Uniform Mitigation Verification Inspection Form

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

Inspection Date: 06/30/2017								
Owner Information								
Owner Name: Magnolia Square Con-	Contact Person: R. Br	Contact Person: R. Bryant						
Address: 501 East Bay Drive #1200	Home Phone:							
City: Largo	Zip:	33770	Work Phone:					
County: Pinellas			Cell Phone: (727) 243	3-0383				
Insurance Company:			Policy #:					
Year of Home: 1975	# of Stories: 2		Email: qscbuild@yah	Email: qscbuild@yahoo.com				
NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.								
the HVHZ (Miami-Dade or Browar  A. Built in compliance with the a date after 3/1/2002: Building  B. For the HVHZ Only: Built in provide a permit application with the statement of the statement	Building Code: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in 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 application with 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, 1995, and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)							
	. <u>Roof Covering:</u> Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof							
2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance				
✓ 1. Asphalt/Fiberglass Shingle	5/9/17							
2. Concrete/Clay Tile								
3. Metal								
4. Built Up								
5. Membrane								
6. Other								
<ul> <li>✓ A. All roof coverings listed about installation OR have a roofing p</li> <li>☐ B. All roof coverings have a M roofing permit application after</li> <li>☐ C. One or more roof coverings</li> <li>☐ D. No roof coverings meet the second coverings</li> </ul>	permit application date or iami-Dade Product Appro 9/1/1994 and before 3/1/ do not meet the requirem	n or after 3/1/02 OR the oval listing current at 1/2002 OR the roof is countered and the contract of Answer "A" of the contract of Answer "A" of the contract of Answer "A" of the contract of	ne roof is original and built in time of installation OR (for t original and built in 1997 or l	n 2004 or later. the HVHZ only) a				
3. <b>Roof Deck Attachment</b> : What is the	ne weakest form of roof d	leck attachment?						
A. Plywood/Oriented strand bo by staples or 6d nails spaced a shinglesOR- Any system of smean uplift less than that required B. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common other deck fastening system or maximum of 12 inches in the fill ✓ C. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common decking with a minimum of 2 in Any system of screws, nails, and	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 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 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 RB Property Address 501 East Bay Drive #1200 Largo								
*This varification form is valid for u	n to five (5) years provide	and no motorial chan	gos have been made to the	structure or				

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			greater res 32 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least			
			-	d Concrete Roof Deck.			
				or unidentified.			
		G	. No attic a	ccess.			
4.		eet	of the inside	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)			
	Ш	A	. Toe Nails	Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or			
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D			
	Mi	nin	nal conditio	ons to qualify for categories B, C, or D. All visible metal connectors are:			
			$\checkmark$	Secured to truss/rafter with a minimum of three (3) nails, and			
			<b>✓</b>	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.			
	$\checkmark$	В	. Clips				
			<b>✓</b>	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.			
	Ш	C.	. Single Wi	raps  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 W	Vraps			
				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 with a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>			
				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.			
			Structural Other:	, and the second se			
		G	. Unknown	or unidentified			
		Н	. No attic a	ccess			
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).			
		A	. Hip Roof				
		В	. Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet  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			
	<b>√</b>	C.	. Other Roo				
6.	Sec	<ul> <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> <li>C. Unknown or undetermined.</li> </ul>					
ĺη	snec	tor	·s Initials R	RB Property Address501 East Bay Drive #1200 Largo			
Troperty Address Of Last Day Differ # 1200 Large							
*T	his	ver	rification fo	orm is valid for up to five (5) years provided no material changes have been made to the structure or			

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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 Glass Entry Garage 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) 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 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). LC.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 RB Property Address 501 East Bay Drive #1200 Largo

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N. Exterior Opening Protection (unverified shutter systems with no documentation) All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" 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							
N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no Non	-Glazed openings classified as Level X in the					
	el X in the table above						
<ul> <li>✓ N.3 One or More Non-Glazed openings is classified as Level X in the table above</li> <li>✓ X. None or Some Glazed Openings One or more Glazed openings classified and Level X in the table above.</li> </ul>							
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:  Ronald E. Bryant	License Type:  Builder/Home Insp	License or Certificate #: ector CB C058458/HI 2920					
Inspection Company:		Phone:					
Qualified Services Corporation Inc.		(727) 243-0383					
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							
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 possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.							
Individuals other than licensed contractors licensed under	Section 489.111, Florida Sta	tutes, or professional engineer licensed					
under Section 471.015, Florida Statues, must inspect the str							
Licensees under s.471.015 or s.489.111 may authorize a dir	ect employee who possesses	the requisite skill, knowledge, and					
experience to conduct a mitigation verification inspection.							
I, Ronald E. Bryant am a qualified inspector a	nd I personally performed t	the inspection or (licensed					
(print name)	16						
contractors and professional engineers only) I had my emplo		) perform the inspection					
and I agree to be responsible for his/her work.	(print name of	inspector)					
	- 44/44/0	040					
Qualified Inspector Signature:	Date: 11/11/2	<u>U16</u>					
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. (S	ection 627.711(4)-(7), Florid	a 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.							
<u>Homeowner to complete</u> : I certify that the named Qualified residence identified on this form and that proof of identification							
Signature:I	Date:						
A • 1• • 1	e1 e 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(7), Florida Statutes)							
The definitions on this form are for inspection purposes on	ly and cannot be used to cer	tify any product or construction feature					
as offering protection from hurricanes.							
Inspectors Initials RB Property Address 501 East Bay D	Prive #1200	Largo					
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ided no material changes ha	ive been made to the structure or					

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Address Verification



Front Elevation



Side Elevation



Side Elevation



Rear Elevation



Decking



**Roof Deck Attachment** 



Field Measure



Nail Length



Roof to Wall Attachment





