Uniform Mitigation Verification Inspection Form inspectfl@comcast.net

Maintain a copy of the	nis form and any documentation provid	ed with the insurance policy		
Inspection Date: Jan 27, 2020				
Owner Information				
Owner Name: LONGWOOD CONDO ASSOCIATION		Contact Person: LONGWOOD CONDO ASSOCIATION		
Address: 11811 AVE OF PGA BUILDING #7		Home Phone:		
City: PALM BEACH GARDENS	Zip: <b>33418</b>	Work Phone:		
County: PALM BEACH		Cell Phone:		
Insurance Company:		Policy #:		
Year of Home: 1970	# of Stories: 3	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. 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 B	roward counties), South Fl	orida Building Code (SFF	3C-94)?	
		th the FBC: Year Builtlding Permit Application l		lt in 2002/2003 provide a p	permit application with
				. For homes built in lication Date (MM/DD/YYYY)	
	C. Unknown or does not a	neet the requirements of A	answer "A" or "B"		
2.	Roof Covering: Select all roo OR Year of Original Installation covering identified.				
	2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	Provided for Compliance
	1. Asphalt/Fiberglass Shingle	/		2018	□ PERMIT BELOW
	2. Concrete/Clay Tile	/			
	☐ 3. Metal	/			
	4. Built Up	/			
	5. Membrane	/			
	6. Other FLAT ROLLED	/		2018	□ PERMIT BELOW
				Product Approval listing cuhe roof is original and built	
				time of installation OR (for original and built in 1997 or	
		rings do not meet the requ		or "B".	
	☐ D. No roof coverings mee	t the requirements of Answ	wer "A" or "B".		
3.					
	by staples or 6d nails spa shinglesOR- Any system	ced at 6" along the edge a	and 12" in the fieldOR- es, other deck fastening sy	russ/rafter (spaced a maxin Batten decking supporting stem or truss/rafter spacing	g wood shakes or wood
	24"inches o.c.) by 8d com other deck fastening syste	mon nails spaced a maxin	num of 12" inches in the f that is shown to have an	ched to the roof truss/rafter fieldOR- Any system of so equivalent or greater resist 103 psf.	crews, nails, adhesives,
				ched to the roof truss/rafter	

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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-Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent

### **Insurance Inspection Services**

		or greater re 182 psf.	sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		-	ed Concrete Roof Deck.
			n or unidentified.
		G. No attic	access.
4.	Roo	eet of the insid	tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within de or outside corner of the roof in determination of WEAKEST type)
		A. Toe Nail	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 conditi	ions to qualify for categories B, C, or D. All visible metal connectors are:
	1711	<b>✓</b>	Secured to truss/rafter with a minimum of three (3) nails, <b>and</b>
		<b>∠</b>	Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" 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.
	<b>√</b>	B. Clips	
		$\checkmark$	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 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.
	Ш	D. Double V	•
			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. Structura	Anchor bolts structurally connected or reinforced concrete roof.
		F. Other: _	
			n or unidentified
		H. No attic	access
5.			What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of e over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A. Hip Root	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.  Total length of non-hip features: feet; Total roof system perimeter: feet
		B. Flat Room	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft
	$\checkmark$	C. Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6	Soc	ondory Wat	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
0.		A. SWR (al sheathing dwelling	so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g 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.
	<b>√</b>	B. No SWR C. Unknown	n or undetermined.
_			THE STATE OF SEA PHILIPING "T
ſn	spec	tors Initials <sub>-</sub>	MC Property Address 11811 AVE OF PGA BUILDING #7

<sup>\*</sup>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.

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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.

