Uniform Mitigation Verification Inspection Form

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

| Inspection date: 06/09/2023 | • | | <u>'</u> | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| Owner Information | | | | |
| Owner Name: | | <u></u> | ontact Person: | |
| Address: | | | ome Phone: | |
| | 7in: | | | |
| City: | Zip: | | /ork Phone: | |
| County: | | | ell Phone: | |
| Insurance Company: | | | olicy #: | |
| Year of Home: 2022 | # of Stories: 1 | <u> </u> | mail: | |
| NOTE: Any documentation used in v must accompany this form.At least questions 3 though 7.The insurer may | one photograph must ac y ask additional question | company this form s regarding the miti | to validate each attr gated feature(s) verifie | ibute marked in ed on this form |
| 1. <u>Building Code:</u> Was the structure built in (Miami-Dade or Broward counties), South Fl | · · · · · · · · · · · · · · · · · · · | | or later) OR for nomes ic | cated in the HVHZ |
| A.Built in compliance with the FBC: Y | ear Built 2022 | . For homes built in | 2002/2003 provide a peri | mit application with |
| a date after 3/1/2002: Building Permit | | | | |
| B. For the HVHZ Only: Built in compli | | | | 4, 1995, and 1996 |
| provide a permit application with a da | | | • | |
| C. Unknown or does not meet the red | _ | | | |
| | • | | 20/MD0 Due divet Assesses | l |
| Roof Covering: Select all roof covering ty of Original Installation/Replacement OR indice 2.1 Roof Covering Type | | • • | | |
| 1. Asphalt/Fiberglass Shingle | New home built 2022 | | 2022 | |
| 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other | | | | |
| A. All roof coverings listed above me have a roofing permit application date | | • • • • • • • • • • • • • • • • • • • • | • | f installation OR |
| B. All roof coverings have a Miami-D application after 9/1/1994 and before | 3/1/2002 OR the roof is origin | nal and built in 1997 or la | The state of the s | y) a roofing permit |
| C. One or more roof coverings do no | • | swer A or B. | | |
| D. No roof coverings meet the require 3. Roof Deck Attachment: What is the wea | | nent? | | |
| A. Plywood/Oriented strand board (C staples or 6d nails spaced at 6" along OR- Any system of screws, nails, add than that required for Options B or C | SB) roof sheathing attached to g the edge and 12" in the field. nesives, other deck fastening s | o the roof truss/rafter (s -OR- Batten decking s | upporting wood shakes or | wood shingles |
| B. Plywood/OSB roof sheathing with 24"inches o.c.) by 8d common nails sideck fastening system or truss/rafter 12 inches in the field or has a mean | spaced a maximum of 12" inch spacing that is shown to have | nes in the fieldOR- Any an equivalent or greate | system of screws, nails, a | adhesives, other |
| Inspector Initials of Property Address | ss 9714 Van St., Tampa, 336 | i15 | | |

