



City of Belle Isle Job Site Permit Card **ROOF** 2021-04-089

Class: Residential

Site Address: 2901 Flowertree Rd - Belle Isle, FL 32812

Parcel Number: 30-23-30-1884-02-020. Municipality Belle Isle

INSPECTIONS CANNOT BE SCHEDULED IF A NOC IS REQUIRED FOR THIS PROJECT

Description of Work: ROOF for SFR

Number of Stories: One

ASPHALT SHINGLES with underlayment Square Footage 2933.

Issued: **VENTURE CONST GROUP OF FLORIDA, INC. - SHANTON, S S**

License # CCC1328055

Contact# 920 691 6032

Payment/ Issued Date & Method: 4 / 28 / 2021

Picked up by _____ Sent by mail to the mailing address Emailed

Visa **Master Card** **Amex** **Discover** **Check / Money Order#**

9897 | | | | | | | | | | | | | | | | | | | | | |

OSHA approved ladder/access to the ROOF must be made available to the Inspector.

| ROOF | INSPECTOR | DATE | COMMENTS |
|--|-----------|------|--|
| NEW ROOFS ONLY Code 700 Deck Nailing, Dry-In, Flashing | | | This inspection only applies for a NEW roof only! |
| Both new & re-roof Code 710 In - Progress | | | Underlayment & Dry-in COMPLETE with UP TO 25% shingle coverage. |
| Both new & re-roof Code 720 Final | | | Schedule when roof is COMPLETE. |

PLEASE NOTE: In order to schedule any inspections, the PERMIT / plans-specs. must be issued and POSTED on the JOB SITE! THIS WILL AVOID ANY FAILED INSPECTIONS & RE-INSPECTION FEES. A permit expires in 6 months if approved inspections are not recorded /scheduled within that time frame. You are responsible for scheduling and keeping track all of your inspections - ☆ Inspection requests and inquiries regarding results are to be emailed to BD scheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 3:00 p.m.** Please include the following requirements in your request:

- **Project Address**
- **Corresponding Permit Number**
- **Type of Inspection** (Please reference your permit card for inspection codes)
- **Date of Inspection** (If no date is specified, the inspection will be scheduled for the next business day)
- **Contact Name**
- **Contact Phone Number**
- **Gate / Entry code** (If applicable)
- **AM, PM, or Any Time** (We do our best to accommodate time requests but cannot guarantee an exact arrival)

Universal Engineering Sciences - 3532 Maggie Blvd., Orlando, FL 32811407-581-8161 * Fax 407-581-0313 www.universalengineering.com

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

RECEIVED
 APR 23 2021

APPLICATION FOR ROOFING PERMIT

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

DATE OF APPLICATION: 4/12/21

ROOF PERMIT NUMBER 2021-04-084

PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 2901 Flowertree Rd, Belle Isle, FL 32809 ~~32812~~
 Property Owner Beverly Stark Phone 407 592 0658
 Property Owner's Mailing Address 2901 Flowertree Rd City Belle Isle
 State FL Zip Code 32812 Parcel Id Number: 30-23-30-1884-02-020

REQUIRED! To obtain this information, please visit <http://www.ocpafi.org/Searches/ParcelSearch.aspx>

Class of Building: Old New Type of Building: Residential Commercial Other
 Type of Work: New Roof ReRoof

- REQUIRED! Florida Product Approval Form - NOTE: Installation instructions must be posted on-site before your first inspection!!
- OSHA Approved Access to the Roof must be made Available to the Inspector

Please indicate the nature of work by completing the information below:

Roof Square Footage: 2933 Number of Stories: 1 Job Valuation: \$ 12478.40
 Type: Asphalt Shingles Metal Modified Bitumen Other: Single ply

I hereby certify that the above is true and correct to the best of my knowledge and make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances. By signing below, I recognize JJ's Waste & Recycling is by legal contract the sole authorized provider of garbage, recycling, yard waste, and commercial garbage and construction debris collection and disposal services with the city limits of the City. Contractors, homeowners and commercial businesses may JJ's Waste & Recycling at 407 298-3932 setup accounts for Commercial, Construction Roll Off, or other services needed. Rates are fixed by contract and are available at City Hall or from JJ's Waste & Recycling. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order.

LICENSE HOLDER SIGNATURE Holly Hansen LICENSE # CC1328055 CGC 8517893
 LICENSE HOLDER NAME Holly Hansen COMPANY NAME Venture Construction Group of Florida Inc
 Street Address 2701 Rew Circle
 City Orlando State FL Zip Code 32761 Phone Number 9206916032
 Email Address hh@vcgfl.com

✓ NOC pk

| | |
|------------------|------------------|
| Zoning Fee | \$ <u>30.00</u> |
| Building Fee | \$ <u>85.00</u> |
| Review Fee | \$ <u>-</u> |
| 1% BCAIB Fee | \$ <u>2.00</u> |
| 1.5% DCA Fee | \$ <u>2.00</u> |
| Total Permit Fee | \$ <u>119.00</u> |

Building Official: OTC Date 4.20.2021
 Verified Contractor's Licenses & Insurance are on file f Date 4.20.2021

25. 15/2
 60 12/10

NOTE: The Building Permit Number is required if the Roof Installation is associated with any construction or alteration where a Building Permit has been issued.

USA 9897
 PAID
 4-28-2021

Permit Number: _____
 Folio/Parcel ID #: 30-23-30-1884-02-020
 Prepared by: _____

 Return to: Venture Construction Group of Florida
2701 Row Circle Ocoee FL 34761

DOC # 20210207938
 04/09/2021 07:56 AM Page 1 of 1
 Rec Fee: \$10.00
 Deed Doc Tax: \$0.00
 Mortgage Doc Tax: \$0.00
 Intangible Tax: \$0.00
 Phil Diamond, Comptroller
 Orange County, FL
 Rat To: CSC INC

NOTICE OF COMMENCEMENT

State of Florida, County of Orange
 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, and street address if available) RESIDENTIAL 2901 FLOWERTREE Rd, ORLANDO FL 32812 DAETWYLER Shores 1st replat V/42 LOTA B/C B
2. General description of Improvement ROOF REPLACEMENT
3. Owner information or Lessee information if the Lessee contracted for the improvement
 Name BEVERLY STARK + MICHAEL
 Address 2901 FLOWERTREE Rd. ORLANDO FL 32812
 Interest in Property OWNER
 Name and address of fee simple titleholder (if different from Owner listed above)
 Name _____
 Address _____
4. Contractor
 Name VENTURE CONSTRUCTION GROUP OF FLORIDA
 Address 2701 Row Circle OCOEE FL 34761 Telephone Number 866.459.8357
5. Surety (if applicable, a copy of the payment bond is attached)
 Name _____
 Address _____ Telephone Number _____
 Amount of Bond \$ _____
6. Lender
 Name _____
 Address _____ Telephone Number _____
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.
 Name _____
 Address _____ Telephone Number _____
8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.
 Name _____
 Address _____ Telephone Number _____
9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified) _____

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 JOB SITE 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/Partner/Manager _____
 The foregoing instrument was acknowledged before me this 31 day of march by Beverly Stark
 as owner for _____
 Type of authority, e.g., officer, trustee, attorney in fact _____
 Name of party on behalf of whom instrument was executed
 CHRISTINE CUMMINS
 Commission # GG 296724
 Expires January 30, 2023
 Print, type, or stamp commissioned name of Notary Public

Christine Cummins
 Signature of Notary Public - State of Florida

NOTARY PUBLIC
 STATE OF FLORIDA
 CHRISTINE CUMMINS
 Commission # GG 296724
 Expires January 30, 2023

Personally Known OR Produced ID
 Type of ID Produced FLORIDA LICENSE

NOTARY PUBLIC
 STATE OF FLORIDA
 CHRISTINE CUMMINS
 Commission # GG 296724
 Expires January 30, 2023
 Bonded Thru Budget Notary Service

