## Uniform Mitigation Verification Inspection Form Maintain a copy of this form with the insurance policy

Owner Information		·		
Owner Name:	Contact Person:			
Address: 1257 0	Shores 4	Home Phone:		
City: 6 Live Land	AUE Zip: -2227/A	Work Phone:		
CACON BUILTED	33760	Cell Phone:		
County: Pinellas				
Insurance Company:		Policy #:		
Year of Home:	# of Stories: Fwo	Email:		
I, RUCE WA'K personally conducted the inspection data I reported is true and correct	on of the residence identified on	idividual who actually performed the inspection), this form and in my professional opinion, all the		
I. Building Code: What building cod	le was used to design and build the st	tructure?		
	g Code (building permit application of gh Velocity Hurricane Zone (HVHZ	late of 9/1/1994 or later in Miami-Dade and Broward )).		
<ul> <li>B. Building code prior to the 1 in Miami-Dade and Broward C</li> </ul>		uilding permit application date of 8/31/1994 or earlier		
		3/1/2002 or later outside the HVHZ).		
D. Building code prior to the 2 the HVHZ).	1901 Florida Building Code (building	permit application date of 2/28/2002 or earlier outside		
LE. Unknown or undetermined.				
Predominant Roof Covering:     Permit Application Date:	or Date of installation:			
NOA or FBC 2001 Product Ap	proval listing demonstrating complia	4 South Fiorida Building Code and has a Miami-Dade ance with ASTM D 3161 (enhanced for 110MPH) OR CR FMRC 4470 and/or 4471 (for metal roofs).		
B. Does not meet the above m	inimum requirements.			
C. Unknown or undetermined				
NOTE: At least one photo docum attribute marked in Sections 3 thr		bie and accessible construction or mitigation rm.		
3. Roof Deck Attachment: What is t	he weakest form of roof deck attachr	nent?		
A. Plywood/Oriented strand be staples or 6d nails spaced at 6	oard (OSB) roof sheathing attached " along the edge and 12" in the fiel f screws, nails, adhesives, other de	to the roof truss/rafter (spaced a maximum of 24" o.c.) by dOR- Batten decking supporting wood shakes or wood eck fastening system or truss/rafter spacing that has an		
B. Plywood/OSB roof sheathing with a minimum thickness of 7/16" attached to the roof truss/rafter (spaced a maximum of 24" o.c.) by 8d common nails spaced 6" along the edge and 12" in the field, OR- Any system of screws, nails, adhesive other deck fastening system or truss/rafter spacing that has an equivalent mean uplift resistance of 103 psf.				
24" o.c.) by 8d common nails decking with a minimum of 2 truss/rafter spacing that has an	C. Plywood/OSB roof sheathing with a minimum thickness of 7/16" attached to the roof truss/rafter (spaced a maximum of 24" o.c.) by 8d common nails spaced 6" along the edge and 6" in the fieldOR- Dimensional tumber/Tongue & Groov decking with a minimum of 2 nails per boardOR- Any system of screws, nails, adhesives, other deck fastening system of truss/rafter spacing that has an equivalent mean uplift resistance of 182 psf.			
D. Reinforced Concrete Roof	Deck.			
	_			

