Uniform Mitigation Verification Inspection Form

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

Inspection Date: Jan 9, 2015								
Owner Information								
Owner	Name: LONGWOOD COND ASS	Contact Person: LONGWOOD COND ASSN INC						
Address: 11811 AVENUE OF THE PGA BUILDING 7				Home Phone: 561-3	Home Phone: 561-371-3260			
City:	PALM BEACH GARDENS	Zip: <b>33418</b>		Work Phone:				
County	· PALM BEACH			Cell Phone:				
Insurar	nce Company:	·		Policy #:				
Year o	f Home: <b>1970</b>	# of Stories: 1		Email:				
accom	: Any documentation used in vapany this form. At least one pho 17. The insurer may ask addition	otograph must accompa	any this form to valida	ate each attribute mark	ed in question			
	Building Code: 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)//////							
$\checkmark$	C. Unknown or does not meet the			ation Date (MM/DD/1111)		-		
OR	2. Roof Covering: 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.							
	-	rmit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance	Permit #		
	☐ 1. Asphalt/Fiberglass Shingle							
		_//						
	_							
				2006				
	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 de	o not meet the requireme	ents of Answer "A" or	"B".				
V	D. No roof coverings meet the re	quirements of Answer "	A" or "B".					
3. <b>Ro</b> o	of Deck Attachment: What is the	weakest form of roof d	eck 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 fieldOR- Batten decking supporting wood shakes or wood shinglesOR- 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 fieldOR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.							
V	C. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common n decking with a minimum of 2 na Any system of screws, nails, adh	ails spaced a maximum ils per board (or 1 nail p	of 6" inches in the field per board if each board	dOR- Dimensional lum is equal to or less than 6	nber/Tongue & inches in widtl	Groove h)OR-		
Inspec	tors Initials <u>MC</u> Property Add	iress 11811 AVENUE C	F THE PGA BUIL	DING 7				

\*This verification form is valid for up to five (5) years provided no material changes have been made to the structureor inaccuracies OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 found on the form Page 1 of 1

		or greater in 182 psf.	resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		1	rced Concrete Roof Deck.
		E. Other:	
			vn or unidentified.
		G. No atti	
1			
4.		et of the ins	<b>Attachment:</b> What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within ide or outside corner of the roof in determination of WEAKEST type)
		A. Toe Na	
			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
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mir	nimal condi	tions to qualify for categories B, C, or D. All visible metal connectors are:
			Secured to truss/rafter with a minimum of three (3) nails, <b>and</b>
		✓	
	$\checkmark$	B. Clips	
		V	Metal connectors that do not wrap over the top of the truss/rafter, or
			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.
		C. Single	Wraps
			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.
		D. Double	Wraps
			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>
			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.
		E. Structu	ral Anchor bolts structurally connected or reinforced concrete roof.
		F. Other:	
		G. Unknow	wn or unidentified
		H. No attic	caccess
5.			<u>v</u> : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of re over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A. Hip Ro	of Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
		B. Flat Ro	Total length of non-hip features: feet; Total roof system perimeter: feet
	,		less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft
	V	C. Other I	Roof Any roof that does not qualify as either (A) or (B) above.
6.		A. SWR (a sheathi	ter Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the ng or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the g from water intrusion in the event of roof covering loss.
			vn or undetermined.
Ins	spec		MC Property Address 11811 AVENUE OF THE PGA BUILDING 7
			form is valid for up to five (5) years provided no metarial changes have been made to the structure or
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7. **Opening Protection:** What is the **weakest** 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. Non-Glazed **Opening Protection Level Chart Glazed Openings** Openings Place an "X" in each row to identify all forms of protection in use for each Windows opening type. Check only one answer below (A thru X), based on the weakest Garage Glass Entry Garage or Entry Skylights form of protection (lowest row) for any of the Glazed openings and indicate **Doors Block Doors Doors** Doors the weakest form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure 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	
	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 and 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						
□ <u>(</u>	☐ <u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> 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						

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

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

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N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A				
with no documentation of compliance (Level N in the	able above).			
☐ N.1 All Non-Glazed openings classified as Level A, B, C,	or N in the table above, or no	Non-Glaz	ed openings exist	
☐ N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no	Non-Glaze	ed openings classified as Level X in the	
☐ N.3 One or More Non-Glazed openings is classified as Le	vel X in the table above			
X. None or Some Glazed Openings One or more Glazed	zed openings classified and	Level X	in the table above.	
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, prov				
Qualified Inspector Name:  Michael Casella	License Type: Home Inspec	tor	License or Certificate #: HI 432	
Inspection Company:	Tionie mspec	Phone:		
		5	61-479-1810	
Qualified Inspector – I hold an active license as a	• '			
Home inspector licensed under Section 468.8314, Florida Statutraining approved by the Construction Industry Licensing Board			mber of hours of hurricane mitigation	
☐ Building code inspector certified under Section 468.607, Florid	la Statutes.			
☐ General, building or residential contractor licensed under Secti	on 489.111, Florida Statutes.			
☐ Professional engineer licensed under Section 471.015, Florida	Statutes.			
☐ Professional architect licensed under Section 481.213, Florida	Statutes.			
Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.				
under Section 471.015, Florida Statues, must inspect the structures personally and not through employees or other persons.  Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection.  I, Michael Casella am a qualified inspector and I personally performed the inspection or (licensed (print name)  contractors and professional engineers only) I had my employee (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
Qualified Inspector Signature:	Date: Jan	9, 2015		
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection.				
Homeowner to complete: I certify that the named Qualifier residence identified on this form and that proof of identification.				
Signature: Date: Jan 9, 2015				
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)				
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	aly and cannot be used to	certify a	ny product or construction feature	
Inspectors Initials MC Property Address 11811 AVENU	E OF THE PGA BUILD	DING 7		
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inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155



**FRONT ELEVATION** 



**RIGHT SIDE ELEVATION** 



**REAR ELEVATION** 



**LEFT SIDE ELEVATION** 



**#3 ROOF DECK ATTACHMENT** 6" X 6" NAIL SPACING



**#3 ROOF DECK ATTACHMENT** 8d NAILS

11811 AVENUE OF THE PGA

**BUILDING 7** 



**#4 ROOF TO WALL ATTACHMENT**FACE SIDE



**#4 ROOF TO WALL ATTACHMENT**OPPOSITE SIDE



TRUSS/RAFTER SPACING



**ROOF GEOMETRY** 



**WINDOWS ARE NOT PROTECTED** 



WINDOWS ARE NOT PROTECTED