State of FLORIDA, County of ORANGE.
 Per §668.50, F.S., which defines and permits electronic signatures,
 I certify that this is a true copy of the document as reflected in the
 Official Records.
PHIL DIAMOND, COUNTY COMPTROLLER
 Tina Johnson 04/09/2021
 Deputy Comptroller Date





**Venture
Construction
Group**
OF FLORIDA

301 Yamato Road, Suite 1240 • Boca Raton, FL 33431
Toll Free: 866-459-8351 • Email: Info@vcgfl.com

2654 SE Willoughby Blvd. • Stuart, FL 34994
9160 Forum Corporate Parkway, Suite 350 • Ft. Myers, FL 33905
5323 Millenia Lakes Blvd., Suite 300 • Orlando, FL 32839
100 S. Ashley Drive, Suite 600 • Tampa, FL 33602
Certified General Contractor # CGC1517893 • Certified Roofing Contractor # CCC1328055

FEMA # 80XB0

Inspection Date: FEB. 25, 2021
Mailing Address: 2901 FLOWER TREE Rd.
City/State: Orlando FL Zip: 32812

Inspection - Damage Assessment

The following is Venture Construction Group of Florida, Inc.'s ("Contractor") general assessment of damages only.

ROOFING

Shingle Tile Flat Metal Other _____
Type/Color: Asph 3-TAB
 Pitch 4/12 Story(s) 1
 Vents Ridge
 Decking Issues
> Notes/Other: _____

GUTTERS/DOWNS

Gutters Downspouts
> Notes/Other: N/A

MISC./OTHER

AC Unit _____ Screens _____
 Painting _____ Leaks _____
 Interior Damage _____
 Emergency Repair: Recommend Completed
> Other: _____

SIDING

Vinyl Aluminum Other _____ Front Left
Color/Size: _____ Back Right
 Fascia _____ Wraps _____
 Shutters Pairs _____
> Notes/Other: _____

General Contractor Agreement

Customer Name: BEVERLY STARK Insurance Co.: STATE FARM
Address: 2901 FLOWER TREE Rd. Policy Number: 800000836
City/St: Orlando FL Zip: 32812 Claim Number: 5916W259Z
Home Phone: (407) 477-592-0658 Adjustor Name/Number: _____
Work Phone: _____ Date of Loss: JUNE 20, 2020

Terms: Customer owns the Property and represents to Contractor that the Property was subjected to a recent weather event. Customer is now seeking a licensed general contractor to repair damage to the Property. Customer further represents to Contractor that it has an insurance policy with Insurer in which Insurer may be contractually obligated to pay for emergency construction services, estimating construction services and general contractor services concerning the damage to the Property. The Parties agree, after arm's length negotiations, which Contractor will perform, exclusively, all emergency construction services, estimating construction services and general contractor services concerning the Claim. The Parties further agree that Customer shall not be obligated to pay Contractor any amounts of money except for: (a) its insurance deductible; (b) any insurance proceeds tendered by Insurer concerning the Claim (except for coverages that are entirely unrelated to construction); and (c) any Additional Work (collectively referred to as "Contract Amount"). Any adjusting, adjustment or negotiating of the Claim is specifically excluded from this GCA. Contractor may, however, discuss or explain its bid of construction or repair concerning the Property with Insurer. In the event Insurer seeks to inspect the Property concerning the Claim, Contractor shall provide a knowledgeable representative to participate in any such inspections. Customer has read, understands, and accepts the terms appearing in this GCA front and back and the Terms and Conditions set forth on Contractor's website located at www.vcgfl.com/RGCA which are incorporated herein and made a material part of this GCA. Contract Amount, material, labor, general conditions, overhead, profit, scope of work specifications and construction schedule will be finalized once Contractor endorses Insurer's terms concerning the Claim.

Accepted by Customer on: Date: 02 / 25 / 2021 Signature: _____

Accepted by Customer on: Date: _____ / _____ / _____ Signature: _____

Venture Construction Group of Florida, Inc. Representative: [Signature] Date: FEB. 25, 2021



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

Product Approval Form

DATE: _____

PERMIT # _____

PROJECT ADDRESS 2901 Flowertree Rd

Belle Isle, FL 32809 ~~X~~ 32812

As required by Florida Statue 553.842 and Florida Administrative Code 9B-72m, please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org or can be obtained from the local product supplier. The following information must be turned in with permit application and available onsite for inspections:

• **NOTE:** The Installation instructions must be posted on-site before your first inspection!!

| Product Type | Manufacturer | Model/Series | FL Product Approval # | Product Type | Manufacturer | Model/Series | FL Product Approval # |
|------------------------------|--------------|--------------|-----------------------|-------------------------|------------------|--------------|-----------------------|
| EXTERIOR DOORS | | | | WALL PANELS | | | |
| Swinging | | | | Sliding | | | |
| Sliding | | | | Soffits | | | |
| Sectional/Rollup | | | | Storefront | | | |
| Other | | | | Glass Block | | | |
| | | | | Other | | | |
| WINDOWS | | | | ROOFING PRODUCTS | | | |
| Single/Dbf Hung | | | | Asphalt Shingles | Quercus Corning | Duration | 10674-R16 ✓ |
| Horizontal Slider | | | | Non Struct Metal | | | |
| Casement | | | | Roofing Tiles | | | |
| Fixed | | | | Single Ply Roof | Artlastic GMS | | 16709/2533 ✓ |
| Mullion | | | | Underlayment | Quercus Corning | Rhino Roof | 15216-R4 ✓ |
| Skylights | | | | Other | Empire nail deck | | 16709/477/2533 ✓ |
| Other | | | | | | | |
| STRUCTURAL COMPONENTS | | | | OTHER | | | |
| Wood Connectors | | | | | | | |
| Wood Anchors | | | | | | | |
| Truss Plates | | | | | | | |
| Insulation Forms | | | | | | | |
| Lintels | | | | | | | |
| Other | | | | | | | |

It is the applicant's responsibility to verify that specific products have been installed in accordance with their limitations and with the minimum required design pressures for the structure. Specific compliance will be verified during field inspections.

Applicant Signature: *[Handwritten Signature]*

Date 4/22/21



Product Approval
USER: Public User

[Product Approval Menu](#) >
 [Product or Application Search](#) >
 [Application List](#) >
 Application Detail

OFFICE OF THE SECRETARY

| FL # | FL10674-R16 | | | | | | | | | | |
|--|--|-----------------|-------------|------------|------|------------|------|------------|------|------------|------|
| Application Type | Revision | | | | | | | | | | |
| Code Version | 2020 | | | | | | | | | | |
| Application Status | Approved | | | | | | | | | | |
| Comments | | | | | | | | | | | |
| Archived | <input type="checkbox"/> | | | | | | | | | | |
| Product Manufacturer | Owens Corning | | | | | | | | | | |
| Address/Phone/Email | One Owens Corning Parkway Toledo, OH 43659 (740) 404-7829 greg.keeler@owenscorning.com | | | | | | | | | | |
| Authorized Signature | Greg Keeler greg.keeler@owenscorning.com | | | | | | | | | | |
| Technical Representative | Mel Sancrant | | | | | | | | | | |
| Address/Phone/Email | 1 Owens Corning PKWY Toledo, OH 43659 (419) 376-8360 mel.sancrant@owenscornig.com | | | | | | | | | | |
| Quality Assurance Representative | | | | | | | | | | | |
| Address/Phone/Email | | | | | | | | | | | |
| Category | Roofing | | | | | | | | | | |
| Subcategory | Asphalt Shingles | | | | | | | | | | |
| Compliance Method | Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received | | | | | | | | | | |
| Florida Engineer or Architect Name who developed the Evaluation Report | Robert J.M. Nieminen | | | | | | | | | | |
| Florida License | PE-59166 | | | | | | | | | | |
| Quality Assurance Entity | PRI Construction Materials Technologies, LLC | | | | | | | | | | |
| Quality Assurance Contract Expiration Date | 01/01/2099 | | | | | | | | | | |
| Validated By | John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received | | | | | | | | | | |
| Certificate of Independence | FL10674 R16 COI 2020 01 COI NIEMINEN.pdf | | | | | | | | | | |
| Referenced Standard and Year (of Standard) | <table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D1970</td> <td>2015</td> </tr> <tr> <td>ASTM D3161</td> <td>2016</td> </tr> <tr> <td>ASTM D3462</td> <td>2010</td> </tr> <tr> <td>ASTM D7158</td> <td>2019</td> </tr> </tbody> </table> | Standard | Year | ASTM D1970 | 2015 | ASTM D3161 | 2016 | ASTM D3462 | 2010 | ASTM D7158 | 2019 |
| Standard | Year | | | | | | | | | | |
| ASTM D1970 | 2015 | | | | | | | | | | |
| ASTM D3161 | 2016 | | | | | | | | | | |
| ASTM D3462 | 2010 | | | | | | | | | | |
| ASTM D7158 | 2019 | | | | | | | | | | |
| Equivalence of Product Standards Certified By | | | | | | | | | | | |
| Sections from the Code | | | | | | | | | | | |

