



**PRODUCT CONTROL APPLICATION FOR
 CERTIFICATE OF COMPETENCY**

This application is required for each manufacturer/fabricator of construction materials, product and/or assemblies and for Trade Associations. An application is required for each plant location. Please type or print all the information requested and sign the application in the space provided.

APPLICANT'S INFORMATION

- (1) Legal Name of Applicant: _____
(The name of the applicant must be the legal name. Trade or D/B/A names are not allowed.)
- (2) Mailing Address: _____
- (3) City, State, Zip Code: _____
- (4) Name & Title of Contact Person: _____
- (5) Telephone / Fax Number: _____
- (6) Email address: _____
- (7) Name of Product, System or Category: _____
- (8) Manufacturing Location: _____
- (9) City, State, Zip Code: _____
- (10) Telephone / Fax Number: _____

PURPOSE OF APPLICATION

(11) I am applying as: **Association** or **Manufacturer/Fabricator**
 (Check only the applicable box)

(12) List the name(s) of the individual(s) in charge of the quality control program and the name(s) of the engineer(s) in charge of the follow up services (Please include their titles):

(13) Current Certificate Number: _____
(Provide Existing Number and expiration Date)

(14) Certifications: _____
(Provide all relevant certifications regarding product(s) and/ or Quality Assurance)

(15) Fee Enclosed: _____ **Make check payable to "Miami-Dade County"**
Fees are non-refundable The legal name of the applicant must be printed on the check.

THIS SPACE IS FOR THE USE OF THE DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES ONLY

Application Number: _____	Date Received: _____
Check Number: _____	Fee Amount: _____
Process Number: _____	Special Project: _____

Time Stamp

FILING INSTRUCTIONS

Applications for the issuance of Certificates of Competency (CC) must be completely filled out and signed by the manufacturer/fabricator of construction materials or product and/or system, wishing to supply said material, product and/or system for possible use in the Miami-Dade County jurisdiction, where said material, product and/or system does not have and/or it is not required to have an NOA; or by a trade association wishing to be approved to participate in a testing sharing program for its manufacturer members.

The applicant must submit with this application all documents listed in the applicable checklist(s), along with the applicable fee. The names of individual in charge of the quality control program and the name(s) of engineer(s) performing follow-up services are required to be listed on this application. If applicable, provide all relevant certifications regarding product(s), systems of construction and/ or Quality Assurance Program. A copy of the certification(s) must be submitted with this application. Also, if applicable, when the applicant has a contractual agreement with a third-party regarding quality assurance audits, evidence of these audits must be submitted to our Office upon request.

See the 'Product Control Application for NOAs and Laboratory Certification' and the 'Product Control Approval Application for Hourly Rate Services,' for additional instructions regarding the Product Control Approval Process.

All Certificates of Competency (CC) expire on September 30th.

FEE SCHEDULE

A)	Application issuance of an NOA		
	1. New application, including those under Private Labeling Agreement valid for 5 years.....		\$4,300.00
	2. Revision valid up to expiration date of original NOA.....		\$1,612.50
	3. Renewal , prior to expiration date valid for 5 years.....		\$1,612.50
	4. Renewal after expiration date valid for 5 years.....		\$4,300.00
B)	Application for issuance of Laboratory Certificate		
	1. New Application valid for 5 years.....		\$4,300.00
	2. Revision valid up to expiration date of original Certificate.....		\$1,612.50
	3. Renewal, prior to expiration date valid for 5 years.....		\$1,612.50
	4. Renewal after expiration date valid for 5 years.....		\$4,300.00
C)	Review of Distributor Agreement.....		\$1,612.50
D)	Other fees		
	1. Special Project to include: (Use application for Hourly Rate Services).....		\$80.63
	a) One-time Approval		per hour
	b) Review of Proposal		
	c) Review to create criteria		
	2. Certificate of Competency payable every year (CC issued annually).....		\$537.50
	3. Review of alternate type of products, materials or method of design valid for one year.....		\$4,300.00

Note: This office is authorized to collect:

- a) Travel expenses incurred in the process of conducting inspections.
- b) Recording fees from the applicant in connection with those matters to be recorded.
- c) A fee based on actual staff time and cost for matters that are extraneous to its activities.

ACKNOWLEDGMENT

You agree and acknowledge that the information provided with this submittal is true and correct. You acknowledge and understand that Miami-Dade County is a political subdivision of the State of Florida. Therefore, any information provided to Miami-Dade County, including any information provided with this submittal and/or related to the approval and/or acceptance sought in this submittal, is subject to public inspection and release as set forth in Florida's Public Records Law, Florida Statutes § 119, *et seq.* You further acknowledge and understand that Miami-Dade County, through its departments, employees and agents, is authorized to seek additional information related to this application and/or to conduct inspections of your facilities, laboratories, plants, physical locations and/or processes related to the approval and/or acceptance sought in this submittal. Drawings and/or other design information not included in the NOA may be subject to federal copyright protection. Additionally, pursuant to Florida Statutes § 815.045, trade secret information as defined and provided for in Florida statutory law is confidential and exempt from public records law. Therefore, you agree to clearly mark any trade secret information provided to Miami-Dade County as "CONFIDENTIAL" or "TRADE SECRET" information. Additionally, at your request, Miami-Dade County shall treat photographs taken during inspections at your facilities, laboratories, plants or any other physical locations as trade secret information. The Miami-Dade County Department of Regulatory Resources shall notify you when a public records request has been made to review the information in Miami-Dade County's files. Copyrighted material may not be duplicated or knowingly made available for duplication without the permission of the holder of the copyright except if otherwise required by law. Information and/or documents submitted to and/or in the possession of Miami-Dade County that are designated or clearly marked as trade secret or confidential information will be treated as such by Miami-Dade County and withheld and exempt from public records disclosure requirements as set forth in Florida Statutes § 815.045. You agree to indemnify, defend and hold Miami-Dade County harmless for any public records lawsuits, causes of action, claims for the recovery of attorneys' fees, or legal disputes arising out of or related to your designations of information and documents as trade secret confidential information. You agree that you will not subject Miami-Dade County, its departments, agencies or employees to any non-disclosure or confidentiality agreements beyond the recitations set forth in this Acknowledgement. Your signature below is your agreement to all the conditions and terms set forth in this Acknowledgement.

Print Name and Title of Authorized Representative
(Must be an official of the company)

Signature of Authorized Representative

Date