



# City of Hialeah

501 Palm Ave, 2<sup>nd</sup> FL, Hialeah, Florida 33010

PH: 305.883.5825 FAX: 305.883.8082

[www.hialeahfl.gov](http://www.hialeahfl.gov)

## FLOORING PERMIT AFFIDAVIT

All commercial properties, including condominium units, are required to obtain a permit for flooring (tile, wood, marble). To obtain a permit for flooring please provide the following documents to the permit counter.

- 1) Permit Application
- 2) Flooring Permit Affidavit
- 3) Copy of the soundproofing manufacturer's literature with assembly value that complies with the Florida Building Code highlighted
- 4) Floor Plan indicating the area of work
- 5) Copy of Contract/Agreement between client and contractor

**NOTE: A soundproofing inspection is mandatory in the City of Hialeah**

Process # \_\_\_\_\_

Address of Property \_\_\_\_\_

Product/Material \_\_\_\_\_

I, \_\_\_\_\_, the qualifying agent # \_\_\_\_\_ for \_\_\_\_\_

hereby certify that all requirements of the Florida Building Code, Chapter 12, Section 1207 – Sound Transmission, will be met for the above mentioned location.

**1207.2 Air-borne sound.** Walls, partitions and floor/ceiling assemblies separating dwelling units from each other or from public or service areas shall have a sound transmission class (STC) of not less than 50 (45 if field tested) for air-borne noise when tested in accordance with ASTM E 90. Penetrations or openings in construction assemblies for piping; electrical devices; recessed cabinets; bathtubs; soffits; or heating, ventilating or exhaust ducts shall be sealed, lined, insulated or otherwise treated to maintain the required ratings. This requirement shall not apply to dwelling unit entrance doors; however, such doors shall be tight fitting to the frame and sill.

**1207.3 Structure-borne sound.** Floor/ceiling assemblies between dwelling units or between a dwelling unit and a public or service area within the structure shall have an impact insulation class (IIC) rating of not less than 50 (45 if field tested) when tested in accordance with ASTM E 492.

Signature: \_\_\_\_\_

Print Qualifier Name: \_\_\_\_\_

State of Florida, County of Miami-Dade

Sworn to and subscribed before me this \_\_\_\_\_, Day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_

(SEAL)

Personally known or Produced Identification Type of Identification \_\_\_\_\_