

RCF5 - FORTIFIED Home™ Roofing Compliance Form for Low Slope Roof Cover - New Roof or Re-Roof

All sections must be completed and signed by installing Roofing Contractor Responsible Party to confirm that roof products and installation meet FORTIFIED Roof requirements. **This form is not valid unless all sections are filled out, initialed and/or signed by Roofing Contractor**. Location and date stamped photos documenting roof installation must match RCF to achieve FORTIFIED designation.

1.	Gene	ral Information (complete a through h):	
	a.	FORTIFIED ID:	(Obtain from homeowner or FORTIFIED Evaluator)
	b.	Homeowner's Name:	
	c.	Property Street Address:	
	d.	City:	
	e.	State:	
	f.	ZIP:	<u>_</u>
	g.	County:	
	h.	Date of roof installation:	
2.	Permi	it information (complete a, b, c, d OR e):	
	a.	Permit Number:	
	b.	Dated:	
	c.	Issued by the	(County/City/State) Building Department
	d.	Date of final inspection by Building Department	
	e.	Initial here if no permit was issued	
3.	Site C	Conditions (complete a through f):	
	a.	Building Code and Edition:	
	b.	Design Wind Speed (minimum V _{ult} = 130 mph):	
	c.	Exposure Category: B or C D D	
	d.	Lowest slope of all roof areas with metal panel roof cover:_ NOTE: If there are multiple roof cover types on the same h for each roof cover type.	/12 ome, separate Roofing Compliance Forms must be submitted
	e.	Mean Roof Height (MRH):ft	
		MRH = ½ (height from ground to eave + height from ground	to ridge)
	f.	☐ Check here if site is within 3,000 ft of saltwater NOTE: If site is within 3,000 ft of saltwater, fasteners and of Requirements per Standard Detail E-G-1	connectors must comply with FORTIFIED Corrosion Protection



4. Required Design Uplift Pressures (complete a):

RCF5 – FORTIFIED Home™ Roofing Compliance Form for Low Slope Roof Cover – New Roof or Re-Roof

