADDRESS OF THE PROPERTY BEING IMPROVED.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

FOR APPLICATIONS SUBMITTED UNDER THE PRIVATE PROVIDER PROVISIONS OF F.S. SECTION 553.791, THIS APPLICATION IS NOT CONSIDERED COMPLETE OR SUFFICIENT FOR PURPOSES OF SUBMISSION TO THE BUILDING DEPARTMENT UNTIL THE APPLICANT SECURES ALL NECESSARY APPROVALS FROM OTHER DEPARTMENTS OR AGENCIES INCLUDING, BUT NOT LIMITED TO, PLANNING, ZONING, ENGINEERING, FIRE RESCUE, ENVIRONMENTAL, AND THE FLORIDA DEPARTMENT OF HEALTH.

**OFFICE USE ONLY BELOW THIS LINE**

<sup>13</sup>  
**CODE EDITION/NOTES:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<sup>14</sup>  
**USE (CHECK ONE):**  
 1 & 2 FAMILY     TOWNHOUSE     CONDOMINIUM  
 MULTI-FAMILY     COMMERCIAL     INDUSTRIAL  
 AGRICULTURAL - BLDG CODE EXEMPT     OTHER: \_\_\_\_\_  
\_\_\_\_\_  
 USE CHANGE: \_\_\_\_\_  
\_\_\_\_\_



# TOWN OF MANALAPAN

600 South Ocean Boulevard, Manalapan, FL 33462  
(561) 585-9477

## CONSTRUCTION SITE MAINTENANCE

(refer to Construction Site Standards Sec. 152.110 of Town of Manalapan Code)

Construction Site Address; \_\_\_\_\_

Permit Number; \_\_\_\_\_

- No vehicles may be parked on the swale (public right-of-way)
- Any permission granted for off-site parking within the Town of Manalapan shall be provided in writing by the property owner and a copy received by Town Officials prior to parking off-site
- Contractor shall install a minimum six foot (6'-0") high temporary, fabric-lined chain link fence for the project per Town code Sec. 152.110. Please note: this fence may be required to be on all sides of the property
- Dumpsters must be covered and emptied when full and placed inside the fenced site
- Port-a-potties must be placed inside the fenced site and cannot be visible from the street
- No dirt piles shall be greater than six feet (6'-0") in height above the crown of the road
- All construction sites must be watered down daily or with more frequency as required OR covered in order to prevent dust and debris from escaping to adjacent properties
- Whenever possible/feasible, the Contractor shall notify adjacent property owners 24 hours in advance of any activity which is anticipated to create unusually loud noise, prolonged disturbance, or unusual occurrence (i.e... Demolition)
- Contractor shall contact Town Utilities at 561-586-3699 prior to starting work. Any damage including tampering, to water meter boxes, water meter box lids, and Town owned water lines shall be the responsibility of the Contractor.
- Meters should be visibly marked and kept clear of vehicles, building materials or dirt piles in order to facilitate meter readings and/or emergency shut offs

Contractor Signature; \_\_\_\_\_ Date \_\_\_\_\_

Instrument Prepared By:

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

STATE OF: \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

TAX FOLIO NO.: \_\_\_\_\_

COUNTY OF: \_\_\_\_\_

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. **DESCRIPTION OF PROPERTY** (Legal description of the property & street address, if available) **Legal Description:** \_\_\_\_\_  
\_\_\_\_\_

2. **GENERAL DESCRIPTION OF IMPROVEMENT:** \_\_\_\_\_

3. **OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

a. Name and address: \_\_\_\_\_

b. Interest in property: \_\_\_\_\_

c. Name and address of fee simple titleholder (if different from Owner listed above): \_\_\_\_\_

4. a. **CONTRACTOR:** Name & Address \_\_\_\_\_

b. Phone number: \_\_\_\_\_

5. **SURETY** (if applicable, a copy of the payment bond is attached): a. Name and address: \_\_\_\_\_

b. Phone number: \_\_\_\_\_ c. Amount of bond: \$ \_\_\_\_\_

6. a. **LENDER:** Name and address: \_\_\_\_\_

b. 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:

a. Name and address: \_\_\_\_\_

b. Phone numbers of designated persons: \_\_\_\_\_

8. a. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b. Phone number of person or entity designated by Owner: \_\_\_\_\_

9. Expiration date of notice of commencement (the expiration date will be 1 year after the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_\_\_.

