

OPENING PROTECTION COMPLIANCE AFFIDAVIT

Homeowner's Name:				
Property Address:				
	City:	State:	Zip:	County:

Please fill out all applicable areas concerning Opening Protection ratings for address in question. Please attach any Notice of Acceptance (NOA) from MDC if found:

EGRESS DOORS COMPLIANCE

I, the licensed _____ (insert license type) whose name and signature appears below, do hereby certify that all egress doors for the address above was installed in _____ (date or year of installation/construction), and confirm that the installation of the same was completed in accordance with all requirements of the Florida Building Code (check the appropriate code followed below) and meet all standards for testing for the following rating (select and initial *one* below):

- _____ "Large Missile Impact" rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996)
- _____ "Small Missile Impact" rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996 OR SSTD 12)

EGRESS DOORS MATERIALS

Model: _____ Manufacturer _____

Specifications
(Including MDC
NOA #): _____

"WINDOW" (GLAZED OPENING) COMPLIANCE

I, the licensed _____ (insert license type) whose name and signature appears below, do hereby certify that all glazed openings (including glass block and skylights) for the address above was installed in _____ (date or year of installation/construction), and confirm that the installation of the same was completed in accordance with all requirements of the Florida Building Code (check the appropriate code followed below) and meet all standards for testing for the following rating (select and initial *one* below):

- _____ "Large Missile Impact" rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996)
- _____ "Small Missile Impact" rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996 OR SSTD 12)

"WINDOW" (GLAZED OPENING) MATERIALS

Model: _____ Manufacturer _____

Specifications
(Including MDC
NOA #): _____

GARAGE DOOR COMPLIANCE

I, the licensed _____ (insert license type) whose name and signature appears below, do hereby certify that all garage doors for the address above was installed in _____ (date or year of installation/construction), and confirm that the installation of the same was completed in accordance with all requirements of the Florida Building Code (check the appropriate code followed below) and meet all standards for testing for the following rating (select and initial *one* below):

- _____ “Large Missile Impact” rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996)
- _____ “Small Missile Impact” rated (MDC PA 201, 202, & 203 OR FBC TAS 201, 202, & 203 OR ASTM E 1886 & ASTM E 1996 OR SSTD 12)

GARAGE DOOR MATERIALS

Model: _____ Manufacturer _____

Specifications _____

(Including MDC _____

NOA #): _____

PERMIT INFORMATION

_____ The permit application number for the work completed is _____, dated _____.

_____ The final inspection from the Building Department was conducted on _____.

_____ The permit was applied with the _____ (County/City) building department.

OR

_____ Initial here if no permit was obtained for this property for the work above.

LICENSURE

_____ I am a licensed _____ (insert license type) in good standing as defined in Section 489.105(3), Florida Statutes.

License Type & Number: _____

Date License Issued: _____

Current Copy of License MUST be attached to this Affidavit

SIGNATURES APPEAR ON THE FOLLOWING PAGE 3

I certify that the above information is true and accurate to the best of my knowledge as of the date shown below and I understand that false or fraudulent information with the intent to deceive will be reported under insurance fraud guidelines.

Signature: _____

Date: _____

Printed Name: _____

Company: _____

Address: _____

Address: _____

NOTARY

State of: _____

County of: _____

The above signature was affixed or attested before me, the undersigned notary, by a person (*check one*)

_____ Personally known to me by the name shown above

_____ Identified to me by government photo driver license or other government photo ID showing the name affixed above.

Done this _____ day of _____ 20 _____.

Notary Seal

Notary Signature