As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @ www.floridabuilding.org

| Category/Subcategory | Manufacturer | Product Description | Approval Number(s) |
|---|---|---|---|
| **1. EXTERIOR DOORS** | | | |
| A. SWINGING | | | |
| B. SLIDING | | | |
| C. SECTIONAL/ROLL UP | | | |
| D. OTHER | | | |
| | | | |
| **2. WINDOWS** | | | |
| A. SINGLE/DOUBLE HUNG | | | |
| B. HORIZONTAL SLIDER | | | |
| C. CASEMENT | | | |
| D. FIXED | | | |
| E. MULLION | | | |
| F. SKYLIGHTS | | | |
| G. OTHER | | | |
| | | | |
| **3. PANEL WALL** | | | |
| A. SIDING | | | |
| B. SOFFITS | | | |
| C. STOREFRONTS | | | |
| D. GLASS BLOCK | | | |
| E. OTHER | | | |
| | | | |
| **4. ROOFING PRODUCTS** | | | |
| A. ASPHALT SHINGLES | TAMKO | ELITE | FL. 18355.1 |
| B. NON-STRUCTURAL METAL | | | |
| C. ROOFING TILES | | | |
| D. SINGLE PLY ROOF | | | |
| E. OTHER | CERTAINTEED | FLINTLASTIK SA BASE AND CAP | FL.2533.1 |
| | | | |
| **5. STRUCTURAL COMPONENTS** | | | |
| A. WOOD CONNECTORS | | | |
| B. WOOD ANCHORS | | | |
| C. TRUSS PLATES | | | |
| D. INSULATION FORMS | | | |
| E. LINTELS | | | |
| F. OTHERS | | | |
| | | | |
| **6. NEW EXTERIOR** | | | |
| **ENVELOPE PRODUCTS** | | | |

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements.
Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

10/09/25

Contractor OR Agent Signature Date

NOTES: _____