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 SITE OF THE IMPROVEMENT 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 Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

\_\_\_\_\_  
(Print Name and Provide Signatory's Title/Office)

The foregoing instrument was acknowledged before me by means of  physical presence or sworn to (or affirmed) by  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_ (name of person)

as \_\_\_\_\_ for \_\_\_\_\_ (type of authority, e.g. officer, trustee, attorney in fact) (name of party on behalf of whom instrument was executed)

Notary

\_\_\_\_\_  
(Signature of Notary Public)  
(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known  OR Produced Identification  Type of Identification Produced \_\_\_\_\_



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## WINDOW / DOOR / STORM SHUTTER WORKSHEET FORM - (FBC 8<sup>th</sup> Edition 2023)

SITE ADDRESS: \_\_\_\_\_

SELECT ALL THAT APPLY:

- Windows                       Doors (Swinging, Sliding)  
 Accordion Shutters     Doors (Overhead, Garage)  
 Hurricane Panels

Window/Door Types:

- SH – Single Hung
- DH – Double Hung
- FIX – Fixed
- HR – Horizontal Roller
- SGD – Sliding Glass Door
- FD – French Door
- CAS – Casement
- AW – Awning
- OH – Overhead

REQUIRED DESIGN PRESSURES:

**\*\*\*DESIGN PRESURES EITHER TO MATCH THIS TABLE -OR- BY SEPARATE CALCULATIONS.\*\*\***

WINDOWS, DOORS & SHUTTERS (EXCLUDING OVERHEAD/GARAGE DOORS)				ONLY OVERHEAD (GARAGE) DOORS			
Interior Wind Zone - 4		Corner Wind Zone - 5		9' Wide X 7' High		16' Wide X 7' High	
Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.
+ 43.68	- 47.32	+ 43.68	- 58.52	+ 38.6	- 43.7	+ 37.0	- 41.2

FOR BUILDING WITH MEAN ROOF HEIGHT (h) UP TO 30 FEET (EXPOSURE C @ 170 MPH).

VARIATIONS TO THESE PRESSURES TO BE BY SEPARATE CALCULATIONS.

Opening # <small>(Numerical ONLY)</small>	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
1	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
2	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
3	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
4	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
5	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
6	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
7	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
8	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
9	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
10	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					

Additional Openings Needed on Continued Pages

**Applicant's Affidavit: I hereby certify that I have read, understood and accepted the material on ALL pages of this document including "Policies & Procedures" on Page 4 and "Egress Requirements" on Page 5 and have FULLY provided ALL the information requested on this form.**

\_\_\_\_\_  
Qualifier Name

\_\_\_\_\_  
Qualifier Signature

\_\_\_\_\_  
Date

## WINDOW / DOOR / SHUTTER WORKSHEET FORM – (CONTINUED)

Opening # <small>(Numerical ONLY)</small>	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
11	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
12	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
13	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
14	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
15	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
16	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
17	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
18	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
19	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
20	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
21	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
22	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
23	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
24	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
25	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
26	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
27	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
28	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
29	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
30	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
31	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
32	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
33	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
34	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
35	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					

Additional Openings Needed on Continued Pages

## WINDOW / DOOR / SHUTTER WORKSHEET FORM – (CONTINUED)

Opening # <small>(Numerical ONLY)</small>	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
36	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
37	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
38	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
39	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
40	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
41	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
42	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
43	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
44	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
45	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
46	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
47	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
48	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
49	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
50	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
51	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
52	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
53	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
54	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
55	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
56	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
57	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
58	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
59	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					
60	<input type="checkbox"/> 4 5			<input type="checkbox"/> Yes					

