Uniform Mitigation Verification Inspection Form

	this form and any doc	umentation provid	ied with the mstrance	poncy				
Inspection Date: 01/25/2018								
Owner Information			la					
Owner Name: Marsh Landing I bldg 13			Contact Person: Jame Mordaunt- PM Home Phone:					
Address: 22973-75-77-79 Lone Oak E								
City: Estero	Zip: 339	928	Work Phone:					
County: LEE			Cell Phone: 239-513-9	433 ext 7				
Insurance Company:			Policy #:					
Year of Home: 1997 # of Stories: 2			Email:					
NOTE: Any documentation used in va accompany this form. At least one pho though 7. The insurer may ask addition	tograph must accompany	this form to validate	e each attribute marked					
1. <u>Building Code</u> : Was the structure buth the HVHZ (Miami-Dade or Broward)	counties), South Florida Bu	ilding Code (SFBC-9	4)?					
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	A" or "B"						
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.								
Per 2.1 Roof Covering Type:	mit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance				
1. Asphalt/Fiberglass Shingle	2/23/2016	#16357-0						
2. Concrete/Clay Tile			·					
3. Metal			•					
<u></u>								
4. Built Up								
5. Membrane				Ш				
6. Other								
A. All roof coverings listed above installation OR have a roofing pe								
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 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								
☐ D. No roof coverings meet the red	_							
3. Roof Deck Attachment : What is the	_							
			/rafter (spaced a maximur	n of 24" inches o.c.)				
 A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 24" in by staples or 6d nails spaced at 6" along the edge and 12" in the fieldOR- Batten decking supporting wood shakes shinglesOR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that has an emean 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 12" inches in the fieldOR- Any system of screws, nails, a other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf. 								
								C. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common not decking with a minimum of 2 nai Inspectors Initials KPN Property Add
Inspectors Initials N Property Add	ress_22010-10-11-19 LUI	Oak Dilve	LSIGIU					
*This verification form is valid for un t	o fivo (5) voors provided i	no material changes	hava baan mada ta tha si	tructura or				

inaccuracies found on the form.

		or greater re 182 psf.	resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at	leas
		D. Reinford	rced Concrete Roof Deck.	
		E. Other:		
		F. Unknow	vn or unidentified.	
		G. No attic	e access.	
4.			Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks wiside or outside corner of the roof in determination of WEAKEST type)	thin
		A. Toe Nai	_	ed to
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
	Mir	nimal condit	tions to qualify for categories B, C, or D. All visible metal connectors are:	
		×	_	
		×	Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap fro the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.	m
	Ш	B. Clips		
		Ļ	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 position requirements of C or D, but is secured with a minimum of 3 nails.	nai
	\times	C. Single V	Wraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with	ith
			minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	tii (
		D. Double	e 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 wa minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, or	
			Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall oboth sides, and is secured to the top plate with a minimum of three nails on each side.	on
		E. Structura	ral Anchor bolts structurally connected or reinforced concrete roof.	
		F. Other: _		
			wn or unidentified	
	Ш	H. No attic	c access	
5.			<u>y</u> : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wal re over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).	il of
	X	A. Hip Roo	of 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 Roo	of Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of	
		C. Other R	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft Roof Any roof that does not qualify as either (A) or (B) above.	
	~			
6.		A. SWR (a sheathin dwelling	<u>ster Resistance (SWR)</u> : (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 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.	the
	\exists	B. No SWI C. Unknow	vn or undetermined.	
In	spec	tors Initials	KPN Property Address 22973-75-77-79 Lone Oak Drive Estero	
*T	his v	verification	form is valid for up to five (5) years provided no material changes have been made to the structure or	

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

inaccuracies found on the form.

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 Α Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) c Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E D 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance Opening Protection products that appear to be A or B but are not verified Ν Other protective coverings that cannot be identified as A, B, or C No Windborne Debris Protection Х 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 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.)

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

Inspectors Initials KPN Property Address 22973-75-77-79 Lone Oak Drive Estero

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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	Answer "A", "B", or C" or sy	ation) All Glaze vistems that appear	d openings are protected with ar to meet Answer "A" or "B"				
 N.1 All Non-Glazed openings classified as Level A, B, C, N.2 One or More Non-Glazed openings classified as Leve 			-				
table above 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 Gla	zed openings classified and I	Level X in the tal	ble above.				
MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR. Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.							
Qualified Inspector Name: Kevin P. Noack	License Type: Home Inspector	License	or Certificate #: HI 9868				
Inspection Company: Florida Property Inspectors, Inc	-	Phone: 239-2	209-2366				
Qualified Inspector – I hold an active license as	a: (check one)						
Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam. Building code inspector certified under Section 468.607, Florida Statutes. General, building or residential contractor licensed under Section 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.							
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statues, must inspect the station Licensees under s.471.015 or s.489.111 may authorize a diexperience to conduct a mitigation verification inspection. I, Kevin P. Noack am a qualified inspector (print name) contractors and professional engineers only) I had my emp	tructures personally and not rect employee who possesses and I personally performed loyee (ot through emples the requisites d the inspection) perform t	loyees or other persons. skill, knowledge, and				
and I agree to be responsible for his/her work. Qualified Inspector Signature: (print name of inspector) Date: 01/25/2018							
Leven / back							
An individual or entity who knowingly or through gross n subject to investigation by the Florida Division of Insuran							
appropriate licensing agency or to criminal prosecution. (certifies this form shall be directly liable for the misconduperformed the inspection.	Section 627.711(4)-(7), Flor	ida Statutes) Tl	he Qualified Inspector who				
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative. Signature: Date: 01/25/2018							
		-					
An individual or entity who knowingly provides or utters obtain or receive a discount on an insurance premium to of the first degree. (Section 627.711(7), Florida Statutes)							
The definitions on this form are for inspection purposes o as offering protection from hurricanes.	nly and cannot be used to c	ertify any prod	uct or construction feature				
Inspectors Initials KPN Property Address 22973-75-77-79 Lone Oak Drive Estero							
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