Product Approval Method

Method 1 Option D

Date Submitted

12/11/2020

Date Validated

12/17/2020

Date Pending FBC Approval

12/26/2020

Date Approved

02/09/2021

Summary of Products

| FL # | Model, Number or Name | Description |
|--|---|--|
| 10674.1 | Owens Corning Asphalt Roofing Shingles and Starters | 3-tab, 4-tab, laminated, starter and hip & ridge shingles |
| Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: Refer to ER, Section 5. | | Installation Instructions FL10674 R16 II 2020 12 11 FINAL ER OC ASPHALT SHINGLES FL10674-R16.pdf Verified By: Robert J. M. Nieminen PE - 59166 Created by Independent Third Party: Yes Evaluation Reports FL10674 R16 AE 2020 12 11 FINAL ER OC ASPHALT SHINGLES FL10674-R16.pdf Created by Independent Third Party: Yes |

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[Next](#)

Contact Us :: [2601 Blair Stone Road, Tallahassee FL 32399](#) Phone: 850-487-1824

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Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



Credit Card
Safe





NEMO|etc.

Certificate of Authorization #32455
353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

ENGINEER

EVALUATE

TEST

CONSULT

EVALUATION REPORT

Owens Corning
One Owens Corning Parkway
Toledo, OH 43659
(740) 404-7829

Evaluation Report O37940.02.12-R11
FL10674-R16
Date of Issuance: 02/06/2012
Revision 11: 12/11/2020

SCOPE:

This Evaluation Report is issued under **Rule 61G20-3** and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code. The product described herein has been evaluated for compliance with the **7th Edition (2020) Florida Building Code** sections noted herein.

DESCRIPTION: Owens Corning Asphalt Roof Shingles

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein and **FBC 1507.2.7.1 / R905.2.6.1**

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance or production facility location(s) changes, or Code provisions that relate to the product(s) change. Acceptance of our Evaluation Reports by the named client constitutes agreement to notify NEMO ETC, LLC of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO ETC, LLC requires a complete review of its Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Florida Product Approval Number (FL#) preceded by the words "NEMO|etc. Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 10.

Prepared by:

Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 12/11/2020. This does not serve as an electronically signed document.

CERTIFICATION OF INDEPENDENCE:

1. NEMO ETC, LLC does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. NEMO ETC, LLC is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither NEMO ETC, LLC nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.



Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

OFFICE OF THE
SECRETARY

| FL # | FL15216-R8 | | | | | | | | | | | | |
|--|--|-----------------|-------------|-----------------------|------|----------------------------|------|-------------------------|------|----------------------------------|------|-------------------------------|------|
| Application Type | Revision | | | | | | | | | | | | |
| Code Version | 2020 | | | | | | | | | | | | |
| Application Status | Approved | | | | | | | | | | | | |
| Comments | | | | | | | | | | | | | |
| Archived | <input type="checkbox"/> | | | | | | | | | | | | |
| Product Manufacturer | Owens Corning Roofing and Asphalt, LLC | | | | | | | | | | | | |
| Address/Phone/Email | One Owens Corning Parkway Toledo, OH 43645 (740) 321-6345 Greg.Keeler@owenscorning.com | | | | | | | | | | | | |
| Authorized Signature | Keeler Greg Greg.Keeler@owenscorning.com | | | | | | | | | | | | |
| Technical Representative | Greg Keeler | | | | | | | | | | | | |
| Address/Phone/Email | 2790 Columbus Road Granville, OH 43023 (740) 321-6345 greg.keeler@owenscorning.com | | | | | | | | | | | | |
| Quality Assurance Representative | | | | | | | | | | | | | |
| Address/Phone/Email | | | | | | | | | | | | | |
| Category | Roofing | | | | | | | | | | | | |
| Subcategory | Underlayments | | | | | | | | | | | | |
| Compliance Method | Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received | | | | | | | | | | | | |
| Florida Engineer or Architect Name who developed the Evaluation Report | Robert Nieminen | | | | | | | | | | | | |
| Florida License | PE-59166 | | | | | | | | | | | | |
| Quality Assurance Entity | Intertek Testing Services NA, Inc. - QA Entity | | | | | | | | | | | | |
| Quality Assurance Contract Expiration Date | 12/31/2023 | | | | | | | | | | | | |
| Validated By | John W. Knezevich, PE <input type="checkbox"/> Validation Checklist - Hardcopy Received | | | | | | | | | | | | |
| Certificate of Independence | FL15216 R8 COI 2020 01 COI NIEMINEN.pdf | | | | | | | | | | | | |
| Referenced Standard and Year (of Standard) | <table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D226 (physicals)</td> <td>2009</td> </tr> <tr> <td>ASTM D4533 (tear strength)</td> <td>2015</td> </tr> <tr> <td>ASTM D4798 (weathering)</td> <td>2011</td> </tr> <tr> <td>ASTM D4869 (liquid transmission)</td> <td>2016</td> </tr> <tr> <td>ASTM D5035 (tensile strength)</td> <td>2011</td> </tr> </tbody> </table> | Standard | Year | ASTM D226 (physicals) | 2009 | ASTM D4533 (tear strength) | 2015 | ASTM D4798 (weathering) | 2011 | ASTM D4869 (liquid transmission) | 2016 | ASTM D5035 (tensile strength) | 2011 |
| Standard | Year | | | | | | | | | | | | |
| ASTM D226 (physicals) | 2009 | | | | | | | | | | | | |
| ASTM D4533 (tear strength) | 2015 | | | | | | | | | | | | |
| ASTM D4798 (weathering) | 2011 | | | | | | | | | | | | |
| ASTM D4869 (liquid transmission) | 2016 | | | | | | | | | | | | |
| ASTM D5035 (tensile strength) | 2011 | | | | | | | | | | | | |
| Equivalence of Product Standards Certified By | | | | | | | | | | | | | |

Product Approval Method

Method 1 Option D

Date Submitted

12/16/2020

Date Validated

12/17/2020

Date Pending FBC Approval

12/26/2020

Date Approved

02/09/2021

Summary of Products

| FL # | Model, Number or Name | Description |
|---|---|--|
| 15216.1 | RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments | Synthetic roof underlayments |
| Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See ER Section 5 for Limits of Use. | | Installation Instructions FL15216 R8 II 2020 12 15 FINAL ER OWENS CORNING RHINOROOFL15216-R8.pdf Verified By: Robert Nieminen PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL15216 R8 AE 2020 12 15 FINAL ER OWENS CORNING RHINOROOFL15216-R8.pdf Created by Independent Third Party: Yes |

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NEMO|etc.