Additional Openings Needed on Continued Pages



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## WINDLOADS FOR SINGLE FAMILY, DUPLEX & TOWNHOUSE FORM PER TABLE R301.2(2) - FBC RESIDENTIAL - 7<sup>TH</sup> ED. 2020

FOR BUILDING WITH MEAN ROOF HEIGHT (h) UP TO 30 FEET:

V <sub>ult</sub> 170 MPH	Exposure "C"	Interior Zone 4		Corner Zone 5 *	
		Pos.	Neg.	Pos.	Neg.
		+ 43.68	- 47.32	+ 43.68	- 58.52

\* (Zone 5 is any opening within the corner distance from any corner.)

### MEASURED FIGURES (OR FROM PLANS):

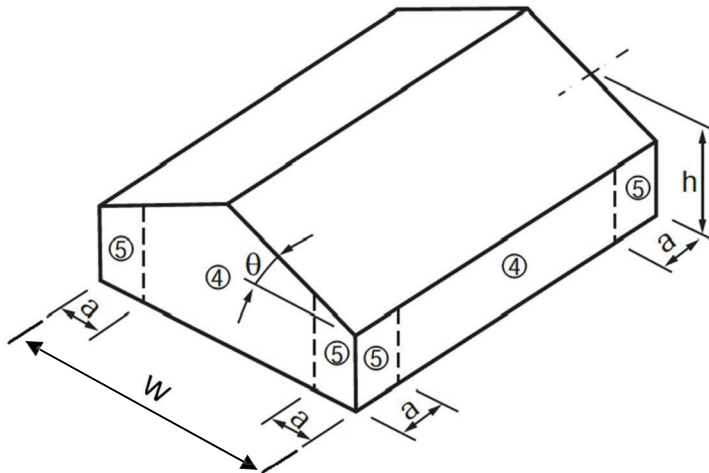
Mean Roof Height (h): \_\_\_\_\_ FT      Width (w): \_\_\_\_\_ FT (narrowest side of building)

### CALCULATED / DETERMINED FIGURES (PER ASCE 7-10):

**a<sub>h</sub>** = Mean Roof Height X 0.4 = \_\_\_\_\_ FT      **a<sub>w</sub>** = Width X 0.1 = \_\_\_\_\_ FT

**a<sub>L</sub>** = Lesser Value between **a<sub>h</sub>** and **a<sub>w</sub>** = \_\_\_\_\_ FT

**a** = Corner Distance = Greater Value between **a<sub>L</sub>** and **3 Feet** = \_\_\_\_\_ FT



## GARAGE DOOR LOADS FROM TABLE R301.2(4) – BUILDING WITH MRH UP TO 30 FEET BASIC WIND SPEED (V<sub>ult</sub>) 170 MPH – 3 SECOND GUST

Roof Angle >0 Degrees Effective Area:		Exposure "C"	
Width (Ft)	Height (Ft)	Pos.	Neg.
9	7	+ 38.6	- 43.7
16	7	+ 37.0	- 41.2



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## Replacement Window/Door Buck Affidavit

### FBC 2023, 8<sup>th</sup> Edition: R609.7 Residential, and 704.1 and 707.4 Existing Building

Where the wood shim or buck thickness is less than 1-1/2 inches (38 mm), window and door assemblies shall be anchored through the main frame or by jamb clip or subframe system, in accordance with the manufacturers published installation instructions. Anchors shall be securely fastened directly into the masonry, concrete or other structural substrate material. Unless otherwise tested, bucks shall extend beyond the interior face of the window or door frame such that full support of the frame is provided. Shims shall be made from materials capable of sustaining applicable loads, located and applied in a thickness capable of sustaining applicable loads per current NOA or product approval. Anchors shall be provided to transfer load from the window or door frame to the rough opening substrate.