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| V | 24"inches o.c. | SB roof sheathing with a minimum thickness of 7/16" inch attached to the roof truss/rafter (spaced a maximum of) by 8d common nails spaced a maximum of 6" inches in the fieldOR- Dimensional lumber/Tongue & Groove decking |
|-------------------|------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | screws, nails, | m 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 adhesives, other deck fastening system or truss / rafter spacing that is shown to have an equivalent or greater resistance on nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf. |
| | | Concrete Roof Deck. |
| Ħ | E. Other: | Concrete Moor Deck. |
| | F. Unknown o | r unidentified |
| $\overline{\Box}$ | G. No attic acc | |
| 4 Ba | | |
| | | thment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet of corner of the roof in determination of WEAKEST type) |
| | A. Toe Nails | 71 / |
| | | Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top |
| | Ш | plate of the wall, or |
| | | Metal connectors that do not meet the minimal conditions or requirements of B, C, or D |
| Minim | al conditions t | o qualify for categories B, C, or D. All visible metal connectors are: |
| | | Secured to truss/rafter with a minimum of three (3) nails, and |
| | | 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 and blocked no more than 1.5" of the truss / rafter, and free of visible severe corrosion |
| V | B. Clips | |
| | V | 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 Wra | os |
| | | 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 Wra | aps |
| | E. Structural | Anchor bolts structurally connected or reinforced concrete roof. |
| | F. Other: | |
| | G. Unknown o | r unidentified |
| \checkmark | H. No attic acc | cess |
| | | /hat is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of the |
| nost s | | enclosed space in the determination of roof perimeter or roof area for roof geometry classification). Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total length of non-hip |
| | A. Hip Roof | features feet; Total roof system perimeter: feet; |
| | B. Flat Roof | Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of |
| Ш | D. 1 lat 1 too! | less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft; |
| \checkmark | C. Other Roof | Any roof that does not qualify as either (A) or (B) above. |
| 6. <u>Sec</u> | ondary Water | Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) |
| | sheathing or fo | called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the parm adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from |
| | | n in the event of roof covering loss. |
| Ц | B. No SWR | |
| \checkmark | C. Unknown o | r undetermined. |
| the we | akest form of p | n: What is the <u>weakest form of wind borne debris protection installed on the structure? First, use the table to determine rotection for each category of opening. Second, (a) check one answer below (A, B, C, N, or X) based upon the lowest L Glazed openings and (b) check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.</u> |
| | | |
| - | | Property Address 9714 Van St., Tampa, 33615 |
| A Libio | VARITIASTIAN FAR | m is valid for the to two the voors provided no material changes have been made to the structure. AID D1 1903 |

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| Opening Protection Level Chart | | Glazed Openings | | | | Non-GI | Non-Glazed Openings | |
|--------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------|-----------------|--------------|----------------|----------------|---------------------|--|
| Place foreac on the openir | an "X" in each row to identify all forms of protection in use h opening type.Check only one answer below (A thru X), based weakest form of protection (lowest row) for any of the Glazed and indicate the weakest form of protection (lowest row) nGlazed openings. | Windows or Entry Doors | Garage Doors | Skylights | Glass Block | Entry Doors | Garage Doors | |
| N/A | Not Applicable here are no openings of this type on the structure | | | Х | Х | | | |
| Α | Verified cyclic pressure & large missile (9lb for windows doors/4.5 lb for skylights) | Х | | | | Х | | |
| В | Verified cyclic pressure & large missile (48 lb for windows doors/2 lb for skylights) | | | | | | | |
| С | Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 | | | | | | | |
| D | Verified NonGlazed Entry or Garage doors indicating compliance with ASTME 330, ANSI / DASMA108, orPA / TAS202 for wind pressure resistance | | | | | | | |
| N | Opening Protection products that appear to be A or B but are not verified | | | | | | | |
| ., | Other protective coverings that cannot be identified as A, B, or C | | | | | | | |
| Х | No Windborne Debris Protection A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 I | | X | | | | | |
| | the State of Florida or Miami-Dade County and meet the requirements Impact" (Level A in the table above). Miami-Dade County PA 201, 202, and 203 Florida Building Code Testing Application Standard (TAS) 2 American Society for Testing and Materials (ASTM) E 1886 Southern Standards Technical Document (SSTD) 12 For Skylights Only: ASTM E 188 and ASTM E 1996 For Garage Doors Only: ANSI/DASMA 115 | 201, 202, <u>an</u> | <u>d</u> 203 | ng for "Cycl | ic Pressul | e and Lai | rge Missile | |
| | A.1 All Non-Glazed openings classified as A in the table above, | | - | - | | | | |
| | A.2 One or More Non-Glazed openings classified as Level D in B, C, N, or X in the table above | the table abo | ove, and | no Non-Gla | azed oper | nings clas | sified as Level | |
| | A.3 One or More Non-Glazed Openings is classified as Level B, | C, N, or X i | n the tab | le 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 ASTM E 1996 (Large Missile – 4.5 lb.)</u> SSTD 12 (Large Missile – 4 lb. to 8 lb.) | | | | | | | |
| | For Skylights Only: ASTM E 1886 <u>and ASTM E 1996</u> (Large | e 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 C, N, or X in the table above | the table abo | ove, and | no Non-Gla | azed oper | nings clas | sified as Level | |
| | B.3 One or More Non-Glazed openings is classified as Level C, | N, or X in th | e table a | above | | | | |
| | C. Exterior Opening Protection- Wood Structural Panels meeting meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C | | | d openings | are covere | ed with ply | /wood/OSB | |
| | C.1 All Non-Glazed openings classified as A, B, or C in the table | above, or r | no Non-G | Blazed oper | nings exist | t | | |
| | C.2 One or More Non-Glazed openings classified as Level D in N or X in the table above | | | | | | sified as Level | |
| | C.3 One or More Non-Glazed openings is classified as Level N | or X in the ta | able abov | ve . | | | | |
| = | etor Initialso Property Address9714 Van St., Tampa, 33615 | | | | | | | |
| " I his v | verification form is valid for up to five (5) years provided no materi | ai changes | nave be | en made t | o the stru | icture. Ol | K-B1-1802 | |

Glazed Openings

Non-Glazed Openings

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

| _ | N. Exterior Opening Protection (unverified shutter syst | tomo with no c | locumentation) | All Clazada | noningo oro n | rotootod with | |
|----------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|--|
| | N. Exterior Opening Protection (unverified shutter syst protective coverings not meeting the requirements of Answ documentation of compliance (Level N in the table above). | ver "A", "B", or 0 | | | | | |
| | N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist | | | | | | |
| | N.2 One or More Non-Glazed openings classified as X in the table above | s Level D in the | table above, and | no Non-Gla | zed openings | classified as Level | |
| | N.3 One or More Non-Glazed openings is classified | as Level X in the | ne table above | | | | |
| | X. None or Some Glazed Openings One or more Glazed | | | in the table | above. | | |
| | MITIGATION INSPECTIONS MUST B | E CERTIFI | ED BY A QU | ALIFIED | INSPECT | | |
| Qualifi | Section 627.711(2), Florida Statutes, provided Inspector Name: David Lee | | Home inspect | | License or Certificate #: | HI15940 | |
| Inspec | tion Company: Homegenix home inspections | | | Phone: 72 | 27-282-4047 | | |
| Qual | ified Inspector – I hold an active license a | ns a: (checl | k one) | • | | | |
| ☑ | Home inspector licensed under Section 468.8314, Florida mitigation training approved by the Construction Industry L Building code inspector certified under Section 468.607, F | icensing Board | and completion of | • | | s of hurricane | |
| | General, building or residential contractor licensed under S | | | | | | |
| $\overline{\Box}$ | Professional engineer licensed under Section 471.015, Flo | | r, r ionaa otatatos | ·• | | | |
| | Professional architect licensed under Section 481.213, Flo | | | | | | |
| | Any other individual or entity recognized by the insurer as mitigation verification form pursuant to Section 627.711(2) | possessing the | | cations to p | roperly comple | ete a uniform | |
| Individ | luals other than licensed contractors licensed under Se | | | or profes | sional ongine | or liconsod | |
| | Section 471.015, Florida Statutes, must inspect the stru | | | | | | |
| | | | | | | | |
| | sees under s.471.015 or s.489.111 may authorize a direction | t employee wi | no possesses the | e requisite | skill, knowled | lge, and | |
| experi | ence to conduct a mitigation verification inspection. | | | | | | |
| experi | | | | | | | |
| experi I, <u>Da</u> \ | ence to conduct a mitigation verification inspection. rid Lee am a qualified inspe | ector and I per | sonally performe | | ection or (<i>lice</i> | | |
| experi | ence to conduct a mitigation verification inspection. vid Lee am a qualified inspe (print name) ctors and professional engineers only) I had my emplo | ector and I per | sonally performe | d the inspe | ection or (<i>lice</i> | nsed | |
| experi | ence to conduct a mitigation verification inspection. id Lee am a qualified inspe (print name) | ector and I per | sonally performe | d the inspe | ection or (<i>lice</i> | nsed | |
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| he definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as ffering protection from hurricanes. | |
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| rspector Initials Property Address | |

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Pictures











