Opening Protection Level Chart  Place an "X" in each row to identify all forms of protection in use for each opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings.		Glazed Openings				Non-Glazed Openings	
		Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		X	X	$\times$		$\times$
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

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

- 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.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 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
  - ☐ 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

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☐ N. Exterior Opening Protection (unverified shutter s	systems with no documents	ntion) All Glazed openings are protected with			
protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the t	nswer "A", "B", or C" or sys	stems that appear to meet Answer "A" or "B"			
□ N.1 All Non-Glazed openings classified as Level A, B, C,	or N in the table above, or no N	Non-Glazed openings exist			
☐ N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no N	Ion-Glazed openings classified as Level X in the			
N.3 One or More Non-Glazed openings is classified as Lev	vel X in the table above				
X. None or Some Glazed Openings One or more Glazed		Level X in the table above.			
1/					
MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, provi	~				
Qualified Inspector Name:  Michael Casella	License Type:  Home Inspect	License or Certificate #:  HI 432			
Inspection Company: Insurance Inspection Services		Phone: <b>561-479-1810</b>			
Qualified Inspector – I hold an active license as a	: (check one)				
Home inspector licensed under Section 468.8314, Florida Statu training approved by the Construction Industry Licensing Board	tes who has completed the stat				
☐ Building code inspector certified under Section 468.607, Florid					
General, building or residential contractor licensed under Section	on 489.111, Florida Statutes.				
Professional engineer licensed under Section 471.015, Florida S	Statutes.				
Professional architect licensed under Section 481.213, Florida S					
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.					
Individuals other than licensed contractors licensed under	Section 489.111, Florida S	tatutes, or professional engineer licensed			
under Section 471.015, Florida Statues, must inspect the st					
Licensees under s.471.015 or s.489.111 may authorize a direxperience to conduct a mitigation verification inspection.	rect employee who possesse	es the requisite skill, knowledge, and			
I, Michael Casella am a qualified inspector	and I personally performe	d the inspection or (licensed			
(print name)  contractors and professional engineers only) I had my empl	oyee (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				
and I agree to be responsible for his/her work,	•	• ,			
Qualified Inspector Signature:	Date: Jan 2	7, 2020			
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. (S	Section 627.711(4)-(7), Flor	ida Statutes) The Qualified Inspector who			
certifies this form shall be directly liable for the misconduc	ct of employees as if the au	thorized mitigation inspector personally			
performed the inspection.					
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification					
Signature: Date: Jan 27, 2020					
		<del></del>			
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 on as offering protection from hurricanes.	ly and cannot be used to co	ertify any product or construction feature			
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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



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



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



TRUSS/RAFTER SPACING



**ROOF COVERING** 

# **ROOF GEOMETRY**

Structu	ral Element for Build
1. Name	LONGWOOL
2. Area	1204
3. Year Built	1970
4. No of Bedroom(s)	2
5. No of Bath(s)	2
6. No of Half Bath(s)	

## **YEAR BUILT**



**#9 OPENING PROTECTION** 

**DOORS NOT TO CODE** 



**#9 OPENING PROTECTION** 

WINDOWS ARE NOT PROTECTED



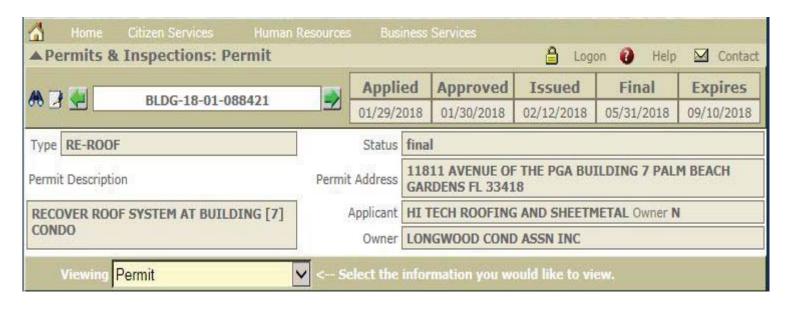
**#9 OPENING PROTECTION** 

**WINDOWS ARE NOT PROTECTED** 



**#9 OPENING PROTECTION** 

WINDOWS ARE NOT PROTECTED



#### **ROOF PERMIT VERIFICATION**