



RE-ROOF SUPPLEMENT FORM

Address: _____ Permit: _____

Product approval information can be obtained from the following sources:

- [The Florida Department of Business & Professional Regulation Building Code Information Website](#)
- [The Miami-Dade County Building Code Compliance Website](#)
- Directly from the manufacturer

This form must be submitted for all re-roof permits.

The following information must be on the jobsite with the permit for all inspections:

- **A copy of the manufacturer's Florida approved product installation details.**
- **A completed [Dry-In Affidavit for Homes Built Prior to 3/1/02](#)**

EXISTING ROOF DATA

Is existing roof being removed? Yes No

If no, please explain: _____

Type of existing roof: Asphalt Shingle Tile Wood Shake Metal Panel Built-Up Single Ply
Other (specify) _____

Roof Slope: _____ Type of existing roof framing: Wood frame Metal frame

Type of existing sheathing: Wood sheathing Wood plank Metal Pan Other(specify) _____

NEW ROOF DATA

Roofing Manufacturer _____ Style or Model _____

Type of new roof: Asphalt Shingle Tile Wood Shake Metal Panel Built-Up Single Ply
Other (specify) _____

Roof Covering Florida Product Approval or Miami/Dade # _____

Synthetic Underlayment Product Approval Florida Product Approval or Miami/Dade # _____

Is sheathing being replaced? Yes No If yes, how many squares? _____

Is roofing material being installed: Directly to the deck On battens

Roof area to be replaced: More than 25% of total roof area or roof section. Entire roof system to be replaced.

Less than 25% of total roof area or roof section.

Other job specific pertinent information: _____

It is the applicant's responsibility to verify that each roofing product has been installed in accordance with their limitations. Specific compliance will be verified during field inspections.

CONTRACTOR or OWNER/CONTRACTOR SIGNATURE

DATE