Uniform Mitigation Verification Inspection Form

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

<u>Iviaintain a copy of t</u>	ilis form and any d	ocumentation provid	ica with the msurane	<u>z poncy</u>	
Inspection Date: Feb 28, 2023					
Owner Information					
Owner Name: Errol By The Sea Contact Person:					
Address: 4501S Atlantic Ave			Home Phone:		
City: New Smyrna	Zip: 32169		Work Phone:		
County: Volusia			Cell Phone:		
Insurance Company:			Policy #:		
Year of Home: 1974	# of Stories: 5		Email:		
NOTE: Any documentation used in validaccompany this form. At least one photo though 7. The insurer may ask additions	ograph must accompa	any this form to validate	e each attribute marked	l in questions 3	
Building Code: Was the structure builthe HVHZ (Miami-Dade or Broward code)	ounties), South Florida	Building Code (SFBC-9	4)?		
A. Built in compliance with the FB a date after 3/1/2002: Building Peri	mit Application Date (A	MM/DD/YYYY)//		**	
B. For the HVHZ Only: Built in co provide a permit application with a	date after 9/1/1994: B	uilding Permit Application			
C. Unknown or does not meet the r	equirements of Answe	er "A" or "B"			
 Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified. 				nce for each roof	
2.1 Roof Covering Type:	it Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance	
Asphalt/Fiberglass Shingle					
2. Concrete/Clay Tile					
				\Box	
\equiv				ī	
		PERMIT #		H	
	18 _, 21	20210202009	2021	H	
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 r			···		
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 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 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 w 24"inches o.c.) by 8d common nail decking with a minimum of 2 nails	ls spaced a maximum of per board (or 1 nail p	of 6" inches in the field. er board if each board is	-OR- Dimensional lumb equal to or less than 6 in	er/Tongue & Groove nches in width)OR-	
Inspectors Initials _JB_ Property Address	ess_4501S Atlantic A	ve	New Smyrn	a 32169	

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	or g			rews, nails, adhesives, other deck fastening system or truss/rafter spacing to than 8d common nails spaced a maximum of 6 inches in the field or has		
\times		-	ed Co	oncrete Roof Deck.		
	F.	Unknow	n or u	nidentified.		
	G.	No attic	acces	S.		
	eet o	f the insi	de or	ment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include att outside corner of the roof in determination of WEAKEST type)	achment of hip/valley jacks	s within
Ш	A.	Toe Nail	Tru	ass/rafter anchored to top plate of wall using nails driven at an angle throutop plate of the wall, or	agh the truss/rafter and atta	ached to
			Me	tal connectors that do not meet the minimal conditions or requirements of E	3, C, or D	
Mi	nima	al conditi	ions t	o qualify for categories B, C, or D. All visible metal connectors are:		
			Sec	eured to truss/rafter with a minimum of three (3) nails, and		
			the	ached to the wall top plate of the wall framing, or embedded in the bond be blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, a rosion.		from
	В.	Clips				
			Me	tal connectors that do not wrap over the top of the truss/rafter, or		
		L	pos	tal connectors with a minimum of 1 strap that wraps over the top of the tru ition requirements of C or D, but is secured with a minimum of 3 nails.	ss/rafter and does not meet	the nail
	C.	Single W	Me	tal connectors consisting of a single strap that wraps over the top of the nimum of 2 nails on the front side and a minimum of 1 nail on the opposing		d with a
	D.	Double '	-			
		L	bea	tal Connectors consisting of 2 separate straps that are attached to the wall fr m, on either side of the truss/rafter where each strap wraps over the top of t inimum of 2 nails on the front side, and a minimum of 1 nail on the opposi	he truss/rafter and is secure	
			Me	tal connectors consisting of a single strap that wraps over the top of the trus h sides, and is secured to the top plate with a minimum of three nails on each	ss/rafter, is secured to the w	all on
\boxtimes		Structura Other: _		Anchor bolts structurally connected or reinforced concrete roof.		
	G.	Unknow	n or u	nidentified		
		No attic				
				t is the roof shape? (Do not consider roofs of porches or carports that are at unenclosed space in the determination of roof perimeter or roof area for roof.)		
	A.	Hip Roo	f	Hip roof with no other roof shapes greater than 10% of the total roof system. Total length of non-hip features: feet; Total roof system perimeter.	=	
\boxtimes	В.	Flat Roo	f	Roof on a building with 5 or more units where at least 90% of the main rolless than 2:12. Roof area with slope less than 2:12 sq ft; Total ro	of area has a roof slope of	
	C.	Other Ro	oof	Any roof that does not qualify as either (A) or (B) above.	-	
6. <u>Sec</u>	6. Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the event of roof covering loss.					y to the
\boxtimes	В.	No SWR	₹.	ndetermined.		
Inspec	tors	Initials	JB	Property Address 4501S Atlantic Ave	New Smyrna	32169

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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 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.) 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 JB Property Address 4501S Atlantic Ave New Smyrna 32169

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protective coverings not meeting the requ	nirements of Answer "A", "B", or C"	mentation) All Glazed openings are protected or systems that appear to meet Answer "A"		
with no documentation of compliance (Level N in the table above). N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist				
		r no Non-Glazed openings exist I no Non-Glazed openings classified as Level X ii	n the	
N.3 One or More Non-Glazed openings is c	classified as I evel X in the table above			
X. None or Some Glazed Openings One		and Level X in the table above		
11 11 tone of Boine Glazea Gpeinings				
Section 627.711(2), Florida	Statutes, provides a listing of indivi	duals who may sign this form.		
Qualified Inspector Name: John Banks	License Type: General Contractor	License or Certificate #: CGC1515728		
Inspection Company: Coastal Home Inspections		Phone: 386-566-0963		
·	license as a: (check one)			
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)				
Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, 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, John Banks am a qualified inspector and I personally performed the inspection or (licensed (print name) contractors and professional engineers only) I had my employee (NA perform the inspection (print name of inspector) and I agree to be responsible for his/her work. Qualified Inspector Signature: John Banks Date: Digitally signed by John Banks Date: Feb 28, 2023 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 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: Feb 28, 2023			
An individual or entity who knowingly provide obtain or receive a discount on an insurance post the first degree. (Section 627.711(7), Florid	premium to which the individual o			
The definitions on this form are for inspection as offering protection from hurricanes.	n purposes only and cannot be used	d to certify any product or construction fe	ature	
Inspectors Initials JB Property Address 4	501S Atlantic Ave	New Smyrna	32169	
*This verification form is valid for up to five inaccuracies found on the form.	(5) years provided no material cha	nges have been made to the structure or		

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155



FRONT



REAR



RIGHT



REAR



REAR



LEFT



CONCRETE ROOF FDECK

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