## Uniform Mitigation Verification Inspection Form opy of this form and any documentation provided with the insu

Inspection Date:	poncy						
Owner Information							
Owner Information Owner Name:  Contact Person:							
Address: Home Phone:							
City: Zip: Work Phone:							
County: Cell Phone:							
Insurance Company: Policy #:							
Year of Home: # of Stories: Email:							
NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation accompany this form. At least one photograph must accompany this form to validate each attribute marked i 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 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 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 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"							
2. <b>Roof Covering:</b> Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliant covering identified.							
Permit Application FBC or MDC Year of Original Installation or 2.1 Roof Covering Type: Date Product Approval # Replacement	No Information Provided for Compliance						
1. Asphalt/Fiberglass Shingle							
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 installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2							
☐ B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or late							
☐ 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. <b>Roof Deck Attachment</b> : 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.							
24"inches o.c.) by 8d common nails spaced a maximum of 12" inches in the fieldOR- Any system of screw	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						
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 fieldOR- 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-Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent							
Inspectors Initials Property Address							

\*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

		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.	ıst
		D. Reinforced Concrete Roof Deck.	
		E. Other:	
		F. Unknown or unidentified.	
		G. No attic access.	
4.	Roc	<b>to Wall Attachment:</b> What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks with eet of the inside or outside corner of the roof in determination of WEAKEST type)	in
		A. Toe Nails	
		☐ Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached the top plate of the wall, or	to
		☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
	Mir	nimal conditions to 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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.	l
		B. Clips	
		☐ Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>	
		Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the n position requirements of C or D, but is secured with a minimum of 3 nails.	ail
		C. Single Wraps	
		Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	ıa
		D. Double Wraps	
		Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured wit a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>	h
		☐ Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.	1
		E. Structural Anchor bolts structurally connected or reinforced concrete roof.	
		F. Other:	
		G. Unknown or unidentified	
		H. No attic access	
5.		<b>tof Geometry:</b> What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall shost structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).	of
		A. Hip Roof Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.	
		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 less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft	
		less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft  C. Other Roof Any roof that does not qualify as either (A) or (B) above.	
6.	Sec	<ul> <li>Condary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)</li> <li>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.</li> <li>B. No SWR.</li> </ul>	ne
		C. Unknown or undetermined.	
In	spec	ctors Initials Property Address	

<sup>\*</sup>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.

7. **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	Glazed Openings				Non-Glazed Openings	
openi form	Place an "X" in each row to identify all forms of protection in use for each opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings.		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						

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

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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

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.)
$\square$ 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

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

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

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☐ B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above

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in the table above

N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of An with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or sys	tion) A tems th	ll Glazed openings are protected with at appear to meet Answer "A" or "B"				
□ 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 Level table above			• •				
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above						
☐ X. None or Some Glazed Openings One or more Glaze		evel X i	n the table above.				
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	~						
Qualified Inspector Name: Steven Rosenbaum	License Type: Engineering	]	License or Certificate #: 49307				
Insight Inspections		Phone:	(941) 224-9030				
Qualified Inspector – I hold an active license as a	: (check one)						
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	es who has completed the statuto		ber of hours of hurricane mitigation				
$\square$ Building code inspector certified under Section 468.607, Florida	Statutes.						
General, building or residential contractor licensed under Section							
Professional engineer licensed under Section 471.015, Florida St							
Professional architect licensed under Section 481.213, Florida St							
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		ns to pro	perly complete a uniform mitigation				
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statues, must inspect the structure Licensees under s.471.015 or s.489.111 may authorize a direxperience to conduct a mitigation verification inspection.  I, Steven Rosenbaum am a qualified inspector a (print name) contractors and professional engineers only) I had my employ and I agree to be responsible for his/her work.  Qualified Inspector Signature:  An individual or entity who knowingly or through gross nesubject to investigation by the Florida Division of Insurance.	cuctures personally and not ect employee who possesses and I personally performed byee (	through the received the ins ) perf insperience of the insert of t	gh employees or other persons.  quisite skill, knowledge, and  pection or (licensed  rform the inspection ctor)  ulent mitigation verification form is				
appropriate licensing agency or to criminal prosecution. (S certifies this form shall be directly liable for the misconduc performed the inspection.	ection 627.711(4)-(7), Florid	da Stat	utes) The Qualified Inspector who				
<b><u>Homeowner to complete</u></b> : I certify that the named Qualified residence identified on this form and that proof of identification							
Signature:I	Date:						
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)							
The definitions on this form are for inspection purposes on as offering protection from hurricanes.							
Inspectors Initials Property Address							
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inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155			Page 4 of 4				

## 1107-1105 Roseate