Zone 1:		a.	 a. Enter required ASD design uplift pressures corresponding to no less than Vult = 130 mph and Exposure C for the slope entered above. (For identification of Roof Zones, refer to FORTIFIED Standard Detail F-G-2 "Roof and Wall Zone Diagram"). 									VIRH and roof		
Area's MRH			Zor	ne 1:	:	psf	Zone 2:	p	osf	Zone 3: _	ps	f		
Area's MRH Area's slope; Zone 1: psf Zone 2: psf Zone 3: psf 5. Roof Sheathing (Decking) Type and Thickness (complete a through d): a. Sheathing type: (Check One/Write In)			If d	liffer	ent design pr	essures ha	ve been utilized	d for differe	ent ar	eas of the r	oof, note the	m below:		
5. Roof Sheathing (Decking) Type and Thickness (complete a through d): a. Sheathing type: (Check One/Write In) Plywood/OSB Wood board Other			Are	ea's I	MRH	_ Area's	slope;	Zone 1:	:	psf	Zone 2:	psf	Zone 3:	psf
a. Sheathing type: (check One/Write In) Plywood/OSB Wood board Other b. Sheathing thickness: c. Check here to confirm that sheathing thickness meets minimum FORTIFIED requirements per section 4.1 of the 2025 FORTIFIED Home Standard d. Check here if sheathing does NOT meet minimum FORTIFIED thickness requirements, and professional engineer has provided signed and sealed letter verifying sheathing is adequately rated for span and applicable design wind pressures 6. Roof Sheathing Attachment (complete a OR b): a. New Roof Sheathing: i. If wood board sheathing, enter nail type used and number of nails per board installed into each roof member intersection: Check here to confirm that wood new board sheathing attachments meets FORTIFIED requirements per F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" ii. If plywood/OSB sheathing, enter nail type used and installed nail spacing: Check here to confirm that new plywood/OSB sheathing attachment meets FORTIFIED requirements per F-RS-2 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): Enter nail type used and installed additional nail spacing: Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps"			Are	ea's I	MRH	_ Area's	slope;	Zone 1:	:	psf	Zone 2:	psf	Zone 3:	psf
b. Sheathing thickness: c.	5.	Roof	She	eath	ing (Decking	g) Type an	d Thickness (d	complete	a thr	ough d):				
c.		a.	She	eath	ing type: (Che	ck One/Write	In) Plywood	d/OSB □	Wo	ood board [☐ Other [J		
d.		b.	She	eath	ing thickness:									
provided signed and sealed letter verifying sheathing is adequately rated for span and applicable design wind pressures 6. Roof Sheathing Attachment (complete a OR b): a. New Roof Sheathing: i. If wood board sheathing, enter nail type used and number of nails per board installed into each roof member intersection: Check here to confirm that wood new board sheathing attachments meets FORTIFIED requirements per F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" ii. If plywood/OSB sheathing, enter nail type used and installed nail spacing: Check here to confirm that new plywood/OSB sheathing attachment meets FORTIFIED requirements per F-RS-2 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): Enter nail type used and installed additional nail spacing: Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps"		c.		-										
 a. New Roof Sheathing: If wood board sheathing, enter nail type used and number of nails per board installed into each roof member intersection: Check here to confirm that wood new board sheathing attachments meets FORTIFIED requirements per F-RS-1		d.				_						· ·	_	
 i. If wood board sheathing, enter nail type used and number of nails per board installed into each roof member intersection:	6.	Roof	She	eath	ing Attachm	ent <i>(com</i>	plete a OR b):							
intersection: Check here to confirm that wood new board sheathing attachments meets FORTIFIED requirements per F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" ii. If plywood/OSB sheathing, enter nail type used and installed nail spacing: Check here to confirm that new plywood/OSB sheathing attachment meets FORTIFIED requirements per F-RS-2 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): Enter nail type used and installed additional nail spacing: Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps"		a.	New Roof Sheathing:											
 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" ii. If plywood/OSB sheathing, enter nail type used and installed nail spacing: Check here to confirm that new plywood/OSB sheathing attachment meets FORTIFIED requirements per F-RS-2 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): Enter nail type used and installed additional nail spacing: Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" 														
 □ Check here to confirm that new plywood/OSB sheathing attachment meets FORTIFIED requirements per F-RS-2 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): □ Enter nail type used and installed additional nail spacing: □ Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): □ F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB □ Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" 									_			-	ements per <u>F-R</u>	- R <u>S-1</u>
 "New Construction Roof Deck Attachment - Structural Wood Panels" b. Re-Roof (Using Existing Sheathing): 			ii.	If pl	ywood/OSB s	heathing,	enter nail type	used and ii	nstalle	ed nail spac	ing:			
 Enter nail type used and installed additional nail spacing: Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" 												RTIFIED requ	uirements per <u>F</u>	
 □ Check here to confirm that existing sheathing has been re-nailed to meet FORTIFIED requirements per one of the following Standard Details (check the one that applies): □ F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB □ Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps" 		b.	Re-	Re-Roof (Using Existing Sheathing):										
following Standard Details (check the one that applies): F-RR-3 "Re-Nailing the Roof Deck (Wood Structural Panels)" for plywood/OSB Existing wood board sheathing has been re-nailed to meet the requirements of F-RS-1 "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps"					Enter nail ty	pe used an	d installed addi	tional nail	spacir	ng:				
Existing wood board sheathing has been re-nailed to meet the requirements of <u>F-RS-1</u> "Roof Deck Attachment - Sawn Lumber or Wood Board Roof Deck with No Gaps"											to meet FORT	TFIED requir	ements per on	e of the
Sawn Lumber or Wood Board Roof Deck with No Gaps"					F-RR-3 "Re-N	lailing the	Roof Deck (Woo	od Structur	ral Pai	<i>nels)"</i> for pl	ywood/OSB			
☐ <u>F-RR-5</u> "Fastening Wood Structural Panel Sheathing Over Existing 1x Roof Deck Boards with Gaps Over 1/8"					_		_				quirements of	f <u>F-RS-1</u> "Ro	of Deck Attachr	ment -
					F-RR-5 "Fast	ening Woo	od Structural Pa	nel Sheath	ning O	ver Existing	1x Roof Deck	Boards wit	h Gaps Over 1/	8"



RCF5 – FORTIFIED Home™ Roofing Compliance Form for Low Slope Roof Cover – New Roof or Re-Roof

