Uniform Mitigation Verification Inspection Form

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

Inspect	ion Date: 02/28/2018	-			
	· Information				
Owner	Name: James Cornell			Contact Person: R. Bry	ant
Addres	s: 501 East Bay Drive #1700			Home Phone:	
City: La	argo	Zip:	33770	Work Phone:	
County	r: Pinellas			Cell Phone: (727) 243	-0383
	nce Company:			Policy #:	
Year of	f Home: 1975	# of Stories: 2		Email: qscbuild@yah	oo.com
accom; though	: Any documentation used in v pany this form. At least one ph 17. The insurer may ask addition	otograph must accompa onal questions regarding	nny this form to valid g the mitigated featu	late each attribute marked re(s) verified on this form	l in questions 3
the	A. Built in compliance with the la date after 3/1/2002: Building P. B. For the HVHZ Only: Built in provide a permit application with C. Unknown or does not meet the of Covering: Select all roof covering.	counties), South Florida FBC: Year Built ermit Application Date (Note that the SFB) and a date after 9/1/1994: Built Buil	Building Code (SFBC For homes built MM/DD/YYYY) BC-94: Year Built uilding Permit Applic r "A" or "B" the permit application	in 2002/2003 provide a period in 2002/2003 provide a period in 19 ation Date (MM/DD/YYYY) and date OR FBC/MDC Production of the period in the period i	mit application with 94, 1995, and 1996 ———— act Approval number
	Year of Original Installation/Repering identified.	placement OR indicate that	at no information was	available to verify complian Year of Original Installation or	No Information Provided for
	2.1 Roof Covering Type:	Date	Product Approval #	Replacement	Compliance
	✓ 1. Asphalt/Fiberglass Shingle	8/4/17			
	2. Concrete/Clay Tile				
	3. Metal				
	4. Built Up				
	5. Membrane				
	6. Other				
3. Roo	A. All roof coverings listed above installation OR have a roofing per B. All roof coverings have a Mia roofing permit application after 9. C. One or more roof coverings d. D. No roof coverings meet the reof Deck Attachment : What is the	ermit application date on ami-Dade Product Approv 0/1/1994 and before 3/1/2 o not meet the requirement equirements of Answer "A	or after 3/1/02 OR the val listing current at tit 2002 OR the roof is or nts of Answer "A" or "A" or "B".	e roof is original and built in me of installation OR (for the iginal and built in 1997 or la	2004 or later. ne HVHZ only) a
	A. Plywood/Oriented strand boa by staples or 6d nails spaced at shinglesOR- Any system of so mean uplift less than that require B. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common of other deck fastening system or to maximum of 12 inches in the fie C. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common of decking with a minimum of 2 na Any system of screws, nails, add	rd (OSB) roof sheathing a 6" along the edge and 12 rews, nails, adhesives, other and for Options B or C below with a minimum thickness ails spaced a maximum of truss/rafter spacing that is ald or has a mean uplift re- g with a minimum thickness and spaced a maximum of the spaced a maximum of the space o	attached to the roof tro 2" in the fieldOR- In the deck fastening system. The ess of 7/16" inch attached to 12" inches in the field inches in the field ess shown to have an elesistance of at least 10 ess of 7/16" inches in the field er board if each board in grant system or truss/ra	Batten decking supporting wastem or truss/rafter spacing to the to the roof truss/rafter (seldOR- Any system of screquivalent or greater resistants) psf. med to the roof truss/rafter (seldOR- Dimensional lumble) is equal to or less than 6 in after spacing that is shown to the strength of the spacing that is shown to the strength of the strengt	wood shakes or wood that has an equivalent spaced a maximum of ews, nails, adhesives, nee 8d nails spaced a spaced a maximum of er/Tongue & Groove nehes in width)OR-
inspec	tors Initials <u>RB</u> Property Add	uressour East Day Dily	5 #1700	Largo	

