## **Uniform Mitigation Verification Inspection Form**

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

Inspection Date: 07/18/2019							
Owner Information							
Owner Name: Magnolia Square Condo Inc. Contact Person: R. Bryant							
Address: 501 E. Bay Drive Bldg 3	3500		Home Phone:				
City: Largo	Zip:	33770	Work Phone:				
County: Pinellas			Cell Phone: (727) 243-0383				
Insurance Company:	·	Policy #:					
Year of Home: 1975	975 # of Stories: 2		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.

- 1. <u>Building Code</u>: 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) \_\_\_\_\_ \_\_\_ \_\_\_\_
  - C. Unknown or does not meet the requirements of Answer "A" or "B"
- <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 covering identified.

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	6/21/19		2019	
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 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. **<u>Roof Deck Attachment</u>**: What is the <u>weakest</u> 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 field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- 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 field.-OR- 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 field. -OR- 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

Largo

Inspectors Initials RB Property Address 501 E. Bay Drive Bldg 3500

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		182 psf.	
	Π	*	ed Concrete Roof Deck.
	H		or unidentified.
	H	G. No attic a	
		G. No attic a	access.
4.		eet of the insid	<b>tachment</b> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within le or outside corner of the roof in determination of WEAKEST type)
	$\Box$	A. Toe Nails	5
			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
	Mii	nimal conditi	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
			Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a $\frac{1}{2}$ " gap from
		L.	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.
	$\checkmark$	B. Clips	
		$\checkmark$	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. Single W	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 V	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.
		E. Structural	Anchor bolts structurally connected or reinforced concrete roof.
		F. Other:	
		G. Unknown	n or unidentified
		H. No attic a	access
5.	Ro	of Geometry:	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.
	_	· · ·	Total length of non-hip features: feet; Total roof system perimeter: feet
		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
	$\checkmark$	C. Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6.			er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
	$\checkmark$		so 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
		dwelling	from water intrusion in the event of roof covering loss.

- B. No SWR.C. Unknown or undetermined.

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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		Non-Glazed Openings				
openi form	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest form of protection (lowest row) for Non-Glazed openings.	Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		$\times$	X	Х		Х
Α	A Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	3 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	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						
N	Other protective coverings that cannot be identified as A, B, or C						
х	No Windborne Debris Protection					X	

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, <u>and</u> 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 <u>and</u> 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

<u>C</u> .	Exterior	Opening	Protection-	Wood	Structural	Panels	meeting	FBC	2007	All	Glazed	openings	are	covered	with
			the requireme												

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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N. Exterior Opening Protection (unverified shutted protective coverings not meeting the requirements of with no documentation of compliance (Level N in th	<b>er systems with no documentation</b> ) All Glazed openings are protected with f Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" e 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							
<ul> <li>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</li> </ul>							
N.3 One or More Non-Glazed openings is classified as I	Level X in the table above						
✓ X. None or Some Glazed Openings One or more G							
	T BE CERTIFIED BY A QUALIFIED INSPECTOR. rovides a listing of individuals who may sign this form.						
Qualified Inspector Name:       License Type:       License or Certificate #:         Ronald E. Bryant       Builder/Home Inspector       CB C058458/HI 2920							
Inspection Company: Qualified Services Corporation Inc.	Phone: (727) 243-0383						
Qualified Inspector – I hold an active license a	<u>s a</u> : (check one)						
training approved by the Construction Industry Licensing Bo							
Building code inspector certified under Section 468.607, Flor							
<ul> <li>General, building or residential contractor licensed under Sec</li> <li>Professional engineer licensed under Section 471.015, Florid</li> </ul>							
<ul> <li>Professional engineer neensed under Section 471.013, Florid</li> <li>Professional architect licensed under Section 481.213, Florid</li> </ul>							
	ossessing the necessary qualifications to properly complete a uniform mitigation						
under Section 471.015, Florida Statues, must inspect the Licensees under s.471.015 or s.489.111 may authorize a experience to conduct a mitigation verification inspectio	or and I personally performed the inspection or ( <i>licensed</i>						
and I agree to be responsible for his/her work.							
Qualified Inspector Signature:	Date: 7/18/219						
subject to investigation by the Florida Division of Insura appropriate licensing agency or to criminal prosecution	s negligence provides a false or fraudulent mitigation verification form is ance Fraud and may be subject to administrative action by the . (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who duct of employees as if the authorized mitigation inspector personally						
<b><u>Homeowner to complete</u></b> : I certify that the named Qualitresidence identified on this form and that proof of identification	ified Inspector or his or her employee did perform an inspection of the ation was provided to me or my Authorized Representative.						
Signature:	<b>Date:</b> 7/18/2019						
	rs a false or fraudulent mitigation verification form with the intent to o which the individual or entity is not entitled commits a misdemeanor						
The definitions on this form are for inspection purposes as offering protection from hurricanes.	only and cannot be used to certify any product or construction feature						
Inspectors Initials <u>RB</u> Property Address <u>501 E. Bay I</u>	Drive Bldg 3500 Largo						
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Front Elevation



Side Elevation



Side Elevation



Rear Elevation





Decking

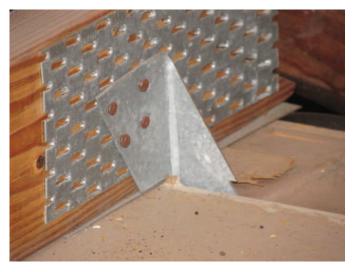
Roof Deck Attachment



Field Measure



Nail Length



Roof to Wall Attachment



SWR

