



**STRUCTURAL GLAZING FAÇADE
 INSPECTION REPORT**

CASE REFERENCE NUMBER:

JURISDICTION NAME:

LICENSEE NAME: _____

TITLE: _____

ADDRESS: _____

SIGNATURE: _____

*Use separate sheets for additional responses by referencing the report section number.

1. DESCRIPTION OF BUILDING (FOR THRESHOLD BUILDINGS ONLY¹)	
a. Name on Title:	
b. Building Street Address:	Bldg. #:
c. Legal Description:	Attached:
d. Owner's Name:	
e. Owner's Mailing Address:	
f. Folio Number of Property on which Building is Located:	
g. Building Code Occupancy Classification:	
h. Present Use:	
i. General Description of building:	
j. Total Number of Stories:	
k. Provide an aerial of the property identifying the building being certified on a separate sheet.	Attached:
l. Additional Comments:	

2. GENERAL EXAMINATION

a. Date of Notice of Required Inspection:

b. Date(s) of actual inspection:

c. Name, license number, discipline of practice, and qualifications of licensee submitting report:

d. Date(s) of previous structural glazing façade inspection:

Not Available:

1. Explanation:

e. Glass type, Impact rating (impact/non-impact), and adhesive/sealant type:

PROVIDE PHOTO 2e

Impact Rating:

Adhesive/Sealant Type:

1. Description:

f. Condition of curtain wall frame: (Good, Fair, Poor, Not Visible) Select One:

PROVIDE PHOTO 2f

1. Classify/Describe:

g. Are Any Repairs Required? (YES/NO): Select:

1. If required, describe remedial work necessary:

h. Evaluation Level 1: Perform all the following evaluation procedures: (per ASTM C1394 and as modified by the Miami-Dade Guidelines)	<input type="checkbox"/> Not Applicable
1. Review project documentation, including original design drawings, shop drawings, mock-up testing report, and previous evaluation reports. Review original SSG design calculations, or if not available, perform calculations to determine stress on sealant from thermal and wind loading;	<input type="checkbox"/> Completed
2. Interview building management and maintenance personnel and tenants regarding breakage history of lites and other distress. Map findings on elevation drawings, and assess whether a pattern exists; and	<input type="checkbox"/> Completed
3. Perform a cursory visual assessment from the interior, and from the exterior ground, roofs, and balconies.	<input type="checkbox"/> Completed
i. Evaluation Level 2: Perform the following, plus all the procedures of Level 1 (unless a Level 1 evaluation has been performed previously and the documentation recommended to be kept by the owner is available.): (per ASTM C1394 and as modified by the Miami-Dade Guidelines)	<input type="checkbox"/> Not Applicable
1. Perform a close-up visual evaluation from the interior;	<input type="checkbox"/> Completed
2. Observe weatherseal joints and structural joints from the exterior. Document distress and assess whether a pattern exists. Utilize suspended platform or lift to perform the close-up examination story(ies) in section 4 below. Choose scaffold “drops” to represent the entire building, including different wind zones, elevations, exposures, details, and construction times; and	<input type="checkbox"/> Completed
3. Qualitatively measure the weatherseal adhesion by pressing in with a thumb. Alternatively, semi-quantitative adhesion strength data can be obtained using a Chatalon spring load indicator or pulling cut tabs to failure and measuring the elongation.	<input type="checkbox"/> Completed
j. Evaluation Level 3: Perform all the following procedures under the field supervision of a qualified licensed professional, plus the procedures of Levels 1 and 2 (except that Level 1 may be eliminated if it has been performed previously and the documentation recommended to be kept by the owner is available.: (per ASTM C1394 and as modified by the Miami-Dade Guidelines) Using a TAS301 certified laboratory.	<input type="checkbox"/> Not Applicable
1. Consider whether the existing conditions indicate that evaluation of all lites is warranted. If not, develop a rational approach for evaluating a representative sample of the total lites. There is a trade-off between accuracy and the cost of the study. For quantitative tests and measurements, it is recommended that the number of specimens or test be selected to ensure achieving a least a 90% confidence interval with a maximum 20% margin of error. Different levels of study may require stricter parameters; and	<input type="checkbox"/> Completed
2. Perform in-situ load testing on selected lites, either by uniform load (air pressure) or point load (suctions cups). One applicable test method is described in ASTM C1392.	<input type="checkbox"/> Completed
Any Comments:	

c. Specific SSG Condition: <i>“Safe”, “Safe but repair or maintenance required”, or “Unsafe”</i>	PROVIDE PHOTO 4c
Select Condition:	
1. Condition/ Explanation:	

5. TESTING (for Level 3, if applicable, as per ASTM C1392 or ASTM E330)	Not Applicable:
a. Total Number of Panels tested:	PROVIDE PHOTO 5a
1. Describe Results:	
b. Attach copy of the test report as prescribe in ASTM C1392 or ASTM E330 by a TAS 301 certified laboratory containing the performance results of each test: <input type="checkbox"/>	
c. Name of TAS301 certified laboratory:	

6. MAP OF BUILDING FAÇADE CHECKLIST (Attach Separate Illustration)	PROVIDE PHOTO 6
a. Provide drawing of all building elevations: <input type="checkbox"/>	
b. Identify all stories: <input type="checkbox"/>	
c. Highlight the story selected within each six (6) stories or portion thereof: <input type="checkbox"/>	
d. Highlight all tested panels (for Level 3 test, if applicable): <input type="checkbox"/>	Not Applicable:
e. Identify all repairs/maintenance and/or unsafe locations (Attach separate document): <input type="checkbox"/>	

¹ THRESHOLD BUILDING: In accordance with Florida Statute, any building which is greater than 3 stories or 50 feet in height, or which has an assembly occupancy classification that exceeds 5,000 square feet in area and an occupant content of greater than 500 persons.