Christopher North Builders, Inc

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Naples 34108

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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: Sep 6, 2023							
Owner Information							
Owner Name: Marsh Landing Condominium Contact Person:							
Address: 23052,54,56,58 Lone Oak Dr	ive	Home Phone:					
City: Estero	Zip: 33928	Work Phone:					
County: Lee		Cell Phone:					
Insurance Company:		Policy #:					
Year of Home: 1998	# 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. <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	11 ₇ 12 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 Inspectors Initials

*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.

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.

		D. Reinforce	ed Concrete Roof Deck.		
		E. Other:			
		F. Unknown	or unidentified.		
		G. No attic a	access.		
4.			tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not in le or outside corner of the roof in determination of WEAKEST type)	clude attachment of hip/valley jacks	s within
		A. Toe Nails	3		
			Truss/rafter anchored to top plate of wall using nails driven at an an the top plate of the wall, or	gle through the truss/rafter and atta	iched to
			Metal connectors that do not meet the minimal conditions or requirem	ents of B, C, or D	
	Mi	nimal conditi	ons to qualify for categories B, C, or D. All visible metal connectors	are:	
		\boxtimes	Secured to truss/rafter with a minimum of three (3) nails, and		
		\boxtimes	Attached to the wall top plate of the wall framing, or embedded in the the blocking or truss/rafter and blocked no more than 1.5" of the truss corrosion.		from
		B. Clips			
			Metal connectors that do not wrap over the top of the truss/rafter, or		
	5		Metal connectors with a minimum of 1 strap that wraps over the top of position requirements of C or D, but is secured with a minimum of 3 r		the nail
	\mathbf{X}	C. Single W	raps Metal connectors consisting of a single strap that wraps over the to minimum of 2 nails on the front side and a minimum of 1 nail on the constant of 1 nails on the front side and a minimum of 1 nail on the constant of 1 nails on the front side and a minimum of 1 nail on the constant of 1 nails on the front side and a minimum of 1 nails on the constant of 1 nails on the constant of 1 nails on the front side and a minimum of 1 nails on the constant of 1 nails on the consta		l with a
		D. Double W	Vraps		
			Metal Connectors consisting of 2 separate straps that are attached to the beam, on either side of the truss/rafter where each strap wraps over the a minimum of 2 nails on the front side, and a minimum of 1 nail on the	e top of the truss/rafter and is secure	
			Metal connectors consisting of a single strap that wraps over the top o both sides, and is secured to the top plate with a minimum of three nai		all on
		E. Structural F. Other:	Anchor bolts structurally connected or reinforced concrete roof.		
		G. Unknowr	n or unidentified		
		H. No attic a	access		
5.			What is the roof shape? (Do not consider roofs of porches or carports the over unenclosed space in the determination of roof perimeter or roof are		
	\times	A. Hip Roof	· · ·		
		B. Flat Roof		main roof area has a roof slope of	
		C. Other Ro	less than 2:12. Roof area with slope less than 2:12 sq ft of Any roof that does not qualify as either (A) or (B) above.	;; Total roof areasq ft	
6.		 A. SWR (als sheathing dwelling B. No SWR 		oofing underlayment applied directly	y to the
			n or undetermined.		
In	spec	tors Initials	Property Address 23052,54,56,58 Lone Oak Drive	Estero	33928
*T	his '	verification fo	orm is valid for up to five (5) years provided no material changes ha	ve been made to the structure or	

inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 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						
IN	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

\square	C.	Exterior	0	pening	Protectio	n- W	Vood	Structural	Panels	meeting	FBC	2007	All	Glazed	openings	are	covered	with
								able 1609.1										

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 // Property Address	23052,54,56,58 Lone Oak Drive	Estero	33928

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A /

N. Exterior Opening Protection (unverifing protective coverings not meeting the required with no documentation of compliance (Level	rements of Answer "A", "B", or C" or s		
N.1 All Non-Glazed openings classified as Le	,	Non-Glazed openings exist	
N.2 One or More Non-Glazed openings classi table above			evel X in the
N.3 One or More Non-Glazed openings is clas	ssified as Level X in the table above		
X. None or Some Glazed Openings One o	or more Glazed openings classified and	Level X in the table above.	
	ONS MUST BE CERTIFIED BY A QUA tatutes, provides a listing of individua		
Qualified Inspector Name: Chris North	License Type: CGC	License or Certificate #: 1506189	
Inspection Company: Christopher North Builders Inc		Phone: 239-825-9155	
Qualified Inspector – I hold an active lie	cense as a: (check one)		
Home inspector licensed under Section 468.8314, H training approved by the Construction Industry Lic	censing Board and completion of a proficien	-	mitigation
Building code inspector certified under Section 468			
General, building or residential contractor licensed			
Professional engineer licensed under Section 471.0 Professional architect licensed under Section 481.2			
Any other individual or entity recognized by the in:		tions to properly complete a uniform	mitigation
verification form pursuant to Section 627.711(2), F		tons to property complete a uniform	mitigation
(print name) contractors and professional engineers only) I has and I agree to be responsible for his/her work. Qualified Inspector Signature: <u>An individual or entity who knowingly or throw</u> <u>subject to investigation by the Florida Division</u> <u>appropriate licensing agency or to criminal pro</u> <u>certifies this form shall be directly liable for the</u> <u>performed the inspection.</u> <u>Homeowner to complete:</u> I certify that the nam residence identified on this form and that proof of	horize a direct employee who possess inspection. d inspector and I personally perform ad my employee (^{na} (print nam Date: Sep ugh gross negligence provides a false of Insurance Fraud and may be sub psecution. (Section 627.711(4)-(7), Flo e misconduct of employees as if the a med Qualified Inspector or his or her er	ses the requisite skill, knowledged the inspection or (<i>licensed</i>) perform the inspection e of inspector) 6, 2023 or fraudulent mitigation verifing ject to administrative action by prida Statutes) The Qualified In uthorized mitigation inspector	ge, and ication form is <u>7 the</u> nspector who personally
_			
An individual or entity who knowingly provides obtain or receive a discount on an insurance pro of the first degree. (Section 627.711(7), Florida S	emium to which the individual or en		
The definitions on this form are for inspection p as offering protection from hurricanes.		certify any product or constru	ction feature
Inspectors Initials Property Address 23	3052,54,56,58 Lone Oak Drive	Estero	33928
*This verification form is valid for up to five (5) inaccuracies found on the form.) years provided no material change	s have been made to the struct	ire or

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