



CONSTRUCTION SERVICES DEPARTMENT
 P O BOX 3366
 West Palm Beach FL 33402
 Telephone: 561/805-6700
 FAX: 561/805-6676

"The Capital City of the Palm Beaches"

City of West Palm Beach
Application for Site Specific / Local Product Approval (circle one)

Address of Job: (Required) _____ Building Permit # (if known) _____

1. Application for Approval by Method 1 / Method 2 (circle one) for the following category of product:

2. Name of Applicant (Company) _____
3. Mailing Address _____
4. Telephone No. (_____) _____ Fax No. (_____) _____
5. E-Mail Address _____
6. Name and title of applicant's technical representative (if any)

Address (if different from address of applicant)

Telephone No. (_____) _____ Fax No. (_____) _____
 E-Mail Address _____
 Florida Professional Registration Number (if any) _____
 Florida Professional Firm Registration Number (if any) _____

7. Name of approved third party quality assurance entity (Listed by the State of Florida)

Address _____
 Telephone No. (_____) _____ Fax No. (_____) _____
 E-Mail Address _____
 Name of authorized representative _____
 Florida Professional Registration Number (if any) _____
 Florida Professional Firm Registration Number (if any) _____

8. Provide the following information on a separate sheet:
- Product name and model number (if any)
 - Name, address, reports, and applicable report numbers of: (Listed by the State of Florida)
 - Testing entity
 - Evaluation entity
 - Certification entity
 - Quality Assurance Agencies
 - List of requirements the product complies with including Code section numbers and reference standards
 - List of limitations on product's compliance and use
 - Installation instructions for the product

9. Other information
 Give any other information that may be of assistance to the local jurisdiction in considering this application.
 (Attach a separate sheet, if needed.)

10. Name and title of person authorized to sign on behalf of applicant

Signature _____

Date: _____

Rev. 4/27/2006

Form No.: 9B-72.130(5)
August 2003

Florida Building Commission
Validation Checklist For Local Product Approval
By Method 1 or 2

- 1. Verify the submission and completeness of product approval application form.

- 2. Verify the method of demonstrating compliance is from an entity approved by the Florida Building Commission.

- 3. Verify submission of the evaluator's certification of independence. Note: Evaluator may be a test lab, certification agency, evaluation entity or Florida Registered Architect or Florida Professional Engineer which produced the test report, certification listing or evaluation report required by Rule 9B-72.040(5).

- 4. Verify the method of demonstrating compliance is current and has not been suspended, recalled or revoked.

- 5. Verify the product has not been recalled or revoked by the Florida Building Commission.

- 6. Verify the Code sections and reference standards for which the evaluation demonstrates compliance.

- 7. Verify the method of demonstrating compliance indicates any limitations on the use of the product, as intended.

- 8. Verify manufacturer's installation instructions are provided, if required.

- 9. Verify that a quality assurance program audited by a Florida Building Commission approved third party quality assurance agency is in place.