Uniform Mitigation Verification Inspection Form

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

Owner Name: Magnolia Square Condo Inc. Address: 501 E. Bay Drive Bldg 2800 Zip: 33770 Work Phone: County: Pinellas Cell Phone: (27) 243-0383 Insurance Company: Policy #: Policy #: Year of Home: 1975 # of Stories: 2 Policy #: A Built in compliance with the FISC: Year Built	Inspection Date: 07/18/2019								
Address: 501 E. Bay Drive Bidg 2800 Zip: 33770 Work Phone: City: Largo Zip: 33770 Work Phone: County: Pinellas Cell Phone: (727) 243-0383 Insurance Company: Policy #: Po									
City: Largo Zip: 33770 Work Phone: County: Pinellas Cell Phone: (727) 243-0383 Insurance Company: Policy #. Year of Home: 1975 # of Stories: 2 Email: qascbuild@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. 1. Building Code: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in the HYHZ (Miami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HYHZ (Miami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HYHZ (Miami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HYHZ (Miami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HYHZ (Miami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes built in 1994, 1995, and 1996 provide a permit application with a date after 91/1994. Building Permit Application Date assetting or provide a permit application with a date after 91/1994. Building Permit Application Date assetting or provide a permit application with a date after 91/1994. Building Permit Application date OR FBC/MIDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof coverings Steet all roof covering types in use. Provide the permit application date OR FBC/MIDC Product Approval is used to verify compliance for each roof covering dentified. 21 Roof Covering Steet all roof covering types in use. Provide the permit application date OR FBC/MIDC Product Approval is a covery of the product Approval		<u> </u>	o Inc.	۶		-			
County: Pinellas Cell Phone: (727) 243-0383 Insurance Company: Policy #:		<u> </u>							
Notice Policy #: Email: gscbulld@yahoo.com			Zip:	33770					
Year of Home: 1975					` ,	0383			
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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 31/1/2002: Building Permit Application Date (MMDDYYYYY) 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 (MMDDYYYY) C. Unknown or does not meet the requirements of Answer "A" or "B" 2. Roof Covering: 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 covering identified. 2.1 Roof Covering: Type:	accomp though	pany this form. At least one ph 7. The insurer may ask addition	otograph must accompai onal questions regarding	ny this form to valid g the mitigated featur	ate each attribute marked re(s) verified on this form.	in questions 3			
Permit Application Product Approval # Product Approval # Product Approval Product Pro	the	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 (MMDD/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)							
2. Concrete/Clay Tile	cov	Po				Provided for			
3. Metal		✓ 1. Asphalt/Fiberglass Shingle	6/21/19		2019				
3. Metal		2. Concrete/Clay Tile							
□ 4. Built Up						П			
□ S. Membrane □ □ 6. Other □ □ A. All roof coverings listed above meet the FBC with a FBC or Miami-Dade Product Approval listing current at time of installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2004 or later. □ B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later. □ 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. Roof Deck Attachment: 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 (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		_				_			
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rroperty Address of E. Day Dive Didy 2000 Largo	Inovasi	decking with a minimum of 2 na Any system of screws, nails, add	ils per board (or 1 nail penesives, other deck fasten	er board if each board ing system or truss/ra	is equal to or less than 6 in after spacing that is shown to	ches in width)OR-			
	inspect	tors initials <u>nd</u> Property Add	iressoure. Day Drive E	nuy 2000	Laigu				

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	182 j		istance than 8d common hans spaced a maximum of 6 inches in the field of has a mean upint resistance of at least
	_		d Concrete Roof Deck.
	_		d Control Roof 200k.
			or unidentified.
	☐ G. N	lo attic a	ccess.
4.			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)
	☐ A. T	oe 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
		Ш	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	<u>Minimal</u>		ons 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
		V	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.
	☑ B. C	lips	
		\checkmark	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.
	☐ C. S	ingle Wr	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.
	Прг	Double W	•
			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.
	=	tructural ther:	Anchor bolts structurally connected or reinforced concrete roof.
	G. U	Jnknown	or unidentified
	☐ H. N	lo 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. H	Iip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total length of non-hip features: feet; Total roof system perimeter: feet
	☐ B. F	lat Roof	
	✓ C.	ther Roo	
6.	A. S	WR (alsheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o 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.
			or undetermined.
In			RB Property Address 501 E. Bay Drive Bldg 2800 Largo
⊹ П	This varifi	eation fo	orm is valid for up to five (5) years provided no material changes have been made to the structure or
	1112 ACI 1110	cauvii 10	vini is vaind for up to five (3) years provided no material changes have been made to the structure or

inaccuracies found on the form.

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 E. Bay Drive Bldg 2800 Largo

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	systems with no documentation) All Glazed openings are protected with nswer "A", "B", or C" or systems that appear to meet Answer "A" or "B" able 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 D in the table above, and no Non-Glazed openings classified as Level X in the							
table above	D in the table above, and no Non-Grazed openings classified as Level X in the						
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							
Section 627.711(2), Florida Statutes, prov	BE CERTIFIED BY A QUALIFIED INSPECTOR. ides a listing of individuals who may sign this form.						
Qualified Inspector Name: Ronald E. Bryant	License Type: Builder/Home Inspector License or Certificate #: 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							
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.							
	Section 489.111, Florida Statutes, or professional engineer licensed						
	ructures personally and not through employees or other persons.						
experience to conduct a mitigation verification inspection.	ect employee who possesses the requisite skill, knowledge, and						
-							
I, Ronald E. Bryant am a qualified inspector a (print name)	and I personally performed the inspection or (licensed						
contractors and professional engineers only) I had my emplo	oyee (myself) perform the inspection (print name of inspector)						
and I agree to be responsible for his/her work.	(print name or inspector)						
Qualified Inspector Signature:	Date: 7/18/219						
An individual or entity who knowingly or through gross ne	egligence provides a false or fraudulent mitigation verification form is						
	te Fraud and may be subject to administrative action by the						
appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida 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.	manual mappensar personal,						
H	17 (1: 1 1 1:1 6 : (: 0:1						
<u>Homeowner to complete</u> : 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.							
Signature:I	Date: 7/18/2019						
	false or fraudulent mitigation verification form with the intent to hich the individual or entity is not entitled commits a misdemeanor						
	ly and cannot be used to certify any product or construction feature						
Inspectors Initials RB Property Address 501 E. Bay Driv	ve Bldg 2800 Largo						
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	vided no material changes have been made to the structure or						

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155



Front Elevation



Side Elevation



Side Elevation



Rear Elevation



Decking



Roof Deck Attachment



Field Measure



Roof to Wall Attachment



Nail Length



SWR