E. Other:					
☐ G. No attic acc	ess.				
4 Doof to Wall & stock	when the Miller to the same State Co. 15				
A. Toe Nails	ment: What is the weakest roof to wall connection				
,	to the top plate of the wall.	ils driven at an angle through the rafter/truss and attached			
B. Clips	type clip) of the rafter/truss and attached to the t	ailed to one side (or both sides in the case of a diamond op plate of the wall frame or embedded in the bond beam.			
	to the opposite side of the rafter/truss with a mini of the wall frame or embedded in the bond beam	s with a minimum of 3 nails, wrapping over and securing mum of 1 nail. The Strap must be attached to the top plate in at least one place.			
🗋 D. Double Wrap	as Both Metal Straps must be secured to every rafter and securing to the opposite side of the rafter/true to the top plate of the wall frame or embedded in	is with a minimum of I nail. Each Stran must be attached			
<ul><li>E. Structural</li></ul>	Anchor bolts structurally connected or reinforced	concrete roof.			
G. Unknown or	Unidentified				
H. No attic acc	ess				
and not structurally o	onnected to the main roof system are not considere	e attached only to the fascia or wall of the host structure d in the roof geometry determination.)			
A. Hip Roof	Hip roof with no other roof shapes greate	er than 10% of the total building perimeter.			
B. Non-Hip Roc	other roof shapes not including flat roofs				
C. Flat Roof	Flat roof shape greater than 100 square f	eet or 10% of the entire roof, whichever is greater.			
6. Gable End Bracing:	For roof structures that contain gables, please obe-	by the sugarage that ample			
A. Gable End(s)	The state of the contain guotes, prease eneck the weakest that apply:				
B. Does not mee					
C. Not applicab	le, unknown or unidentified.				
7. Wall Construction 1	[ype: Check all wall construction types for exterior	walls of the structure and percentages for each:			
A. Wood Frame	12 %				
B. Un-Reinforce	ed Masonry 38 %				
C. Reinforced M					
D. Poured Conci	rete%				
E. Other:	%				
8. Secondary Water Re	CONTROL ( )				
D A. SWR	esistance (SWR): (standard underlayments or hot)	nopped felts are not SWR)			
L. A. GWR	adhesive SWR barrier (not foamed on insulation) from water intrusion.	anderlayment applied directly to the sheathing or foam applied as a secondary means to protect the dwelling			
B. No SWR					
C. Unknown or i	undetermined.				
0 0 1 2					
<ol> <li>Opening Protection: What is the <u>weakest</u> form of wind borne debris protection installed on the structure? (Exterior openings include, but are not limited to: windows, doors, garage doors, skylights, etc. Product approval may be required for opening protection devices without proper rating identification.)</li> </ol>					
resistant covering devices in the pro	s, impact resistant doors and/or impact resistant worder approval system of the State of Florida or Mi	enings are fully protected at a minimum with impact indow units that are listed as wind borne debris protection ami-Dade County and meet the requirements of one of			
inspectors Initials <u>Div</u>	Property Address 1857 Bough	ANE			
*This verification form is OIR-B1-1802 (Rev. 02/10	s valid up to five (5) years provided no material b) Adopted by Rule 69O-170.0155	changes have been made to the structure.  Page 2 of 4			

	the following for "Cyclic Pressure and Large Missile Impact". For the HVHZ, systems must have either a Miami-Dade NOA or FBC Approval marked "For Use in the HVHZ".
	Miami-Dade County Notice of Acceptance (NOA) 201, 202 and 203. (Large Missile - 9 lb.)
	Florida Building Code Testing Application Standard (TAS) 201, 202 and 203. (Large Missile – 9 lb.)
	American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996. (Large Missile – 9 lb.)
	Southern Standards Technical Document (SSTD) 12. (Large Missile – 9 lb.)
	For Skylights Only: ASTM E 1886/E 1996. (Large Missile - 4.5 lb.)
	For Garage Doors Only: ANSI/DASMA 115. (Large Missile – 9 lb.)
Ð	B. All exterior openings are fully protected at a minimum with impact resistant coverings, impact resistant doors and/or
1	impact resistant window units that are 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":
	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/E 1996. (Large Missile - 2 to 4.5 lb.)
:_!	C. All exterior openings are fully protected at a minimum with impact resistant coverings, impact resistant doors and/or impact resistant window units that are 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 Small Missile Impact":
	☐ Miami-Dade County NOA 201, 202 and 203. (Small Missile – 2grams)
	☐ Florida Building Code TAS 201, 202 and 203. (Small Missile – 2 grams)
	ASTM E 1886 and ASTM E 1996. (Small Missile – 2 grams)
	SSTD 12. (Small Missile – 2 grams)
()	D. <u>All exterior openings</u> are fully protected with windborne debris protection devices that cannot be indentified as Miami-Dade or Florida Building Code (FBC) product approved. This does not include plywood/OSB or plywood alternatives (see Answer "H").
All	Glazed Exterior Openings
a	E. All glazed exterior openings are fully protected at a minimum with impact resistant coverings and/or impact resistant window units that meet the requirements of one of the standards listed in Answer "A" of this question. (Large Missile – 9 lb.)
Đ	F. All glazed exterior openings are fully protected at a minimum with impact resistant coverings and/or impact resistant window units that meet the requirements of one of the standards listed in Answer "B" of this question. (Large Missile – 2 lb.)
П	G. All glazed exterior openings are fully protected at a minimum with impact resistant coverings and/or impact resistant window units that meet the requirements of one of the standards listed in Answer "C" of this question. (Small Missile – 2 grams)
Π	H. All glazed exterior openings are covered with plywood/OSB meeting the requirements of Section 1609 and Table 1609.1.4 of the 2004 FBC (with 2006 supplements).
LI	I. <u>All glazed exterior openings</u> are fully protected with wind-borne debris protection devices that cannot be identified as Miami-Dade or FBC product approved. This does not include plywood/OSB or other plywood alternatives that do not meet Answer 'K'.
No	one or Some Glazed Openings
[7]	J. At least one glazed exterior opening toes not have wind-borne debris protection.
سبغ	K. No glazed exterior openings have wind-borne debris protection. This includes plywood/OSB or plywood alternative systems that do not meet Answer "H".
- []	L. Unknown or undetermined.

Inspectors Initials BW Property Address 1857 Bough AUE

\*This verification form is valid up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 02/10) Adopted by Rule 69O-170.0155 Page~3~of~4

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.					
Quanticu hispocior Name:	License Type:	License # or MSEH certificate #:			
Inspection Company:	Home I.	nspector HI931			
FIRST Choice Insy	rections	Phone: 727-544-9266			
Qualified Inspector - I hold an active lice	ense or certificate as a: (cl				
Building code inspector certified under Section 468.607, Florida Statutes.					
Professional engineer licensed under Section 47					
Other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete this form pursuant to Section 627.711(2)(f), Florida Statutes.					
Individuals signing this form must have the	ir license or certificate in an	"Active" status at time of the increati-			
Individuals signing this form must have their license or certificate in an "Active" status at time of the inspection.  I, Bruce Walks am a qualified inspector and I personally performed the inspection or had					
my employee () perf	form the inspection and I ag	ree to be responsible for his/her work.			
(print name)		. 4			
Qualified Inspector Signature:	1/2/2	Date: 9/23/1/			
An individual or entity who knowingly provides o	ruffore of all				
An individual or entity who knowingly provides o obtain or receive a discount on an insurance prem of the first degree (Section 627.711(3), Florida Sta	r utters a taise or traudulent m iium to which the individual or	nitigation verification form with the intent to			
of the first degree (Section 627.711(3), Florida Sta acts, statements, concealment of facts, omissions	tutes). The Qualified Inspector	r who certifies this form is strictly liable for all			
acts, statements, concealment of facts, omissions, a the inspection.	and documentation provided by	y his or her employee who actually performed			
Homeowner to complete: I certify that the	named Qualified Inspector	or his or her employee did norfo			
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					
1					
Signature: Jane South	Date: 9-2	4-11			
An individual or entity who knowingly provides or	r utters a false or fraudulent mi	itigation verification form with the intent to			
Signature: Date: 9-24-// An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to obtain or receive a discount on an insurance premium to which the individual or entity is not entitled commits a misdemeanor of the first degree. (Section 627.711(3), Florida Statutes)					
The definitions on this form are for inspection pur as offering protection from burricanes.		to certify any product or construction feature			
& F On Builteanes,					
e	,,,				
Inspectors Initials BW Property Address /	857 Bough	AUP			
*This verification form is valid up to five (5) years provided no material changes have been made to the structure.  OIR-B1-1802 (Rev. 02/10) Adopted by Rule 690, 170 0155					
OIR-B1-1802 (Rev. 02/10) Adopted by Rule 69O-1	provided no material changes   70.0155	have been made to the structure.  Page 4 of 4			











Roof deck 6d nails



Roof deck 6d nails



Roof deck 6d nails



Roof to wall clips



Roof to wall clips



Unprotected openings