PROPOSED AMENDMENT TO
Broward County Administrative Provisions
Chapter I Florida Building Code

SUBMIT TO: BROWARD COUNTY BOARD OF RULES AND APPEALS
One North University Drive - Suite 3500 B - Plantation, Fl. 33324

Page ______ Code Section _______ Date: ________
Name / Organization: ____________________________________________________________
Address: _____________________________________________________________________
Email: _______________________________________________________________________

Check One:
☐ Revise Section
☐ Add New Section
☐ Delete Section
☐ Delete Section and substitute with new Section
☐ Delete Section without substitution

Proposed Change:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

(If you need additional space , please add a 2nd page)

Record of Action:
Committee: ____________________________________________________________________
Approved _______ Approved as revised _______ Disapproved _______
Date: __/__/_____

Board:
Approved _______ Approved as revised _______ Disapproved _______
Date: __/__/_____

Continue in Page 2
Fiscal Impact Statement (Provide documentation of the costs and benefits of the proposed modifications to the code for each of the following entities. Cost data should be accompanied by a list of assumptions and supporting documentation. Explain expected benefits.

a. Impact to local entity relative to enforcement of code:

b. Impact to building and property owners relative to cost of compliance with code:

c. Impact to industry relative to cost of compliance with code: (if applicable)

Rationale (Provide an explanation of why you would like this proposed modification)