Uniform Mitigation Verification Inspection Form

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

| Inspection Date: 06/25/2020 | | | | | | |
|--|--|---|---|--|--|--|
| Owner Information | | | | | | |
| Owner Name: Kentucky Club Condomir | Contact Person: Gail | | | | | |
| Address: 1536 Ocean Dr. Bldg B Home Phone: 772-231-6717 | | | | | | |
| City: Vero Beach Fl. | Zip: 32963 | | Work Phone: | | | |
| County: Indian River | | | Cell Phone: | | | |
| Insurance Company: | | | Policy #: | | | |
| Year of Home: 1980 | # of Stories: 4 | | Email: | | | |
| 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 the HVHZ (Miami-Dade or Broward cou | | | | for homes located in | | |
| ☐ A. Built in compliance with the FBC a date after 3/1/2002: Building Perm | : Year Built | For homes built | in 2002/2003 provide a per | mit application with | | |
| ☐ B. For the HVHZ Only: Built in conprovide a permit application with a confidence of the confidence | npliance with the SFB | C-94: Year Built | For homes built in 19 | | | |
| X C. Unknown or does not meet the re | | • | | | | |
| 2. Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified. | | | | | | |
| Permit | Application Date | FBC or MDC Product Approval # | Year of Original Installation or Replacement | No Information Provided for Compliance | | |
| 1. Asphalt/Fiberglass Shingle /_ | _/ | | | | | |
| 2. Concrete/Clay Tile | _/ | | | | | |
| ☐ 3. Metal/_ | _/ | | | | | |
| | _/ | | | | | |
| | | | | | | |
| | | 2004102895 | | | | |
| | • | | | | | |
| | 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 no | | | | | | |
| ☐ D. No roof coverings meet the requi | D. No roof coverings meet the requirements of Answer "A" or "B". | | | | | |
| 3. Roof Deck Attachment : What is the we | akest form of roof de | ck attachment? | | | | |
| by staples or 6d nails spaced at 6" a shinglesOR- Any system of screw | 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. | | | | | |
| 24"inches o.c.) by 8d common nails other deck fastening system or truss/ | 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. | | | | | |
| 24"inches o.c.) by 8d common nails decking with a minimum of 2 nails j | 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 <u>J.B.</u> Property Address | s 1536 Ocean Dr. 1 | Bldg B Vero Beach F | 1. 32963 | | | |

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

| | | 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. | | | |
|----|--|--|--|--|--|
| | X | D. Reinforced Concrete Roof Deck. | | | |
| | | E. Other: | | | |
| | | F. Unknown or unidentified. | | | |
| | | G. No attic access. | | | |
| 4. | | of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within the total 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 t the top plate of the wall, or | | | |
| | | ☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D | | | |
| | Mir | 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, 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. | | | |
| | | B. 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 na position requirements of C or D, but is secured with a minimum of 3 nails. | | | |
| | | C. Single Wraps Metal connectors consisting of a single atrea that wrong even the top of the trace/refter and is account with | | | |
| | | Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side. | | | |
| | | D. Double Wraps | | | |
| | | ☐ 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. | | | |
| | X | E. Structural Anchor bolts structurally connected or reinforced concrete roof. | | | |
| | | F. Other: | | | |
| | | G. Unknown or unidentified | | | |
| | | H. No attic access | | | |
| 5. | | 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 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. | | | |
| | X | 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 areasq ft C. Other Roof Any roof that does not qualify as either (A) or (B) above. | | | |
| 6. | Sec | condary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) | | | |
| | 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. | | | | |
| | X | B. No SWR. C. Unknown or undetermined. | | | |
| In | spec | tors Initials J.B. Property Address 1536 Ocean Dr. Bldg B Vero Beach Fl. 32963 | | | |
| *Т | hic v | 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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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 | |
|--|---|------------------------------|-----------------|-----------|----------------|------------------------|-----------------|
| | | 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 | | X | X | X | | |
| Α | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | X | | | | | X |
| 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 | | | | | | |
| IN | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| Х | No Windborne Debris Protection | | | | | X | |

| 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, and 203
- Impact Windows & Shutters
- 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.)
 - \square 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).
 - 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 shutter sprotective coverings not meeting the requirements of An with no documentation of compliance (Level N in the tax | nswer "A", "B", or C" or sys | ation) All Glazed openings are protected with stems that appear to meet Answer "A" or "B" | | |
|--|---|--|--|--|
| ☐ N.1 All Non-Glazed openings classified as Level A, B, C, o | or N in the table above, or no No | on-Glazed openings exist | | |
| N.2 One or More Non-Glazed openings classified as Level table above | | | | |
| ☐ N.3 One or More Non-Glazed openings is classified as Lev | el X in the table above | | | |
| X. None or Some Glazed Openings One or more Glaz | | evel X in the table above. | | |
| MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov | BE CERTIFIED BY A QUAI | LIFIED INSPECTOR. who may sign this form. | | |
| Qualified Inspector Name: | License Type: General Contractor | License or Certificate #: CGC 025691 | | |
| James F. Bartlett Inspection Company: | General Contractor | Phone: | | |
| BARTLETT CONSTRUCTION INC. | | 772-388-3469 | | |
| Qualified Inspector – I hold an active license as a | | | | |
| Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board | es who has completed the statu and completion of a proficience | tory number of hours of hurricane mitigation by exam. | | |
| Building code inspector certified under Section 468.607, Florida | | | | |
| X General, building or residential contractor licensed under Section | | | | |
| Professional engineer licensed under Section 471.015, Florida S | | | | |
| Professional architect licensed under Section 481.213, Florida S | | | | |
| Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute | essing the necessary qualifications. | ons to properly complete a uniform mitigation | | |
| (print name) contractors and professional engineers only) I had my emploand I agree to be responsible for his her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross n subject to investigation by the Florida Division of Insuran appropriate licensing agency or to criminal prosecution. (Sertifies this form shall be directly liable for the misconduperformed the inspection. Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification. | and I personally performed loyee (| d the inspection or (licensed) perform the inspection of inspector) 06/25/2020 or fraudulent mitigation verification form is ect to administrative action by the rida Statutes) The Qualified Inspector who athorized mitigation inspector personally uployee did perform an inspection of the | | |
| Signature: Date: 06/25/2020 | | | | |
| 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 only and cannot be used to certify any product or construction feature as offering protection from hurricanes. | | | | |
| Inspectors Initials J.B. Property Address 1536 Ocean | n Dr. Vero Beach Fl. 32963 | Blog B | | |
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| inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 | 1 | Page 4 of 4 | | |

Kentucky Club Bldg B















































