Christopher North Builders

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Naples Florida 34107

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Uniform Mitigation Verification Inspection Form

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

Inspection Date: Dec 23, 2020							
Owner Information							
Owner Name: Marsh landing Townhouse Condo Contact Person:							
Address: 23083-23089 Lone Oak Drive	;	Home Phone:					
City: Estero	Zip: 33928	Work Phone:					
County: Lee		Cell Phone:					
Insurance Company:	Policy #:						
Year of Home: 2000	# of Stories: 2	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 Broward counties), South Florida Building Code (SFBC-94)?
 - _____. For homes built in 2002/2003 provide a permit application with A. Built in compliance with the FBC: Year Built 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"
- 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.

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	11 ₇ 17 ₇ 20		2020	
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-Property Address 23083-23089 Lone Oak Drive Estero 33928

Inspectors Initials

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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 common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.

		18	52 ps1.	
		D.	Reinforce	d Concrete Roof Deck.
		E.	Other:	
		F.	Unknown	or unidentified.
		G.	No attic a	ccess.
4.				achment: What is the WEAKEST 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)
			Toe Nails	
				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
	Mi	nim	al conditio	ns to qualify for categories B, C, or D. All visible metal connectors are:
			\mathbf{X}	Secured to truss/rafter with a minimum of three (3) nails, and
			\mathbb{X}	Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ¹ / ₂ " gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips	
				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 nait position requirements of C or D, but is secured with a minimum of 3 nails.
	Х	C.	Single Wr	
				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 W	Vraps
				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, or
				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.	Structural	Anchor bolts structurally connected or reinforced concrete roof.
		F.	Other:	
		G.	Unknown	or unidentified
		H.	No attic a	ccess
5.				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).
	\times	A.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
		В.	Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft
		C.	Other Roo	
6.	Sec X		SWR (als sheathing	<u>r</u> Resistance (SWR): (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.
			No SWR.	
	\Box	C.	Unknown	or undetermined.
In	spec	tor	s Initials	Property Address 23083-23089 Lone Oak Drive Estero 33928
			<u> </u>	rm is valid for up to five (5) years provided no material changes have been made to the structure or
	1115	ver	ппсяноп то	THE IS VALUE FOR HID TO THE LOT VEALS DEOVIDED TO MATERIAL CHANGES HAVE DEED MADE TO THE STRUCTURE OR

^a I his verification form is valid for up to five (5) years provided no material changes have been made to the structure inaccuracies found on the form.

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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.

•	ening Protection Level Chart an "X" in each row to identify all forms of protection in use for each		Non-Glazed Openings				
openi form	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	Garage Doors Skylights		Glass Block	Entry Doors	Garage Doors
N/A	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)						
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						

<u>A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only)</u> 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, <u>and</u> 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	Op	ening	Protection-	Wood	Structural	Panels	meeting	FBC	2007	All	Glazed	openings	are	covered	with
ply	wood/OSI	B me	eting t	he requireme	ents of T	Table 1609.1	.2 of the	FBC 2007	7 (Lev	el C in	the	table abo	ove).			

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 protective coverings not meeting the requirem with no documentation of compliance (Level	nents of Answer "A", "B", or C" or							
N.1 All Non-Glazed openings classified as Leve	<i>'</i>	o Non-Glazed openings exist						
 N.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level X in the table above 								
N.3 One or More Non-Glazed openings is classified as Level X in the table above								
X. None or Some Glazed Openings One or r	nore Glazed openings classified an	d Level X in the table above.						
	S MUST BE CERTIFIED BY A QU utes, provides a listing of individu							
Qualified Inspector Name: Chris North	License Type: CGC	License or Certificate #: 1506189						
Inspection Company:	000	Phone:						
Christopher North Builders		239-825-9155						
Qualified Inspector – I hold an active lice	ense as a: (check one)							
Home inspector licensed under Section 468.8314, Flo training approved by the Construction Industry Licen	1	5	nitigation					
Building code inspector certified under Section 468.6								
General, building or residential contractor licensed ur	ider Section 489.111, Florida Statutes.							
Professional engineer licensed under Section 471.015								
Professional architect licensed under Section 481.213								
Any other individual or entity recognized by the insurverification form pursuant to Section 627.711(2), Flor		ations to properly complete a uniform	mitigation					
(print name) contractors and professional engineers only) I had and I agree to be responsible for his/her work. Qualified Inspector Signature: <u>An individual or entity who knowingly or through</u> subject to investigation by the Florida Division of appropriate licensing agency or to criminal prose certifies this form shall be directly liable for the n performed the inspection.	prize a direct employee who posse spection. Inspector and I personally perform my employee (ned the inspection or (<i>licensed</i>) perform the inspection ne of inspector) c 23, 2020 <u>e or fraudulent mitigation verific</u> <u>bject to administrative action by</u> <u>lorida Statutes) The Qualified In</u> <u>authorized mitigation inspector</u>	cation form is the spector who personally					
Homeowner to complete: I certify that the name residence identified on this form and that proof of ide			n of the					
Signature:	Date: Dec 23, 2020	v 1						
M A	Date							
An individual or entity who knowingly provides o	or utters a false or fraudulent mit	igation verification form with th	e intent to					
obtain or receive a discount on an insurance prem	nium to which the individual or e							
of the first degree. (Section 627.711(7), Florida Sta The definitions on this form are for inspection pu as offering protection from hurricanes.		o certify any product or construc	tion feature					
Inspectors Initials property Address 230	83-23089 Lone Oak Drive	Estero	33928					
*This verification form is valid for up to five (5) y inaccuracies found on the form.		es have been made to the structu	re or					

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