



City of Fellsmere Building Department

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 Fellsmere, FL 32948
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www.cityoffellsmere.org

PRODUCT APPROVAL FORM

Permit Number: _____

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below for the current code cycle.

Product approval information can be obtained at the following sources:

https://floridabuilding.org/pr/pr_app_srch.aspx, http://www.miamidade.gov/building/pc-search_app.asp, or directly from the manufacturer.

This form can be incorporated on the plans or submitted as a separate form. In the event any of the listed products on this form change during construction revisions to This form will be required. The following information must be available on the jobsite for inspections:

1. This entire product approval form stamped as “Reviewed” by City of Fellsmere Plans Examiner.
2. Miami-Dade NOA or Florida product approval referenced in the product approval form.
3. A copy of the manufacturer’s installation instructions, details and requirements for each product.

Address: _____ **Contractor/Applicant:** _____

Product	Product Approval Number	Manufacturer	Manufacturer Model Number	Impact Yes/No	Building Design Pressure (+/-PSF)	Product Design Pressure (+/-PSF)
EXTERIOR DOORS						
1. Swinging						
2. Sliding						
3. Sectional						
4. Roll up garage						
WINDOWS						
1. Single Hung						
2. Horizontal Slider						
3. Casement						
4. Double Hung						
5. Fixed						
6. Mullion						
ROOFING PRODUCTS						
1. Underlayments (1)						
2. Underlayments (2)						

3. Asphalt Shingles						
4. Metal Roof Covering						
5. Tile Roof Covering						
6. Modified Bitumen						
7. Roofing Insulation						
8. Skylight						
9. Ridge Vent						
10. Off Ridge Vent						
11. Roofing Fasteners						

WALL COVERINGS/PANELS

1. Weather Barrier						
2. Siding						
3. Soffit						
4. SIPS						

SHUTTERS/AWNINGS

1. Storm Panels						
2. Accordion						
3. Roll Up						
4. Awnings						

OTHER PRODUCTS NOT COVERED ABOVE

I have reviewed the above components or cladding, and I have approved their use in this structure. These products provide adequate resistance to the wind loads and forces specified by current code provisions.

Name: _____ Signature: _____ Seal

Profession: _____ Cert. No. _____ Date: _____