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

Maintain a copy of tr	iis form and any do	ocumentation provid	led with the insurance	e policy	
Inspection Date:					
Owner Information			I a		
Owner Name:			Contact Person:		
Address:	7.		Home Phone:		
City:	Zip:		Work Phone:		
County:			Cell Phone:		
Insurance Company:	1 4 00 :		Policy #:		
Year of Home:	# of Stories:		Email:		
NOTE: Any documentation used in valid accompany this form. At least one photograph though 7. The insurer may ask additional	graph must accompa	ny this form to validate	e each attribute marked	l in questions 3	
<u>Building Code</u> : Was the structure built the HVHZ (Miami-Dade or Broward cou	unties), South Florida	Building Code (SFBC-9	4)?		
☐ A. Built in compliance with the FBC a date after 3/1/2002: Building Perm	nit Application Date (M	M/DD/YYYY)//			
☐ B. For the HVHZ Only: Built in conprovide a permit application with a confidence of the second of					
☐ C. Unknown or does not meet the re	quirements of Answer	"A" or "B"			
<ol> <li>Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified.</li> </ol>					
	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance	
1. Asphalt/Fiberglass Shingle					
<u> </u>					
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 Miamiroofing permit application after 9/1/					
☐ C. One or more roof coverings do no					
☐ D. No roof coverings meet the requi	rements of Answer "A	." or "B".			
3. <b>Roof Deck Attachment</b> : What is the we	akest form of roof dec	ck attachment?			
<ul> <li>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.</li> <li>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 than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.</li> </ul>					
<ul> <li>C. Plywood/OSB roof sheathing wi</li> <li>24"inches o.c.) by 8d common nails</li> <li>decking with a minimum of 2 nails</li> </ul>	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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		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.
	П	D. Reinforced Concrete Roof Deck.
		E. Other:
	П	F. Unknown or unidentified.
		G. No attic access.
4.	Ro	<b>to Wall Attachment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valley jacks within eet of the inside or outside corner of the roof in determination of WEAKEST type)
		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	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, <b>and</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.
	Ш	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 nail position requirements of C or D, but is secured with a minimum of 3 nails.
	Ш	C. Single Wraps  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 Wraps  Metal Compositors consisting of 2 concepts strong that are attached to the well from an embedded in the hand
		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 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 of the host structure 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
		C. Other Roof Any roof that does not qualify as either (A) or (B) above.
6.	<u>Sec</u>	<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>
In	spec	etors Initials M. Property Address
1	1115	verification form is valid for up to five (5) years provided no material changes have been made to the structure or

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inaccuracies found on the form.

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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.

	Opening Protection Level Chart  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.		Glazed Openings				Non-Glazed Openings	
openi form			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							
I N	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

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

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• For Garage Doors Only: ANSI/DASMA 115

☐ 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. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> 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

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	N. Exterior	Opening Protection (unverified shutter		SANDON BOOK WAS AFTER THE SAND SAND	Whether in south	
		Opening Protection (unverified shutter solverings not meeting the requirements of Aumentation of compliance (Level N in the tax		o", or C" or systems	All Glazed openings are protected wit that appear to meet Answer "A" or "B	
	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					
		More Non-Glazed openings is classified as Lev				
$\times$	V None on	Carry Classified as Lev	el X in the table	above		
A :	A. None of	Some Glazed Openings One or more Glaze		The State of the S		
	Į.	MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	E CERTIFIE	D BY A QUALIFIEI f individuals who m	O INSPECTOR.  av sign this form.	
	inspector Name:	Steven Rosenbaum	License Type:	Engineering	License or Certificate #: 49307	
Inspection	Company:	Insight Inspections		Phone:	(941) 224-9030	
Quali	fied Inspe	ctor – I hold an active license as a	(check on	)		
Ho	me inspector l	icensed under Section 468.8314, Florida Statute I by the Construction Industry Licensing Board	s who has come	loted the statut	nber of hours of hurricane mitigation	
☐ Bui	lding code ins	spector certified under Section 468.607, Florida	Statutes.	or a proficioncy exam.		
		or residential contractor licensed under Section		a Statutes		
X Pro	fessional engi	neer licensed under Section 471.015, Florida Sta	itutes.	- Suite of		
☐ Pro	fessional arch	itect licensed under Section 481.213, Florida Sta	itutes.			
☐ Any	other individ	lual or entity recognized by the insurer as posses	sing the necess	ury qualifications to no	onerly complete a uniform mitigation	
		parsuant to Section 027.711(2), Florida Statutes	•			
Individ	uals other th	han licensed contractors licensed under S	ection 489.11	1, Florida Statutes.	or professional engineer licensed	
	CCCHOIL T/ Lot	212, 1 1011ua Statues, must misher the str	ICTHIPGE DOPEO	nally and mat there	and the second of the second o	
THE PARTY OF	es differ 3.7	71.015 or s.489.111 may authorize a dire	ct employee v	vho possesses the re	quisite skill, knowledge, and	
		senbaum am a qualified inspector ar	ıd I personall	y performed the in	spection or (licensed	
	(Ly yave weer	me; fessional engineers only) I had my emplo;				
1		1100-07 991 1-70 -5		print name of inspe	erform the inspection	
and I a	gree to be re	esponsible for his/her work.	1	/	/	
Qualifie	d Inspector	Signature:	<u>l</u>	Date:	12022	
An indiv	vidual or en	tity who knowingly or through gross neg	ligence provid	les a false or fraudi	llent mitigation verification form is	
Der to le ce	O WILL A COSTE STI	TOU DY LUC PROPERTY AND THE INCHPANCE	Hrond and ma	OUT has authined to ad		
White ohi	Tate Heelish	ig agency of to criminal prosecution. (Sec	tion 627 7114	1)_(7) Florido Stat	nton) The One I'm I'm	
perform	ed the inspe	hall be directly liable for the misconduct	or employees	as if the authorized	mitigation inspector personally	
Homeo	wner to co	mmlatae I contife that the 10 110 11				
residence	e identified o	mplete: I certify that the named Qualified on this form and that proof of identification	Inspector or hi was provided	s or her employee di to me or my Authori	d perform an inspection of the zed Representative.	
Signature: Jerry Mchart Date: 11/4/22						
1 1 1/20						
An indiv	idual or ent	ity who knowingly provides or utters a fa	alse or fraudu	lent mitigation ver	ification form with the intent to	
OD LEADIN O	i i cccive a u	liscount on an insurance premium to whi Section 627.711(7), Florida Statutes)	ch the individ	lual or entity is not	entitled commits a misdemeanor	
The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.						
Inspectors Initials Property Address 916 Capri Isles Blvd.						
*This ve	*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or					
HARACCC CALL CE	cies loung o	n che form.		g	to the structure or	
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Gable roof shape, 40 In ft total
Balance of roof is Hip
Gable % = Gable In ft / Total In ft
= 40 / 360 = 11%



8d nails verified



Nail location verified



6" spacing in the field



Single strap with at least 3 nails into the truss



SWR installed under the tile