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		_	greater res	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	П			d Concrete Roof Deck.
	Ħ			u Convicto recor Beek.
	一			or unidentified.
		G.	No attic a	ccess.
4.		et of	f the insid	achment: What is the WEAKEST 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
	Mir	ima	l 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
	_		√	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.
	✓	В. (Clips	
				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. S	Single Wi	Appears 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.
	Ш	D.	Double V	
			Ц	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, or
				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:	Anchor bolts structurally connected or reinforced concrete roof.
				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	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
		В. 1	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
	√	C. (Other Roo	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft of Any roof that does not qualify as either (A) or (B) above.
6.		A. 1	SWR (als sheathing dwelling No SWR.	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) of called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.
Ins	spec	tors	Initials <u>F</u>	B Property Address 501 East Bay Drive #1700 Largo
*T	his v	verif	ication fo	rm 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

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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 #1700

the table above

inaccuracies found on the form.

Largo

N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of An	nswer "A", "B", or C" or sy	
with no documentation of compliance (Level N in the ta	,	
N.1 All Non-Glazed openings classified as Level A, B, C, o		
N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no No	on-Glazed openings classified as Level X in the
N.3 One or More Non-Glazed openings is classified as Leve		
X. None or Some Glazed Openings One or more Glazed	ed openings classified and L	evel X in the table above.
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, prov	ides a listing of individuals	who may sign this form.
Qualified Inspector Name: Ronald E. Bryant	License Type: Builder/Home Ins	License or Certificate #: CB C058458/HI 2920
Inspection Company: Qualified Services Corporation Inc.		Phone: (727) 243-0383
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 Building code inspector certified under Section 468.607, Florida General, building or residential contractor licensed under Section	es who has completed the statut and completion of a proficienc Statutes.	
Professional engineer licensed under Section 471.015, Florida St		
Professional architect licensed under Section 481.213, Florida St	atutes.	
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		ons to properly complete a uniform mitigation
Individuals other than licensed contractors licensed under		
under Section 471.015, Florida Statues, must inspect the str Licensees under s.471.015 or s.489.111 may authorize a dir		
experience to conduct a mitigation verification inspection.	eet employee who possesse	s the requisite simi, mo wreage, and
	and I personally performed	I the inspection or (licensed
(print name) 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)
Qualified Inspector Signature:	Date: 02/28	/2018
An individual or entity who knowingly or through gross ne	gligence provides a false o	r fraudulent mitigation verification form is
subject to investigation by the Florida Division of Insurance	e Fraud and may be subje	ct to administrative action by the
appropriate licensing agency or to criminal prosecution. (S certifies this form shall be directly liable for the misconduct performed the inspection.		
	1.7	1 11 0
<u>Homeowner to complete</u> : I certify that the named Qualifier residence identified on this form and that proof of identification		
Signature:I	Date: 02/28/2018	
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.	ly and cannot be used to co	ertify any product or construction feature
Inspectors Initials RB Property Address 501 East Bay D	rive #1700	Largo
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Address Verification



Front Elevation



Side Elevation



Rear Elevation



Side Elevation



Decking



Roof Deck Attachment



Field Measure



Nail Length



Roof to Wall Attachment

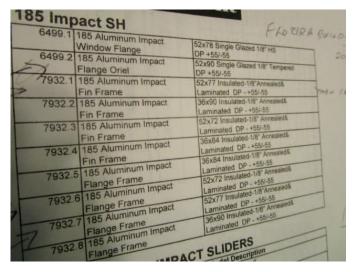






	SULATED IMPACT	
	Product Model # or Name	Model Description
	.1 188 Fin-Impact 2 Lite	73x62 Insulated DP +55/-55
7931	2 188 Flange-Impact 2 Lite	73x62 Insulated DP +55/-55
5000.	2 Lite	DP +55/-55
	Product Model # or Name 188 Fin-Impact	Model Description 73 1/8x62 SG
	2 Lite	
	188 Flange-Impact	74 1/8X63 SG
6688.4	2134	DP +55/-55
6688.4	2 Lite	
	5764/V83	Horizontal Flange Tube Alum 2 1/8" x 1/8"
5513.3		

Opening Protection



Opening Protection



Opening Protection



Opening Protection