



Alachua County, Board of County Commissioners
Department of Growth Management
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<http://growth-management.alachuacounty.us>

Submit Application to: **Building Division**

building@alachuacounty.us
 Tel. 352.374.5243
 Fax. 352.491.4510

PRODUCT APPROVAL SPECIFICATION SHEET

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. You can find product approval numbers at www.floridabuilding.org. First select "Product Approval". "Find a Product". Then select a category (product), select a manufacturer, and then search. **Please include the mfg's installation instructions in your package.**

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL			
D. ROLL UP			
E. AUTOMATIC			
F. OTHER			
2. WINDOWS			
A. SINGLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. DOUBLE HUNG			
E. FIXED			
F. AWNING			
G. PASS THROUGH			
H. PROJECTED			
I. MULLION			
J. WIND BREAKER			
K. DUAL ACTION			
L. OTHER			
3. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. UNDERLAYMENTS			
C. ROOFING FASTENERS			
D. NON-STRUCTURAL METAL ROOFING			
E. WOOD SHINGLES & SHAKES			
F. ROOFING TILES			
G. ROOFING INSULATION			
H. WATERPROOFING			
I. BUILT-UP ROOFING ROOF SYSTEMS			
J. ROOFING SLATE			
K. LIQUID APPLIED ROOF SYSTEMS			
L. ROOF TILE ADHESIVE			
M. SPRAY APPLIED POLYURETHANE ROOF			
N. OTHER			
4. SKYLIGHTS			
5. 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) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturer's installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

Signature of Applicant _____

Date _____