Certificate of Authorization #32455
353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

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|--------------------------|----------|------|---------|---------|
| EVALUATION REPORT | | | | |

Owens Corning Roofing and Asphalt, LLC
One Owens Corning Parkway
Toledo, OH 43659
(740) 321-6345

Evaluation Report I40510.02.12-R4

FL15216-R4

Date of Issuance: 02/17/2012

Revision 4: 04/19/2018

SCOPE:

This Evaluation Report is issued under **Rule 61G20-3** and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been evaluated for compliance with the **6th Edition (2017) Florida Building Code** sections noted herein.

DESCRIPTION: RhinoRoof Underlayments

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO|etc. requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "NEMO|etc. Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 3.

Prepared by:

Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 04/19/2018. This does not serve as an electronically signed document.

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4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither NEMO|etc. nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.

ROOFING COMPONENT EVALUATION:
1. SCOPE:
Product Category: Roofing

Sub-Category: Underlayment

Compliance Statement: RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments, as produced by Owens Corning Roofing and Asphalt, LLC, have demonstrated compliance with the following sections of the 7th Edition (2020) Florida Building Code through testing in accordance with applicable sections of the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

| <u>Section</u> | <u>Properties</u> | <u>Standard</u> | <u>Year</u> |
|---|--|-----------------|-------------|
| 1507.1.1.1(2&3, Exception), 1507.1.1.1(5) / R905.1.1.1(2&3, Exception), R905.1.1.1(5) | Tear strength | ASTM D4533 | 2015 |
| 1507.1.1.1(2&3, Exception), 1507.1.1.1(5) / R905.1.1.1(2&3, Exception), R905.1.1.1(5) | Tensile strength | ASTM D5035 | 2011 |
| 1507.1.1.1(5) / R905.1.1.1(5) | Liquid water transmission | ASTM D4869 | 2016 |
| 1518.4, RAS 115 | Unrolling, Breaking Strength, Pliability | ASTM D226 | 2009 |
| TAS 110 | Accelerated Weathering | ASTM D4798 | 2011 |

3. REFERENCES:

| <u>Entity</u> | <u>Examination</u> | <u>Reference</u> | <u>Date</u> |
|---------------|----------------------------|----------------------|-------------|
| ITS (TST1509) | ASTM D226 | 100539395COQ-006 | 10/26/2011 |
| ITS (TST1509) | ASTM D4869 | 100539395COQ-002 | 10/26/2011 |
| PRI (TST5878) | ASTM D226 / D4798 / D4869 | OCF-394-02-07.4 | 01/06/2020 |
| PRI (TST5878) | ASTM D226 / D4798 | OCF-464-02-02.2 | 01/06/2020 |
| PRI (TST5878) | ASTM D4533 / D5035 / D4798 | 1378T0109 | 10/15/2020 |
| PRI (TST5878) | ASTM D4533 / D5035 | 1378T0127 | 10/15/2020 |
| ITS (QUA1673) | Quality Control | Service Confirmation | 12/09/2020 |
| ITS (QUA1673) | Quality Control | Florida BCIS | Current |

4. PRODUCT DESCRIPTION:

| | <u>Product</u> | <u>Specification</u> | <u>Plant(s)</u> | <u>Description</u> |
|-----|--------------------|---|-----------------|---|
| 4.1 | RhinoRoof U20 | 1507.1.1.1(2&3, Exception), 1507.1.1.1(5) / R905.1.1.1(2&3, Exception), R905.1.1.1(5) | Qingdao, China | Multilayered polymer woven coated synthetic roof underlayment |
| 4.2 | ABC Pro Guard 20 | 1507.1.1.1(2&3, Exception), 1507.1.1.1(5) / R905.1.1.1(2&3, Exception), R905.1.1.1(5) | Silvassa, India | Multilayered polymer woven coated synthetic roof underlayment |
| 43 | SRS TopShield TS20 | 1507.1.1.1(2&3, Exception), 1507.1.1.1(5) / R905.1.1.1(2&3, Exception), R905.1.1.1(5) | Silvassa, India | Multilayered polymer woven coated synthetic roof underlayment |

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither NEMO ETC, LLC nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.
- 5.2 This Evaluation Report pertains to above-deck roof components. Roof decks and structural members shall be in accordance with FBC requirements to the satisfaction of the Authority Having Jurisdiction.
- 5.3 This Evaluation Report does not include evaluation of fire classification. Refer to **FBC 1505** or **FBC HVHZ 1516** for requirements and limitations regarding roof assembly fire classification. Refer to **FBC 2603** for requirements and limitations concerning the use of foam plastic insulation.
- 5.4 **RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments** may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the Authority Having Jurisdiction for approval based on this evaluation combined with supporting data for the prepared roof covering.
- 5.5 Allowable roof covers:

| TABLE 1: ROOF COVER OPTIONS | | | | | |
|-----------------------------|-----------------------|----------------------------------|-----------------|------------------------------|---------------------------|
| FBC NON-HVHZ: | 1507.2 | 1507.3 | 1507.4 & 1507.5 | 1507.7 | 1507.8 & 1507.9 |
| FBC HVHZ: | TAS 110(S10), RAS 115 | TAS 110(S11), RAS 118, 119 & 120 | RAS 133 | TAS 110(S11) | RAS 130 |
| Underlayment | Asphalt Shingles | Clay and Concrete Tile | Metal | Slate or Slate-Type Shingles | Wood |
| RhinoRoof U20 | Yes | No | Yes | No | NON-HVHZ: No HVHZ: Yes |
| ABC Pro Guard 20 | Yes | No | Yes | No | NON-HVHZ: No HVHZ: Yes |
| SRS TopShield TS20 | Yes | No | Yes | No | NON-HVHZ: No HVHZ: Yes |

5.6 Exposure Limitations:

| TABLE 2: EXPOSURE LIMITATIONS | |
|-------------------------------|-------------------------|
| Underlayment | Maximum Exposure (days) |
| RhinoRoof U20 | 60 |
| ABC Pro Guard 20 | 30 |
| SRS TopShield TS20 | 30 |

6. INSTALLATION:

- 6.1 **RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments** shall be installed in accordance with the manufacturer’s published installation instructions subject to the Limitations set forth in Section 5 herein and the specifics noted below.
- 6.2 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application.

6.3 RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments:

6.3.1 NON-HVHZ Jurisdictions:

6.3.1.1 Shall be installed in compliance with requirements for a synthetic underlayment in **FBC 1507.1.1.1(2, Exception), 1507.1.1.1(3, Exception) or 1507.1.1.1(5)** or **FBC Residential R905.1.1.1(2, Exception), R905.1.1.1(3, Exception) or R905.1.1.1(5)** for the type of prepared roof covering to be installed, and the manufacturer’s installation instructions. FBC requirements take precedence over the manufacturer’s installation instructions.

6.3.1.2 **Fasteners:**
 Minimum fasteners shall be corrosion resistant, ring-shank cap nails shall be as set forth in **FBC 1507.1.1.1 or 1507.1.1.3 or FBC Residential R905.1.1.1 or R905.1.1.3.**

6.3.2 HVHZ Jurisdictions:

6.3.2.1 Shall be installed in a shingle fashion with minimum 4-inch wide side (horizontal) laps and minimum 6-inch wide end laps, and fastened in accordance with FBC HVHZ 1518.2.

7. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction to properly evaluate the installation of this product.

8. MANUFACTURING PLANTS:

Contact the named QA entity for manufacturing facilities covered by **F.A.C. Rule 61G20-3** QA requirements. Refer to Section 4 herein for products and production locations having met codified material standards.

