

## Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy

Inspection Date: 3 - 9 - 2017						
Owner Information						
Owner Name: Forest Park 1 Condo's	Contact Person:					
Address: Pool House	Home Phone:					
City: Dunedin	Zip: 34698	Work Phone:				
County: Pinellas		Cell Phone:				
Insurance Company:	Policy #:					
Year of Home: Approx. 1988	# of Stories: One	Email:				

NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.

- 1. <u>Building Code</u>: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
  - A. Built in compliance with the FBC: Year Built \_\_\_\_\_. For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MM/DD/YYYY)
  - B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built . For homes built in 1994, 1995, and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)
  - C. Unknown or does not meet the requirements of Answer "A" or "B"
- <u>Roof Covering:</u> Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified.

2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
1. Asphalt/Fiberglass Shingle	7 - 15 - 2016			
2. Concrete/Clay Tile				
3. Metal				
4. Built Up				
5. Membrane				
6. Other				

- A. All roof coverings listed above meet the FBC with a FBC or Miami-Dade Product Approval listing current at time of installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2004 or later.
  - B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later.
  - C. One or more roof coverings do not meet the requirements of Answer "A" or "B".
- D. No roof coverings meet the requirements of Answer "A" or "B".
- 3. Roof Deck Attachment: What is the weakest form of roof deck attachment?

A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by staples or 6d nails spaced at 6" along the edge and 12" in the field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that has an equivalent mean uplift less than that required for Options B or C below.

- B. Plywood/OSB roof sheathing with a minimum thickness of 7/16" inch attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by 8d common nails spaced a maximum of 12" inches in the field.-OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.
- C. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a maximum of 24"inches o.c.) by 8d common nails spaced a maximum of 6" inches in the field. -OR- Dimensional lumber/Tongue & Groove decking with a minimum of 2 nails per board (or 1 nail per board if each board is equal to or less than 6 inches in width). -OR-
- Inspectors Initials <u>zw</u> Property Address Pool House

\*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.



in	accu	racies found o	orm is valid for up to five (5) years provided no material changes have been made to the structure or on the form. 01/12) Adopted by Rule 69O-170.0155 Top Shelf Home Inspections LLC
In	spec	tors Initials <u></u>	Property Address Pool House
6.		<ul><li>A. SWR (als sheathing dwelling 1</li><li>B. No SWR.</li></ul>	<b>r Resistance (SWR)</b> : (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss. or undetermined.
	X	C. Other Roo	less than 2:12. Roof area with slope less than 2:12sq ft; Total roof areasq ftofAny roof that does not qualify as either (A) or (B) above.sq ft
		B. Flat Roof	•
		A. Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
5.		of Geometry:	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
	H	H. No attic a	
		F. Other:	or unidentified
		E. Structural	
			Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		D. Double W	Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>
		D. Dealds W	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
		C. Single Wr	Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails. raps
	Д		Metal connectors that do not wrap over the top of the truss/rafter, or
		B. Clips	Secured to truss/rafter with a minimum of three (3) nails, <b>and</b> Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a <sup>1</sup> / <sub>2</sub> " gap from the blocking or truss/rafter <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
	Min		ons to qualify for categories B, C, or D. All visible metal connectors are:
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
			Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or
4.			<b>achment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		G. No attic a	ccess.
		F. Unknown	or unidentified.
		D. Reinforce	d Concrete Roof Deck.
NAC	Ξ£		of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least



**Opening Protection:** What is the <u>weakest</u> form of wind borne debris protection installed on the structure? **First**, use the table to determine the weakest form of protection for each category of opening. **Second**, (a) check one answer below (A, B, C, N, or X) based upon the lowest protection level for ALL Glazed openings **and** (b) check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.

Opening Protection Level Chart		Glazed Openings				Non-Glazed Openings	
openi form o	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest form of protection (lowest row) for Non-Glazed openings.	Windows or Entry Doors		Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		×	×	X		X
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
N	Other protective coverings that cannot be identified as A, B, or C						
х	No Windborne Debris Protection	X				X	

A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above).

- Miami-Dade County PA 201, 202, and 203
- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996
- Southern Standards Technical Document (SSTD) 12
- For Skylights Only: ASTM E 1886 and ASTM E 1996
- For Garage Doors Only: ANSI/DASMA 115

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above

A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above

**B. Exterior Opening Protection-** Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level B in the table above):

- ASTM E 1886 <u>and</u> ASTM E 1996 (Large Missile 4.5 lb.)
- SSTD 12 (Large Missile 4 lb. to 8 lb.)
- For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile 2 to 4.5 lb.)

B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist

B.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X in the table above

B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above

C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).

C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist

C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level N or X in the table above

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials <u>DW</u> Property Address <u>Pool House</u>

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Top Shelf Home Inspections LLC



N. Exterior Opening Protection (unverified shutter s					
protective coverings not meeting the requirements of Ar		stems the	at appear to meet Answer "A" or "B"		
with no documentation of compliance (Level N in the table above). N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist					
N.2 One or More Non-Glazed openings classified as Level I table above					
N.3 One or More Non-Glazed openings is classified as Leve	1 X in the table above				
X. None or Some Glazed Openings One or more Glaze	d openings classified and L	evel X i	n the table above.		
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	-				
Qualified Inspector Name: Dan Weir	License Type: Home Inspec	tor	License or Certificate #: H.I. #385		
Inspection Company: Top Shelf Home Inspections LLC		Phone:	727-459-7033		
Qualified Inspector – I hold an active license as a	(check one)				
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	s who has completed the statut		per of hours of hurricane mitigation		
Building code inspector certified under Section 468.607, Florida	Statutes.				
General, building or residential contractor licensed under Section					
Professional engineer licensed under Section 471.015, Florida Sta					
Professional architect licensed under Section 481.213, Florida St					
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes		ons to proj	perly complete a uniform mitigation		
Individuals other than licensed contractors licensed under Station 471 015. Elavida Station wast inspect the station					
under Section 471.015, Florida Statues, must inspect the str Licensees under s.471.015 or s.489.111 may authorize a dire					
experience to conduct a mitigation verification inspection.			······································		
I, Dan Weir am a qualified inspector a	nd I personally performed	l the ins	pection or ( <i>licensed</i>		
(print name)	N/A	``			
contractors and professional engineers only) I had my emplo	yee ((print name (		rform the inspection ctor)		
and I agree to be responsible for his/her work.	u u		,		
Qualified Inspector Signature: Dan Weir	Date: <u>3 -</u>	9 - 201	7		
An individual or entity who knowingly or through gross ne					
subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (See					
certifies this form shall be directly liable for the misconduct					
performed the inspection.					
Homeowner to complete: I certify that the named vertice residence identified on this form and that proof of identification	d by PDFfiller or his or her emp	oloyee di Authori	id perform an inspection of the zed Representative.		
Signature: Dawn Bringe Date: 3 - 9 - 2017					
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to whof the first degree. (Section 627.711(7), Florida Statutes)					
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	y and cannot be used to co	ertify an	y product or construction feature		
Inspectors Initials Property Address Pool Hou	se				
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ded no material changes l	have bee	en made to the structure or		
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155			Page 4 of 4		
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Shell Home inspections L τυμ



Front



Front - 2





Rear



Rear - 2



Roof - 1



Roof - 2



Clip



Nail Spacing



Nail Spacing - 2



Plywood Width



Nail Length



SWR