Where the wood buck thickness is 1-1/2 inches (38 mm) or greater, the buck shall be securely fastened to transfer load to the masonry, concrete or other structural substrate and the buck shall extend beyond the interior face of the window or door frame. Window and door assemblies shall be anchored through the main frame or by jamb clip or subframe system or through the flange to the secured wood buck in accordance with the manufacturers published installation instructions. Unless otherwise tested, bucks shall extend beyond the interior face of the window or door frame such that full support of the frame is provided. Shims shall be made from materials capable of sustaining applicable loads, located and applied in a thickness capable of sustaining applicable loads per current NOA or product approval. Anchors shall be provided to transfer load from the window or door frame assembly to the secured wood buck.

**A preliminary inspection is required. It is the responsibility of the contractor to make sure that the proper buck and buck fasteners are utilized. In addition to the preliminary and final inspections, the following affidavit, including DETAILED photographs, must be submitted and signed by the Contractor (Qualifier) or Owner (for Owner Builder permit).**

Check one of the following:

Existing buck(s) extend(s) beyond the face of the window and door frame and are anchored per NOA or approved plans. **Detailed photographs of existing buck installation, identified for each opening, are required for Final Inspection.**

New buck(s) extend(s) beyond the face of the window and door frame and are anchored per NOA or approved plans. **Detailed photographs of new buck installation, identified for each opening, are required for Final Inspection.**

**Additional Note: Fasteners in frames with Snap-On type covers are to be left exposed until the window attachments have been inspected and approved. Mullion attachment needs inspection or you may provide photographs. All provided photographs must clearly identify the structure where windows are installed and the numbered opening(s). Photos must clearly show properly sized and attached bucks as well as proper sill frame support.**

Address: \_\_\_\_\_

Permit Number: \_\_\_\_\_

\_\_\_\_\_  
Qualifier or Homeowner's Signature  
(Permit Holder)

\_\_\_\_\_  
Print Contractor or Homeowner's Name  
(Permit Holder)



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## **IMPORTANT REQUIREMENTS FOR EXISTING** **EGRESS WINDOWS**

### **FLORIDA BUILDING CODE 8<sup>TH</sup> EDITION, RESIDENTIAL SECTION R310 EMERGENCY ESCAPE AND RESCUE OPENINGS**

#### **R310.1 Emergency escape and rescue required.**

- Every sleeping room shall have at least one operable emergency escape and rescue opening.
- Emergency escape and rescue openings shall have a sill height of not more than 44 inches (1118mm) above the floor in accordance with Section R310.2.2.
- Emergency escape and rescue openings shall open directly into a public way, or to a yard or court that opens to a public way or into a screen enclosure, where a screen door is provided leading away from the residence.

#### **EXCEPTION (PER FLORIDA BUILDING CODE 8th EDITION, EXISTING SECTION 702.5.)**

##### **702.5 Replacement window for Emergency escape and rescue openings:**

Where windows are required to provide emergency escape and rescue openings in Group R-2 and R-3 occupancies and one and two-family dwellings and townhouses regulated by the Florida Building Code, Residential, replacement windows shall be exempt from the requirements of Sections 1030.2 and 1030.3 of the Florida Building Code, Building and Sections R310.2.1, R310.2.2 and R310.2.3 of the Florida Building Code, Residential accordingly, provided the replacement window is the manufacturer's largest standard size window that will fit within the existing frame or existing rough opening. The replacement window shall be permitted to be of the same operating style as the existing window or a style that provides for an equal or greater window opening area than the existing window. Where the replacement of the window is part of a change of occupancy, it shall comply with section 1012.5.6.

**702.5.1 Control Devices.** Window-opening control devices complying with ASTM F2090 shall be permitted for use on windows required to provide emergency escape and rescue openings. After operation to release the control device allowing the window to fully open, the control device shall not reduce the net clear opening area of the window unit. Emergency escape and rescue opening shall be operational from the inside of the room without the use of keys or tools.

**R310.1.1 Operational constraints and opening control devices.** Emergency escape and rescue openings shall be operational from the inside of the room without the use of keys, tools or special knowledge. Window opening control devices and fall prevention devices complying with ASTM F2090 shall be permitted for use on windows serving as a required emergency and rescue opening.