9. QUALITY ASSURANCE ENTITY:

Intertek Testing Services NA Inc. – QUA1673; (312) 906-7779; maura.norlander@intertek.com

- END OF EVALUATION REPORT -



Product Approval
USER: Public User

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 Application Detail

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| <p>FL #</p> <p>Application Type</p> <p>Code Version</p> <p>Application Status</p> <p>Comments</p> <p>Archived</p> <p>Product Manufacturer</p> <p>Address/Phone/Email</p> <p>Authorized Signature</p> <p>Technical Representative</p> <p>Address/Phone/Email</p> <p>Quality Assurance Representative</p> <p>Address/Phone/Email</p> <p>Category</p> <p>Subcategory</p> <p>Compliance Method</p> | <p>FL16709-R7</p> <p>Revision</p> <p>2020</p> <p>Approved</p> <p><input type="checkbox"/></p> <p>CertainTeed, LLC (Roofing)</p> <p>20 Moores Road</p> <p>Malvern, PA 19355</p> <p>(610) 893-5400</p> <p>mark.d.harner@saint-gobain.com</p> <p>Mark Harner</p> <p>mark.d.harner@saint-gobain.com</p> <p>Mark D. Harner</p> <p>18 Moores Road</p> <p>Malvern, PA 19355</p> <p>(610) 651-5847</p> <p>Mark.D.Harner@saint-gobain.com</p> <p></p> <p>Roofing</p> <p>Modified Bitumen Roof System</p> <p>Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer</p> <p><input type="checkbox"/> Evaluation Report - Hardcopy Received</p> | <p>01</p> | | | | | | | | | | | | | | | | | | | | | | |
|---|---|-----------------|-------------|------------|------|------------|------|------------|------|------------|------|------------|------|------------|------|------------|------|------------|------|-----------|------|---------|------|--|
| <p>Florida Engineer or Architect Name who developed the Evaluation Report</p> <p>Florida License</p> <p>Quality Assurance Entity</p> <p>Quality Assurance Contract Expiration Date</p> <p>Validated By</p> | <p>Robert Nieminen</p> <p>PE-59166</p> <p>UL LLC</p> <p>11/13/2022</p> <p>John W. Knezevich, PE</p> <p><input type="checkbox"/> Validation Checklist - Hardcopy Received</p> | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Certificate of Independence</p> | <p>FL16709 R7 COI 2020 01 COI NIEMINEN.pdf</p> | | | | | | | | | | | | | | | | | | | | | | | |
| <p>Referenced Standard and Year (of Standard)</p> | <table border="0"> <thead> <tr> <th style="text-align: left;">Standard</th> <th style="text-align: left;">Year</th> </tr> </thead> <tbody> <tr><td>ASTM D1970</td><td>2015</td></tr> <tr><td>ASTM D2178</td><td>2015</td></tr> <tr><td>ASTM D4601</td><td>2012</td></tr> <tr><td>ASTM D6162</td><td>2015</td></tr> <tr><td>ASTM D6163</td><td>2015</td></tr> <tr><td>ASTM D6164</td><td>2011</td></tr> <tr><td>ASTM D6222</td><td>2011</td></tr> <tr><td>ASTM D6509</td><td>2015</td></tr> <tr><td>ASTM G155</td><td>2013</td></tr> <tr><td>FM 4470</td><td>2016</td></tr> </tbody> </table> | Standard | Year | ASTM D1970 | 2015 | ASTM D2178 | 2015 | ASTM D4601 | 2012 | ASTM D6162 | 2015 | ASTM D6163 | 2015 | ASTM D6164 | 2011 | ASTM D6222 | 2011 | ASTM D6509 | 2015 | ASTM G155 | 2013 | FM 4470 | 2016 | |
| Standard | Year | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D1970 | 2015 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D2178 | 2015 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D4601 | 2012 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D6162 | 2015 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D6163 | 2015 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D6164 | 2011 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D6222 | 2011 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM D6509 | 2015 | | | | | | | | | | | | | | | | | | | | | | | |
| ASTM G155 | 2013 | | | | | | | | | | | | | | | | | | | | | | | |
| FM 4470 | 2016 | | | | | | | | | | | | | | | | | | | | | | | |

Equivalence of Product Standards
Certified By

Sections from the Code

| | |
|---------------------------|-------------------|
| Product Approval Method | Method 1 Option D |
| Date Submitted | 09/11/2020 |
| Date Validated | 09/18/2020 |
| Date Pending FBC Approval | 10/01/2020 |
| Date Approved | 12/15/2020 |
| Date Revised | 03/18/2021 |

Summary of Products

| FL # | Model, Number or Name | Description |
|---|---|--|
| 16709.1 | Flintlastic Modified Bitumen Roof Systems | SBS and APP modified bitumen roof systems |
| Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-97.5 Other: 1.) The design pressure in this application pertains to the maximum design pressure for one particular assembly for use in Zone 1 PRIME (field area) of the roof. Refer to ER Appendix for all systems and attachment limitations. 2.) Refer to ER Section 5 for Limits of Use. | | Installation Instructions FL16709 R7 II 2020 09 03 FINAL A1 ER CERATINTEED MODBIT FL16709-R7.pdf Verified By: Robert Nieminen PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL16709 R7 AE 2020 09 03 FINAL ER CERTAINTTEED MODBIT FL16709-R7.pdf Created by Independent Third Party: Yes |

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353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

ENGINEER

EVALUATE

TEST

CONSULT

EVALUATION REPORT

CertainTeed, LLC
20 Moores Road
Malvern, PA 19355
(610) 893-5400

Evaluation Report C40710.12.13-R7

FL16709-R7

Date of Issuance: 12/02/2013

Revision 7: 09/03/2020

SCOPE:

This Evaluation Report is issued under **Rule 61G20-3** and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code. The product described herein has been evaluated for compliance with the **7th Edition (2020)** Florida Building Code sections noted herein.

DESCRIPTION: Flintlastic® Modified Bitumen Roof Systems

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance or production facility location(s) changes, or Code provisions that relate to the product(s) change. Acceptance of our Evaluation Reports by the named client constitutes agreement to notify NEMO ETC, LLC of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO ETC, LLC requires a complete review of its Evaluation Report relative to updated Code requirements with each Code Cycle.

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INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 4, plus 25-page Appendix.

Prepared by:

Robert J.M. Nieminen, P.E.

Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 09/03/2020. This does not serve as an electronically signed document.

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APPENDIX 1- ATTACHMENT REQUIREMENTS FOR WIND UPLIFT RESISTANCE

| TABLE | DECK | APPLICATION | TYPE | DESCRIPTION | PAGE |
|-------|---|-----------------------------------|------|---|-------|
| 2A | Roof Cladding Design Pressures, Allowable Stress Design, Pasd, Exposure B | | | | 3 |
| 2A | Roof Cladding Design Pressures, Allowable Stress Design, Pasd, Exposure C | | | | 4 |
| 2A | Roof Cladding Design Pressures, Allowable Stress Design, Pasd, Exposure D | | | | 5 |
| 3 | Wood | New or Reroof (Tear-Off) | A-2 | Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover | 6-9 |
| 4 | Wood | New, Reroof (Tear-Off) or Recover | C | Mech. Attached Insulation, Bonded Roof Cover | 10-13 |
| 5 | Wood | New, Reroof (Tear-Off) or Recover | D | Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover | 14-17 |
| 6 | Wood | New, Reroof (Tear-Off) | E | Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover | 18-21 |
| 7 | Wood | New, Reroof (Tear-Off) | E | Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover | 22-25 |

The following notes apply to the systems outlined herein:

- The roof system evaluation herein pertains to above-deck roof components. Roof decks and structural members shall be in accordance with FBC requirements to the satisfaction of the Authority Having Jurisdiction.
- Unless otherwise noted, insulation may be any one layer or combination of FBC Approved (Local or Statewide) board(s) that meet FBC 1505 and, for foam plastic, FBC Chapter 26, when installed with the roof cover.
- For adhered roof insulation and board-size: Unless otherwise noted, refer to Section 2.2.10.6.2 of FM Loss Prevention Data Sheet 1-29 (February 2020).
- The maximum design pressure for the selected base assembly shall meet or exceed the Zone 1 PRIME design pressure determined in accordance with FBC Chapter 16. This is already addressed in the tables that follow via "N/A" reference if the baseline system is "Not Applicable" to Zone 1 PRIME design pressure requirements.
- For mechanically attached components over existing decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with ANSI/SPRI FX-1 or Testing Application Standard TAS 105.
- Refer to FBC 1511 for requirements and limitations regarding recover installations. For Recover Applications using System Type D, the insulation is optional.
- Unless otherwise noted, refer to the following references for bonded applications.

TABLE 1- MEMBRANE / ADHESIVE COMBINATIONS

| REFERENCE | LAYER | MATERIAL | APPLICATION |
|---|-----------|---|---------------------------------|
| BP-AA (Base and Ply sheets, Asphalt-Applied) | Base Ply: | Glasbase; All Weather/Empire Base, Flexiglas Base, Flintlastic Base 20 | Hot asphalt at 20-40 lbs/square |
| | Ply: | One or more Flintglas Ply 4, Flintglas Premium Ply 6 | |
| SBS-AA (SBS, Asphalt-Applied) | Base Ply: | Flintlastic Base 20, Flintlastic Poly SMS Base, Flintlastic Ultra Poly SMS Base | Hot asphalt at 20-40 lbs/square |
| | Ply: | One or more Flintlastic Base 20, Flintlastic Poly SMS Base, Flintlastic Ultra Poly SMS Base | |
| SBS-TA (SBS, Torch-Applied) | Cap Ply: | Flintlastic FR Cap 30, Flintlastic FR Cap 30 CoolStar, Flintlastic FR-P, Flintlastic FR-P CoolStar, Flintlastic Premium FR-P, Flintlastic Premium FR-P CoolStar | Torch-Applied |
| | Base Ply: | Flintlastic Ultra Poly SMS Base, Flintlastic Base 20 T | |
| | Ply: | One or more Flintlastic Ultra Poly SMS Base, Flintlastic Base 20 T | |
| | Cap Ply: | Flintlastic FR Cap 30 T, Flintlastic FR Cap 30 T CoolStar | |



NEMO | etc.

TABLE 2A: ROOF CLADDING DESIGN PRESSURES, ALLOWABLE STRESS DESIGN, PASD (psf)

EXPOSURE CATEGORY B

| Exposure Category | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed - V_{ult} (mph) – FBC Figures 1609.3(1) through 1609.3(4) | | | | | | | | | | |
|-------------------|------------------|------------------|---------|--|-----|-----|------|------|------|------|------|------|------|-----|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | |
| B | Open | $h \leq 15$ | 1 PRIME | -8 | -10 | -11 | -13 | -15 | -17 | -22 | -27 | -27 | -27 | -27 |
| | | | 1 | -15 | -18 | -22 | -25 | -29 | -33 | -41 | -51 | -51 | -51 | -51 |
| | | | 2 | -21 | -25 | -29 | -34 | -39 | -44 | -56 | -69 | -69 | -69 | -69 |
| | | | 3 | -29 | -35 | -41 | -47 | -54 | -61 | -78 | -96 | -96 | -96 | -96 |
| | | | 1 PRIME | -9 | -11 | -12 | -14 | -16 | -19 | -24 | -29 | -29 | -29 | -29 |
| | | | 1 | -17 | -20 | -23 | -27 | -31 | -35 | -45 | -55 | -55 | -55 | -55 |
| | | 2 | -23 | -27 | -32 | -37 | -42 | -48 | -61 | -75 | -75 | -75 | -75 | |
| | | 3 | -31 | -37 | -44 | -51 | -59 | -67 | -84 | -104 | -104 | -104 | -104 | |
| | | 1 PRIME | -10 | -12 | -14 | -16 | -19 | -21 | -27 | -33 | -33 | -33 | -33 | |
| | | 1 | -19 | -22 | -26 | -30 | -35 | -40 | -50 | -62 | -62 | -62 | -62 | |
| | | 2 | -25 | -30 | -36 | -41 | -47 | -54 | -68 | -84 | -84 | -84 | -84 | |
| | | 3 | -35 | -42 | -49 | -57 | -66 | -75 | -95 | -117 | -117 | -117 | -117 | |
| | 1 PRIME | -11 | -13 | -15 | -18 | -20 | -23 | -29 | -36 | -36 | -36 | -36 | | |
| | 1 | -20 | -24 | -29 | -33 | -38 | -43 | -55 | -68 | -68 | -68 | -68 | | |
| | 2 | -28 | -33 | -39 | -45 | -52 | -59 | -74 | -92 | -92 | -92 | -92 | | |
| | 3 | -39 | -46 | -54 | -62 | -72 | -82 | -103 | -128 | -128 | -128 | -128 | | |
| | 1 PRIME | -10 | -12 | -14 | -16 | -18 | -21 | -26 | -32 | -32 | -32 | -32 | | |
| | 1 | -17 | -20 | -24 | -28 | -32 | -36 | -46 | -56 | -56 | -56 | -56 | | |
| | 2 | -22 | -27 | -31 | -36 | -42 | -48 | -60 | -74 | -74 | -74 | -74 | | |
| | 3 | -31 | -36 | -43 | -50 | -57 | -65 | -82 | -101 | -101 | -101 | -101 | | |
| | 1 PRIME | -11 | -13 | -15 | -17 | -20 | -22 | -28 | -35 | -35 | -35 | -35 | | |
| | 1 | -19 | -22 | -26 | -30 | -34 | -39 | -50 | -61 | -61 | -61 | -61 | | |
| | 2 | -24 | -29 | -34 | -40 | -45 | -52 | -65 | -81 | -81 | -81 | -81 | | |
| | 3 | -33 | -40 | -46 | -54 | -62 | -70 | -89 | -110 | -110 | -110 | -110 | | |
| 1 PRIME | -12 | -14 | -17 | -19 | -22 | -25 | -32 | -39 | -39 | -39 | -39 | | | |
| 1 | -21 | -25 | -29 | -34 | -39 | -44 | -56 | -69 | -69 | -69 | -69 | | | |
| 2 | -27 | -33 | -38 | -44 | -51 | -58 | -73 | -91 | -91 | -91 | -91 | | | |
| 3 | -37 | -44 | -52 | -61 | -70 | -79 | -100 | -124 | -124 | -124 | -124 | | | |
| 1 PRIME | -13 | -15 | -18 | -21 | -24 | -28 | -35 | -43 | -43 | -43 | -43 | | | |
| 1 | -23 | -27 | -32 | -37 | -42 | -48 | -61 | -75 | -75 | -75 | -75 | | | |
| 2 | -30 | -36 | -42 | -48 | -56 | -63 | -80 | -99 | -99 | -99 | -99 | | | |
| 3 | -41 | -48 | -57 | -66 | -76 | -86 | -109 | -135 | -135 | -135 | -135 | | | |
| Enclosed | $20 < h \leq 30$ | 1 PRIME | -12 | -14 | -17 | -19 | -22 | -25 | -32 | -39 | -39 | -39 | -39 | |
| | | 1 | -21 | -25 | -29 | -34 | -39 | -44 | -56 | -69 | -69 | -69 | -69 | |
| | | 2 | -27 | -33 | -38 | -44 | -51 | -58 | -73 | -91 | -91 | -91 | -91 | |
| | | 3 | -37 | -44 | -52 | -61 | -70 | -79 | -100 | -124 | -124 | -124 | -124 | |
| | | 1 PRIME | -13 | -15 | -18 | -21 | -24 | -28 | -35 | -43 | -43 | -43 | -43 | |
| | | 1 | -23 | -27 | -32 | -37 | -42 | -48 | -61 | -75 | -75 | -75 | -75 | |
| | 2 | -30 | -36 | -42 | -48 | -56 | -63 | -80 | -99 | -99 | -99 | -99 | | |
| | 3 | -41 | -48 | -57 | -66 | -76 | -86 | -109 | -135 | -135 | -135 | -135 | | |
| | $30 < h \leq 40$ | 1 PRIME | -10 | -12 | -14 | -16 | -18 | -21 | -26 | -32 | -32 | -32 | -32 | |
| | | 1 | -17 | -20 | -24 | -28 | -32 | -36 | -46 | -56 | -56 | -56 | -56 | |
| | | 2 | -22 | -27 | -31 | -36 | -42 | -48 | -60 | -74 | -74 | -74 | -74 | |
| | | 3 | -31 | -36 | -43 | -50 | -57 | -65 | -82 | -101 | -101 | -101 | -101 | |
| 1 PRIME | | -11 | -13 | -15 | -17 | -20 | -22 | -28 | -35 | -35 | -35 | -35 | | |
| 1 | | -19 | -22 | -26 | -30 | -34 | -39 | -50 | -61 | -61 | -61 | -61 | | |
| 2 | -24 | -29 | -34 | -40 | -45 | -52 | -65 | -81 | -81 | -81 | -81 | | | |
| 3 | -33 | -40 | -46 | -54 | -62 | -70 | -89 | -110 | -110 | -110 | -110 | | | |



NEMO | etc.

TABLE 2C: ROOF CLADDING DESIGN PRESSURES, ALLOWABLE STRESS DESIGN, PASD (PSF)
EXPOSURE CATEGORY D

| Exposure Category | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed - V_{ult} (mph) – FBC Figures 1609.3(1) through 1609.3(4) | | | | | | | | | | |
|-------------------|------------------|------------------|---------|--|------|------|------|------|------|------|------|-----|--|--|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | |
| D | Open | $h \leq 15$ | 1 PRIME | -15 | -17 | -20 | -24 | -27 | -31 | -39 | -48 | -48 | | |
| | | | 1 | -28 | -33 | -39 | -45 | -51 | -58 | -74 | -91 | | | |
| | | | 2 | -37 | -44 | -52 | -61 | -70 | -79 | -100 | -124 | | | |
| | | 3 | -52 | -62 | -73 | -84 | -97 | -110 | -139 | -172 | | | | |
| | | $15 < h \leq 20$ | 1 PRIME | -15 | -18 | -22 | -25 | -29 | -33 | -41 | -51 | -51 | | |
| | | | 1 | -29 | -35 | -41 | -47 | -54 | -62 | -78 | -96 | | | |
| | | | 2 | -39 | -47 | -55 | -64 | -73 | -83 | -106 | -130 | | | |
| | | 3 | -55 | -65 | -77 | -89 | -102 | -116 | -147 | -181 | | | | |
| | | $20 < h \leq 30$ | 1 PRIME | -17 | -20 | -23 | -27 | -31 | -35 | -44 | -55 | -55 | | |
| | | | 1 | -31 | -37 | -44 | -51 | -58 | -66 | -84 | -103 | | | |
| | | | 2 | -42 | -50 | -59 | -68 | -79 | -89 | -113 | -140 | | | |
| | | 3 | -59 | -70 | -82 | -95 | -109 | -124 | -157 | -194 | | | | |
| | $30 < h \leq 40$ | 1 PRIME | -17 | -21 | -24 | -28 | -32 | -37 | -46 | -57 | -57 | | | |
| | | 1 | -33 | -39 | -46 | -53 | -61 | -69 | -88 | -108 | | | | |
| | | 2 | -44 | -53 | -62 | -72 | -82 | -94 | -119 | -146 | | | | |
| | 3 | -62 | -73 | -86 | -100 | -114 | -130 | -165 | -204 | | | | | |
| | Enclosed | $h \leq 15$ | 1 PRIME | -18 | -21 | -25 | -28 | -33 | -37 | -47 | -58 | | | |
| | | | 1 | -31 | -36 | -43 | -50 | -57 | -65 | -82 | -101 | | | |
| | | | 2 | -40 | -48 | -56 | -65 | -75 | -85 | -108 | -133 | | | |
| | | 3 | -55 | -65 | -77 | -89 | -102 | -116 | -147 | -182 | | | | |
| | | $15 < h \leq 20$ | 1 PRIME | -19 | -22 | -26 | -30 | -34 | -39 | -50 | -61 | | | |
| | | | 1 | -32 | -38 | -45 | -52 | -60 | -68 | -86 | -107 | | | |
| | | | 2 | -43 | -51 | -59 | -69 | -79 | -90 | -114 | -141 | | | |
| | | 3 | -58 | -69 | -81 | -94 | -108 | -123 | -155 | -192 | | | | |
| $20 < h \leq 30$ | | 1 PRIME | -20 | -24 | -28 | -32 | -37 | -42 | -53 | -66 | | | | |
| | | 1 | -35 | -41 | -48 | -56 | -64 | -73 | -92 | -114 | | | | |
| | | 2 | -46 | -54 | -64 | -74 | -85 | -96 | -122 | -150 | | | | |
| 3 | | -62 | -74 | -87 | -101 | -115 | -131 | -166 | -205 | | | | | |
| $30 < h \leq 40$ | 1 PRIME | -21 | -25 | -29 | -34 | -39 | -44 | -56 | -69 | | | | | |
| | 1 | -36 | -43 | -51 | -59 | -67 | -77 | -97 | -120 | | | | | |
| | 2 | -48 | -57 | -67 | -77 | -89 | -101 | -128 | -158 | | | | | |
| 3 | -65 | -77 | -91 | -105 | -121 | -138 | -174 | -215 | | | | | | |



NEMO | etc.

| ANCHOR SHEET ATTACHMENT, SYSTEM W-1: | | Ultimate Design Wind Speed – V _{ult} (mph) | | | | | | | | | | | |
|--------------------------------------|-----------|---|---------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Exposure | Enclosure | Roof Height (ft) | Zone | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | |
| B | Enclosed | h ≤ 15 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | | 15 < h ≤ 20 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 20 < h ≤ 30 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 30 < h ≤ 40 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| C | Open | h ≤ 15 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 15 < h ≤ 20 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 20 < h ≤ 30 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 30 < h ≤ 40 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |



NEMO | etc.

ANCHOR SHEET ATTACHMENT, SYSTEM W-1:

| Exposure | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed - V_{ult} (mph) | | | | | | | | | | | | | | | | | |
|----------|-----------|------------------|---------|--|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | | | | | | | | |
| D | Enclosed | $h \leq 15$ | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | N/A | N/A | | |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 3 | #2 | #3 | #5 | #6 | #7 | #4 | #5 | #6 | #7 | #3 | #4 | #5 | N/A | N/A | N/A | N/A | N/A | |
| | | $15 < h \leq 20$ | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | N/A |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #2 | #3 | #5 | #7 | N/A | #3 | #5 | #6 | N/A | #3 | #4 | #5 | N/A | N/A | N/A | N/A | N/A | |
| | | $20 < h \leq 30$ | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | N/A |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #3 | #4 | #5 | #7 | N/A | #4 | #5 | #7 | #3 | #4 | #5 | #7 | N/A | N/A | N/A | N/A | N/A | |
| | | $30 < h \leq 40$ | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | N/A |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #3 | #5 | #7 | N/A | #3 | #5 | #6 | N/A | #3 | #5 | #7 | #4 | #5 | #7 | #3 | #6 | #7 | N/A |



BASE SHEET ATTACHMENT, SYSTEM W-3:

| Exposure | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed – V_{ult} (mph) | | | | | | | | | | | | | | | | | |
|----------|----------------|------------------|----------------|--|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | | | | | | | | |
| D | Enclosed | $h \leq 15$ | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | | |
| | | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| 3 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | | |



NEMO | etc.

