

Place received stamp here

PRODUCT APPROVAL FORM

City of Daytona Beach

Provide **2 COPIES** of this completed form.

Jobsite Address _____ Contact Name _____

Phone _____ Email _____

Wind Exposure B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> (Check one)	Not Sure <input type="checkbox"/> Partially Enclosed <input type="checkbox"/> Enclosed <input type="checkbox"/> (Check one)
Wind Borne Debris Area (Check one if within 1 mile of the coast)	
Impact Resistant <input type="checkbox"/>	Shutters (Plywood) <input type="checkbox"/> Shutters (other type) <input type="checkbox"/> Less than 25% <input type="checkbox"/> Not Applicable <input type="checkbox"/>

Type	Manufacturer	Model/Series	Florida or Miami-Dade Product Approval Number
Exterior Doors			
Swinging			
“			
“			
Sliding			
Overhead (Garage)			
Windows			
Single Hung			
“			
“			
Double Hung			
“			
“			
Horizontal Slider			
“			
Casement			
Fixed			
Awning			
Mullion			
Shutters			
Other _____			
Other _____			
Other _____			

Please Read

**MANUFACTURER SPECIFICATION AND INSTALLATION SHEETS
MUST BE POSTED AT THE JOBSITE.**