Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/18/2023						
Owner Information						
Owner Name: LAKE CLARKE GARDENS HO	A		Contact Person:			
Address: 2811 S GARDEN DR.			Home Phone:			
City: LAKE WORTH	Zip: 33461		Work Phone:			
County: PALM BEACH			Cell Phone:			
Insurance Company:	,		Policy #:			
Year of Home: 1971	# of Stories: 3		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.						
the HVHZ (Miami-Dade or Broward co	 Building Code: 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 corprovide a permit application with a	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 re	-					
 Roof Covering: Select all roof covering OR Year of Original Installation/Replac 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						
П						
П						
X 5. Membrane6/	<u>11 / 2004</u>	SEE PICTURES				
☐ 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 Miamiroofing permit application after 9/1/						
\Box C. One or more roof coverings do no	ot meet the requiremen	nts of Answer "A" or "B	".			
☐ D. No roof coverings meet the requi	rements of Answer "A	." or "B".				
3. Roof Deck Attachment: What is the we	eakest form of roof dec	ck 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 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.					
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 BB Property Addre	ss 2811 S GARDEN DF	R. LAKE WORTH, FL				

*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 res	sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		•	ed Concrete Roof Deck.
			or unidentified.
		G. No attic a	
1			
4.		eet of the insid	tachment: 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. 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	nimal condition	ons to qualify for categories B, C, or D. All visible metal connectors are:
		X	Secured to truss/rafter with a minimum of three (3) nails, and
		X	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.
	X	B. Clips	
		X	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	
			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, 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.
		E. Structural	Anchor bolts structurally connected or reinforced concrete roof.
		F. Other:	
		G. Unknown	or unidentified
		H. No attic a	nccess
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.
	X	B. Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet
			less than 2:12. Roof area with slope less than 2:12 10,000+ sq ft; Total roof area 10,000+ sq ft
		C. Other Roo	of Any roof that does not qualify as either (A) or (B) above.
6.		A. SWR (also sheathing dwelling B. No SWR.	
	X	C. Unknown	or undetermined.
Ins	spec	tors Initials _	BB Property Address 2811 S GARDEN DR. LAKE WORTH, FL
*Т	hia -	fiaatian fa	num is valid for up to five (5) years provided no motorial shanges 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		Glazed Openings				Non-Glazed Openings	
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.		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	Х	Х	Х	Χ	Χ	Х	
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							
IN	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
\square 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 s protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or system	n) All Glazed openings are protected with as that appear to meet Answer "A" or "B"			
☐ N.1 All Non-Glazed openings classified as Level A, B, C, o	r N in the table above, or no Non-C	Glazed openings exist			
N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no Non-G	blazed 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 Glazed	ed openings classified and Leve	l X in the table above.			
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	~				
Qualified Inspector Name: BRIAN BRITO	License Type: GENERAL CONTRACTOR	License or Certificate #: CGC 1513974			
Inspection Company: AXIOM INSPECTION SERVICES INC.	Pho	one:			
	(ahaali ana)	561-350-0836			
 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 Statutes. General, building or residential contractor licensed under Section 489.111, Florida Statutes. Professional engineer licensed under Section 471.015, Florida Statutes. Professional architect licensed under Section 481.213, Florida Statutes. 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. 					
Individuals other than licensed contractors licensed under					
under Section 471.015, Florida Statues, must inspect the str					
<u>Licensees under s.471.015 or s.489.111 may authorize a direction of experience to conduct a mitigation verification inspection.</u>	ect employee who possesses th	e requisite skill, knowledge, and			
I, BRIAN BRITO am a qualified inspector a (print name)	nd I personally performed the	e inspection or (licensed			
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 i	ispector)			
Qualified Inspector Signature:	Date:5/18/202	23			
An individual or entity who knowingly or through gross ne					
subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (S					
certifies this form shall be directly liable for the misconduc performed the inspection.					
Homeowner to complete: I certify that the named Qualified	Inspector or his or her employ	ee did perform an inspection of the			
residence identified on this form and that proof of identification					
Signature: Date:					
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 certif	fy any product or construction feature			
Inspectors Initials BB Property Address 2811 S GARDEN DR. LAKE WORTH, FL					
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WIND MITIGATION PICTURES:

EXTERIOR:













ROOF TO WALL CONNECTION:



Clip Connection found using Endoscope (Checked several locations and found to be consistent at multiple locations)



SHEETING/NAILING: (Per FBC the roof required 8d nails with 4-6" spacing)

OPENING PROTECTION: n/a

PERMIT:

