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

Inspection Date: 9/23///		N				
Owner Information Owner Name:		Contact Person:				
Last want St	notes 4	Home Phone:				
City: Observation August 1	Zip: -2:27/2	Work Phone:				
County: ()	33760	Cell Phone:				
FINCHUS						
Insurance Company:	1 4 00.	Policy #:				
Year of Home:	# of Stories: Fwo	Email:				
<ol> <li>I, Grace Warts (print name of the individual who actually performed the inspection), personally conducted the inspection of the residence identified on this form and in my professional opinion, all the data I reported is true and correct.</li> <li>Building Code: What building code was used to design and build the structure?         <ul> <li>A. 1994 South Florida Building Code (building permit application date of 9/1/1994 or later in Miami-Dade and Broward Counties (also known as the High Velocity Hurricane Zone (HVHZ)).</li> <li>B. Building code prior to the 1994 South Florida Building Code (building permit application date of 8/31/1994 or earlier</li> </ul> </li> </ol>						
<ul> <li>in Miami-Dade and Broward Counties (HVHZ).</li> <li>C. 2001 Florida Building Code (building permit application date of 3/1/2002 or later outside the HVHZ).</li> <li>D. Building code prior to the 2001 Florida Building Code (building permit application date of 2/28/2002 or earlier outside the HVHZ).</li> <li>E. Unknown or undetermined.</li> </ul>						
<ul> <li>Predominant Roof Covering:         Permit Application Date: 1/1/23/csf or Date of Installation:     </li> <li>A. At a minimum meets the 2001 Florida Building Code or the 1994 South Florida Building Code and has a Miami-Dade NOA or FBC 2001 Product Approval listing demonstrating compliance with ASTM D 3161 (enhanced for 110MPH) OR ASTM D 7158 (F, G or H), OR FBC TAS 100-95 and TAS 107-95, OR FMRC 4470 and/or 4471 (for metal roofs).</li> <li>B. Does not meet the above minimum requirements.</li> </ul>						
NOTE: At least one photo documenting the existence of each visible and accessible construction or mitigation attribute marked in Sections 3 through 9 must accompany this form.						
3. Roof Deck Attachment: What is the weakest form of roof deck attachment? i. A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 24" 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 resistance of 55 psf.						
<ul> <li>24" o.c.) by 8d common nails spanother deck fastening system or trus</li> <li>C. Plywood/OSB roof sheathing 24" o.c.) by 8d common nails spandecking with a minimum of 2 nail</li> </ul>	ced 6" along the edge and 12" in the field, s/rafter spacing that has an equivalent mean with a minimum thickness of 7/16" attached ted 6" along the edge and 6" in the field, is per boardOR- Any system of screws, no ivalent mean uplift resistance of 182 psf.	to the roof truss/rafter (spaced a maximum of -OR- Any system of screws, nails, adhesives, uplift resistance of 103 psf.  to the roof truss/rafter (spaced a maximum of -OR- Dimensional lumber/Tongue & Groove ails, adhesives, other deck fastening system or				
Inspectors Initials BW Property Address 3000 Bough AVE						
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		E. Othe	er:						
		F. Unk	nown or 1	midentified.		-			
	[]	G. No	attic acce	ess.					
4.	Ro	of to Wa	ll Attachi	ment: What is the y	veakest roof to	wall connection	2		
	C	A. Toe			ed to top plate			igle through the ra	fter/truss and attached
	Server .	B. Clip		type cup) of the r	after/truss and	attached to the to	p plate of the wa	II frame or embedo	e case of a diamond led in the bond beam.
				Metal Straps must to the opposite sid of the wall frame of	be secured to e e of the rafter/to or embedded in	every rafter/truss russ with a mini- the bond beam	with a minimum mum of 1 nail. Thin at least one pla	of 3 nails, wrappine Strap must be at ce.	ng over and securing tached to the top plate
		D. Do	ible Wrap	s Both Metal Straps	must be secure opposite side	ed to every rafte of the rafter/trus	r/truss with a min s with a minimun	imum of 3 nails, w	tran must be attached
		E. Stru		Anchor bolts struct	urally connecte	ed or reinforced	concrete roof.	an read one piace.	
		F. Othe							
				<b>Jnidentified</b>					
	[]	H. No	attic acce	ess					
5.	Ro- and	i noi siru	лигану сс	at is the roof shape( onnected to the mair	s)? (Porches or roof system a	carports that are	attached only to l in the roof geom	the fascia or wall o	of the host structure
	Legen	A. Hip	Roof	Hip roof v	vith no other re	of shapes greate	r than 10% of the	total building peri	meter.
			-Hip Roo	f Any other other roof	roof shape or a shapes not inc	combination of r luding flat roofs.	oof shapes includ	ing hip, gable, gan	obrel, mansard and
		C. Flat	Roof	Flat roof s	hape greater th	an 100 square fe	et or 10% of the	entire roof, whiche	ver is greater.
6.	Ga	ble End	Bracing:	For roof structures	that contain eal	iles inlease chec	the waskast the	t annles	
	D	A. Gab	le End(s)	are braced at a mini	mum in accord	ance with the 20	01 Florida Buildi	ing Code	
	$\Gamma$	B. Doe	s not meet	t the above minimu	n requirements	endice with the 20	or Florida Buildi	ing Code.	
	المعطوع	C. Not	applicabl	e, unknown or unid	entified.	•			
7.	Wa						W 0.1		
•				ype: Check all wall	10	pes for exterior	walls of the struc	ture and percentag	es for each:
			od Frame	_	1 2 %				
	L			d Masonry	<u>3%_</u> %				
			forced Ma	_	%				
		D. Pour	ed Concre	ete _	%				
		E. Othe	r:		%				
8.	Sec	ondary V	Vater Re	sistance (SWR): (s	tandard underla	ayments or hot n	lopped felts are n	ot SWR)	
		A. SWI	₹	Self adhering polyn adhesive SWR barr	ner modified bi ier (not foamed	tumen roofing u	nderlavment anni	ied directly to the	sheathing or foam tect the dwelling
	Ti Varant	<u></u>		from water intrusio	n.				-
	<b>2</b>	B. No S							
	U	C. Unki	nown or u	ndetermined.					
9.	prot	ection do	vices with	What is the weakes nited to: windows, do nout proper rating io	loors, garage de dentification.)	oors, skylights, e	tc. Product appro	val may be require	ed for opening
		resistam	coverings	Openings (Glazed a s, impact resistant d duct approval syster	oors and/or im	nact resistant wii	ndow unite that ar	e listed as wind he	man dobnia manta ati a a
lnsj	oecto	rs Initia	ls <u>BW</u>	Property Address	3000	Bough	AVE.	and meet the requi	rements of one of
				valid up to five (5)				*	
OH	t-B1	1802 (R	ev. 02/10)	Adopted by Rule	69O-170.0155	o no material (	manges nave bee		veture. · 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.)
13	B. 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 Large Missile Impact":
	[] ASTM E 1886 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/E 1996. (Large Missile - 2 to 4.5 lb.)
L!	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)
Ĭ	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
	E. All giazed 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.)
Li	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. – 8 lb.)
£.	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)
[]	H. <u>All glazed exterior openings</u> are covered with plywood/OSB meeting the requirements of Section 1609 and Table 1609.1.4 of the 2004 FBC (with 2006 supplements).
1.1	<ol> <li>All stazed exterior openings are fully protected with wind-bome 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 H (see Answer "K").</li> </ol>
No	one or Some Glazed Openings
1.5	J. At least one glazed exterior opening does not have wind-borne debris protection.
V	K. No glazed exterior openings have wind-borne debris protection. This includes plywood/OSB or plywood alternative systems that do not meet Answer "H".
1.1	

Inspectors Initials BW Property Address 3000 Bough AVE

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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.					
Qualified Inspector Name:  Stuce Waits Inspection Company:	License Type:  Home Inside		Sign this form.  License # or MSFH certificate #:  HI 93'i		
FIRST Choice Inspectio	ns	Phone:	7-544-9266		
Qualified Inspector - I hold an active license or c	ertificate as a: (check o	nel			
☐ Hurricane mitigation inspector certified by the My Safe FI		Jucy			
☐ Building code inspector certified under Section 468.607, I					
☐ General, building or residential contractor licensed under S		utes.			
Professional architect licensed under Section 481.213, Flo	rida Statutes.				
Professional engineer licensed under Section 471.015, Flor	rida Statutes.				
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 their license	Or certificate in an "A ati				
I, bruce warks am a qualified inspec	tor and I personally perf	formed t	is at time of the inspection, he inspection or had		
my employee () perform the i	nspection and I agree to	be respo	nsible for his/her work.		
Qualified Inspector Signature:	/		<i>i i</i>		
			9/23/11		
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 Qualified Inspector who certifies this form is strictly liable for all acts, statements, concealment of facts, omissions, and documentation provided by his or her employee who actually performed the inspection.					
Homeowner to complete: I confir all all all					
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.					
A					
Signature: Signature	Date: 9-24-1	ı			
Signature: Date: 9-24-11  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 set to be a set of the individual or entity is not set to be a set of the individual or entity is not set to be a set of the individual or entity is not set to be a set of the individual or entity is not set to be a set of the individual or entity is not set to be a set of the individual or entity is not set of the					
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 purposes only as offering protection from hurricanes.	and cannot be used to cert	ify any p	roduct or construction feature		
Inspectors Initials BW Property Address 3000	Bough Ave				
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/5/5/5/5			Page 4 of 4		











Roof deck staples



Roof deck staples



Roof deck staples



Roof to wall clips



Roof to wall clips



Unprotected openings