7.	Drip E	dge: (complete a through c)								
a. Is Installed drip edge (edge flashing) code compliant material? Yes \Box No \Box					Yes 🗆 No 🗆						
	b.	b. Was NEW drip edge (edge flashing) installed? Yes \square No \square									
	C.		neck here to confirm that drip edge exte lled per <u>F-DE-1</u> <i>"Drip Edge Installation C</i>		_	roof a minimum of 2", and is					
8.	Flashi	ashing: (complete a through c)									
	a.	a. Is Installed flashing code compliant material? Yes \square No \square									
	b.	b. Was NEW flashing installed? Yes \square No \square									
	C.	c. Check here to confirm that new, corrosion-resistant flashing and fasteners in accordance with <u>F-G-1</u> "Corrosi Protection Requirements" have been installed at all roof interruptions and terminations per manufacturer specificatio as described in section 4.6 of <u>2025 FORTIFIED Home Standard</u> .									
9.	Low Slope Roof Covering (2:12 or greater) (complete a through I)										
	a.	a. Roof cover manufacturer and product name:									
	b.	Certified test report/Product approval number:									
	C.	c. Installed systems from Certified Test Report/Product Approval: Product approvals may include installation information for different systems. Enter design pressure rating for each installed system as applicable (enter up to 3):									
		Installed System 1: system number: design pressure rating of installed system 1: psf									
		Install	led System 2: system number:	design pres	sure rating of installed system 2	: psf					
		Install	led System 3: system number:	design pres	sure rating of installed system 3	: psf					
	d.	d. \square Check here to confirm that design pressure rating of installed system listed in certified test report/produ approval is equal to or greater than the required design uplift pressures in section 4.									
	e.	Impa	ct rating (Select one of the following):								
			UL 2218 Class 4 (acceptable for FORTIF	FIED Hail Supplem	nent)						
			FM 4473 with a Class 1-SH or 1-VSH (a	cceptable for FOI	RTIFIED Hail Supplement)						
			Other impact rating, cannot be verified	d, or no rating							
	f.	Fastener type and size:									
	g.	g. Fastener spacing (Select/complete the following as applicable):									
			Uniform spacing throughout the roof:								
			(if applicable) system 1: Zone 1 spacing	g:	Zone 2 spacing:	Zone 3 spacing:					
			(if applicable) system 2: Zone 1 spacing	g:	Zone 2 spacing:	Zone 3 spacing:					
			(if applicable) system 3: Zone 1 spacin (Refer to FORTIFIED F-G-2 "Roof and V	_		·					



RCF5 – FORTIFIED Home™ Roofing Compliance Form for Low Slope Roof Cover – New Roof or Re-Roof

	h.	h. \Box Check here to confirm that the required design pressure report(s) listed in section 4.8of the <u>2025 FORTIFIED</u> <u>Standard</u> for installed low slope roof cover system have been provided to FORTIFIED Evaluator					
	i.		eck here to confirm that low slope roof cover system is installed in accordance with submitted certified n pressure reports and all applicable manufacturer installation instructions				
LO. R	Roof	Mount	ed Attic Vents (complete a OR b OR c)				
	a.	☐ Ch	eck here if attic is sealed (i.e. no ventilation at soffits, gable end vents, or attic vents of any kind)				
	b.	□ Ch	eck here if attic is not sealed, and there are NO roof-mounted vents installed				
	c.	Enter	Enter type and rating of installed roof-mounted vents				
			Ridge vents manufacturer and model				
			off-ridge vents manufacturer and model				
			turbines manufacturer and model				
			Check here if all roof-mounted vents meet requirements of Florida Building Code TAS 100 (A) (required)				
			Check here to confirm that all roof-mounted vents are installed per the vent manufacturer's high wind installation requirements.				
L1. P	hoto	voltai	c (PV) panels <i>(complete a and b OR c)</i>				
	a.		eck here to confirm that PV panels were installed and anchored to the roof to resist site design wind in accordance with engineered anchorage details.				
	b.	Impa	ct rating (Select all that apply):				
			Flexible PV modules that are FM Approved for hail or meet FM 4476 that includes a Severe Hail rating (acceptable for FORTIFIED Hail Supplement)				
			Rigid PV modules that are FM Approved for hail or meet FM 4478 that includes a Class 4 rating (acceptable for FORTIFIED Hail Supplement)				
			Rigid modules that meet UL 1703 Standards for Flat-Plate Photovoltaic Modules and Panels (acceptable for FORTIFIED Hail Supplement)				
			Other impact rating, cannot be verified or no rating				
	c.	☐ Ch	eck here if there are no PV panels installed on the roof				
L2. S	kylig	hts (co	omplete a and b OR c OR d)				
	a.	a. Impact rating (Select all that apply):					
			ASTM E1886 with ASTM E1996 rated "B," "C," "D," or "E" (acceptable for FORTIFIED Hail Supplement)				
			ANSI/FM 4431 with Severe Hail Rating (acceptable for FORTIFIED Hail Supplement)				
			Current Miami-Dade County NOA (acceptable for FORTIFIED Hail Supplement)				
			other impact rating, cannot be verified, or no rating				
	b.		eck here to confirm that skylights and light tunnels have been installed per manufacturer's installation instructions gh-wind and/or to meet applicable design pressures ratings.				
	c.	☐ Ch	eck here if there are no skylights installed on the roof				
	d.	□ Fo	r re-roofing applications only, check here if skylight is existing and skylight ratings and installation are unknown				



RCF5 – FORTIFIED Home™ Roofing Compliance Form for Low Slope Roof Cover – New Roof or Re-Roof

13. Confirmation of Completion

I certify that I am the Installing Roofing Contractor Responsible Party licensed or authorized in the state of and that the above information is true and accurate as of the date shown below. I understand that false or fraudulent information with the intent to deceive will be reported under insurance fraud guidelines					
Printed Name:					
Company:					
Phone Number:					
Address:					
City:					
State:	ZIP:				
License or Registration Number:					
FORTIFIED Wise Roofing Contractor ID Number:					