



CITY OF TAMARAC BUILDING DEPARTMENT  
 6011 NOB HILL ROAD 1<sup>ST</sup> FLOOR  
 TAMARAC, FL 33321

**ROOF MITIGATION FORM #2 FOR ROOF TO WALL CONNECTIONS**  
**For Single Family Residential Re-Roof**  
**Effective October 1, 2007**

**\*\*Applies to site built Single Family Residential homes with a structural value exceeding 300,000 dollars. (*Insured value or County Property Appraised building value exclusive of land.*)**

101.2 When a roof is replaced on a building that is located in the wind-borne debris region as defined in 1609.2 of the FBC, (Building) and that has an insured value of \$300,000 or more or, if the building is uninsured or for which documentation of insured value is not presented, has a just valuation for the structure for purposes of ad valorem taxation of \$300,000 or more:

- a) Roof to wall connections shall be improved as required by section 201.3.
- b) Mandated retrofits of the roof-to-wall connection shall not be required beyond 15 percent increase in the cost of re-roofing.
- c) Where complete retrofits of all the roof-to-wall connections as prescribed in 201.3 would exceed 15 percent of the cost of the re-roofing project, the priorities outlined in Section 201.3.5 shall be used to limit the scope of work to the 15 percent limit.

**Prescriptive Roof to Wall Connections**

201.3 Roof to wall connections for site built single family residential structures.

Where required by section 101.2, the intersection of roof framing with the wall below shall be strengthened by adding metal connectors, clips, straps, and fasteners such that the performance level equals or exceeds the uplift capacities as specified in table 201.3. As an alternative to an engineered design, the prescriptive retrofit solutions provided in Sections 201.3.1 through 201.3.4 shall be accepted as meeting the mandated roof-to-wall retrofit requirements.

**Check the appropriate method you will use below:**

- 201.3.1 Prescriptive method for **gable roofs** on a **wood frame wall**. (See attached for details of such method)
- 201.3.2 Prescriptive method for **gable roofs** on a **masonry wall**. (See attached for details of such method.)
- 201.3.3 Prescriptive method for **hip roofs** on a **wood frame wall**. (See attached for details of such method.)
- 201.3.4 Prescriptive method for **hip roofs** on a **masonry wall**. (See attached for details of such method.)

**Non-Prescriptive Method of Roof to Wall Connections**

**Evaluation of existing roof to wall connections and report on specific method to use in order to comply with 201.3 is to be Signed and Sealed by a Florida Registered Architect or Engineer and submitted with this form.**

\_\_\_\_\_  
 (Notarized Signature of Contractor/Owner-Builder)

\_\_\_\_\_  
 (Printed Name of Contractor/Owner-Builder)

\_\_\_\_\_  
 (Date)

STATE OF FLORIDA  
 COUNTY OF BROWARD

On this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me the undersigned Notary Public

of the State of Florida, personally appeared \_\_\_\_\_  
 (Name(s) of individual(s) who appeared before notary)

NOTARY PUBLIC  
 SEAL OF OFFICE

and whose name(s) is/are subscribed to the within instrument, and he/she/they acknowledge that he/she/they executed it.

WITNESS my hand and official seal: \_\_\_\_\_  
 Notary Public, State of Florida

\_\_\_\_\_  
 (Print, type or stamp Commissioned name of Notary Public)

( ) Personally known to me, or ( ) Produced identification: \_\_\_\_\_  
 Type of identification

( ) DID take an oath, or ( ) DID NOT take an oath.