BASE SHEET ATTACHMENT, SYSTEM W-4:

| Exposure | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed – V _{ult} (mph) | | | | | | | | | | | | |
|----------|----------------|------------------|----------------|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | | | |
| D | Enclosed | h ≤ 15 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 3 | #1 (AS-LISTED) | #2 | #4 | #4 | #5 | #6 | #6 | #6 | N/A | N/A | N/A | N/A | N/A | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 3 | #1 (AS-LISTED) | #3 | #4 | #5 | #6 | #6 | #6 | #6 | N/A | N/A | N/A | N/A | N/A | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 3 | #2 | #3 | #4 | #5 | #6 | #6 | #6 | #6 | N/A | N/A | N/A | N/A | N/A | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| 3 | #2 | #4 | #5 | #6 | #6 | #6 | #6 | #6 | N/A | N/A | N/A | N/A | N/A | | | |
| 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| 3 | #2 | #4 | #5 | #6 | #6 | #6 | #6 | #6 | N/A | N/A | N/A | N/A | N/A | | | |



NEMO | etc.

BASE SHEET ATTACHMENT, SYSTEM W-5:

| Exposure | Enclosure | Roof Height (ft) | Zone | Ultimate Design Wind Speed - V _{ult} (mph) | | | | | | | | | | | | | | | | |
|----------|----------------|------------------|----------------|---|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|----------------|
| | | | | 110 | 120 | 130 | 140 | 150 | 160 | 180 | 200 | | | | | | | | | |
| D | Enclosed | h ≤ 15 | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 3 | #1 (AS-LISTED) | #2 | #3 | #5 | #6 | #7 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) |
| | | 3 | #1 (AS-LISTED) | #3 | #4 | #5 | #7 | #7 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| | | 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | |
| | 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | |
| | 3 | #2 | #3 | #5 | #7 | #7 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| 1 PRIME | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | | |
| 1 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | | |
| 2 | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | #1 (AS-LISTED) | | | |
| 3 | #2 | #3 | #5 | #7 | #7 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | |



Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE GENERAL CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

SHANTON, STEPHEN STACY

VENTURE CONSTRUCTION GROUP OF FLORIDA, INC.

301 YAMATO RD SUITE 1240
BOCA RATON FL 33431

LICENSE NUMBER: CGC1517893

EXPIRATION DATE: AUGUST 31, 2022

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Ron DeSantis, Governor

Halsey Beshears, Secretary



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

THE ROOFING CONTRACTOR HEREIN IS CERTIFIED UNDER THE
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

SHANTON, STEPHEN STACY

VENTURE CONSTRUCTION GROUP OF FLORIDA, INC.

301 YAMATO RD SUITE 1240
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CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
4/9/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
South Florida Casualty, Inc.
415 North 4th Street
Lantana, FL 33462

CONTACT NAME:
PHONE (A/C No. Ext): **561-533-6144** FAX (A/C No.): **561-533-6170**
E-MAIL ADDRESS: **elaine@sfcins.net**

INSURED
Venture Construction Group of Florida Inc.
301 Yamato Rd, Suite 1240
Boca Raton, FL 33431
866-459-8351 Primary

INSURER(S) AFFORDING COVERAGE NAIC#
INSURER A: **Kinsale Insurance Company** 38920
INSURER B: **State National Insurance Co**
INSURER C: **Berkshire Hathaway Guard Ins** 018331
INSURER D:
INSURER E:
INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE | ADUL INSR | SUBR WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS |
|----------|---|-----------|----------|------------------|-------------------------|-------------------------|--|
| A | GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR | | | 0100123975-0 | 8/14/20 | 8/14/21 | EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000 |
| | GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC | | | | | | |
| C | AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS | | | VEAU175410 | 2/13/21 | 2/13/22 | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ UM \$ 100,000 |
| | UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR CLAIMS-MADE | | | 0100123978-0 | 8/14/20 | 8/14/21 | EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000 |
| B | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below | | N/A | NXTLR00RYV-00-WC | 1/8/21 | 1/8/22 | <input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| | DED <input type="checkbox"/> RETENTION \$ | | | | | | |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
CGC1517893 / CCC1328055

CERTIFICATE HOLDER

City of Belle Isle
1600 Nela Avenue
Belle Isle, FL 32809

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



CITY OF OCOEE
150 N LAKESHORE DR
OCOEE FL 34761-2223
(407)905-3195

**LOCAL BUSINESS TAX RECEIPT
2020-2021**

Receipt # **20092**

CONTRACTOR/SUB-CONTR

Mailing Address: **VENTURE CONSTRUCTION GROUP OF FLORIDA INC
301 YAMATO RD SUITE 1240
BOCA RATON, FL 33431**

This Business Tax Receipt does not permit the holder to operate in violation of any City Law, Ordinance or Regulation. Any change in locations or ownership must be approved by the City, subject to zoning restrictions. This Receipt does not constitute an endorsement, approval, or disapproval of the holder's skill or competence or of the compliance or non-compliance of the holder with other laws, regulations, or standards.

Fee Paid: \$250.08
Issued: 2/5/2021

Building Official

Valid **October 1st 2020** though **September 30th 2021**
Post in a conspicuous place at the business location

Business Name: **VENTURE CONSTRUCTION GROUP OF FLORIDA INC**
Business Address: **2701 REW CIRCLE
OCOEE, FL 34761**
Primary Business Activity: **FULL-SERVICE GENERAL CONTRACTOR SPECIALIZING IN ROOFING & FOCUSING ON INSURANCE RESTORATION AND REPAIRS.**



Please be informed that our current (legacy) website will be phased out for our new website in June. The date and time of rollover will soon be announced. Please visit our new site at <https://ocpaweb.ocpafl.org>.

Searches Sales Search Results Property Record Card My Favorites Sign up for e-Notify...

2901 Flowertree Rd < 30-23-30-1884-02-020 >

Name(s) Stark Michael K
 Physical Street Address 2901 Flowertree Rd
 Mailing Address On File 2901 Flowertree Rd
 Postal City and Zipcode Orlando, FL 32812
 Belle Isle, FL 32812-4813
 Property Use 0103 - Single Fam Class III
 Incorrect Mailing Address? Municipality Belle Isle



View 2020 Property Record Card

Property Features Values, Exemptions and Taxes Sales Analysis Location Info Market Stats Update Information

2021 values will be available in August of 2021.

Property Description

DAETWYLER SHORES 1ST REPLAT V/42 LOT 2 BLK B

View Plat


Total Land Area 18,196 sqft (+/-) | 0.42 acres (+/-) GIS Calculated Notice

Land

| Land Use Code | Zoning | Land Units | Unit Price | Land Value | Class Unit Price | Class Value |
|----------------------|--------|------------|------------|------------|------------------|-------------|
| 0100 - Single Family | R-1-AA | 1 LOT(S) | working... | working... | working... | working... |

Page 1 of 1 (1 total records)

Buildings

| Important Information | | Structure | |
|---|---|---|---|
|  | Model Code: 01 - Single Fam Residence Type Code: 0103 - Single Fam Class III Building Value: working... Estimated New Cost: working... | Actual Year Built: 1957 Beds: 3 Baths: 2.0 Floors: 1 | Gross Area: 2209 sqft Living Area: 1614 sqft Exterior Wall: Concrete/Cinder Block Interior Wall: Plastered |

Page 1 of 1 (1 total records)

Extra Features

| Description | Date Built | Units | XFOB Value |
|---|------------|-------|------------|
| There are no extra features associated with this parcel | | | |

This Data Printed on 04/22/2021 and System Data Last Refreshed on 04/21/2021