Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/18/2023	is form and any ac	*	ded with the insurance			
Owner Information						
Owner Name: LAKE CLARKE GARDENS HOA			Contact Person:			
Address: 2640 S GARDEN DR.			Home Phone:			
City: LAKE WORTH	Zip: 33461		Work Phone:			
County: PALM BEACH			Cell Phone:			
Insurance Company:			Policy #:			
Year of Home: 1969	# of Stories: 3		Email:			
NOTE: Any documentation used in valida accompany this form. At least one photog though 7. The insurer may ask additional	raph must accompa	ny this form to valida	te each attribute marked	d in questions 3		
Building Code: Was the structure built in the HVHZ (Miami-Dade or Broward country).	nties), South Florida	Building Code (SFBC-	94)?			
☐ A. Built in compliance with the FBC a date after 3/1/2002: Building Permi	it Application Date (M	M/DD/YYYY)///				
☐ B. For the HVHZ Only: Built in comprovide a permit application with a d						
☑ C. Unknown or does not meet the red	quirements of Answer	"A" or "B"				
 Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified. 						
Permit A	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
1. Asphalt/Fiberglass Shingle	_/					
		SEE PICTURES				
	_/	<u> </u>				
A. All roof coverings listed above me installation OR have a roofing permi	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-roofing permit application after 9/1/1						
\Box C. One or more roof coverings do no	•		B".			
☑ D. No roof coverings meet the requir	rements of Answer "A	." or "B".				
3. Roof Deck Attachment : What is the wear	akest 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/						
24"inches o.c.) by 8d common nails decking with a minimum of 2 nails p	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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*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 resi	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	П	•	d Concrete Roof Deck.
			or unidentified.
	X	G. No attic ac	
1			
4.		et of the inside	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. 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
	Miı	nimal conditio	ns 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
		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 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.
		D. Double W	raps
			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 ac	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. 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 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 10,000+ sq ft; Total roof area 10,000+ sq ft
		C. Other Roo	f Any roof that does not qualify as either (A) or (B) above.
6.	Sec	A. SWR (also sheathing	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.
	X	C. Unknown	or undetermined.
Ins	spec	tors Initials <u>E</u>	BB Property Address 2640 S GARDEN DR. LAKE WORTH, FL
*Т	1.1		um is valid for un to five (5) years provided no motorial changes have been made to the structure or

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7. <u>Opening Protection</u>: 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	Х	Х	Х	Х	X	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
- 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
\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
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
\square 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 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 syste	on) All ems that	Glazed openings are protected with 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-	-Glazed o	openings exist		
N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no Non-	Glazed o	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 Lev	el X in	the table above.		
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	_				
Qualified Inspector Name: BRIAN BRITO	License Type: GENERAL CONTRACTO		License or Certificate #: CGC 1513974		
Inspection Company: AXIOM INSPECTION SERVICES INC.		hone:	-350-0836		
	· (chack ana)	301	-330-0630		
 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	Section 489.111, Florida Stat	tutes, or	r professional engineer licensed		
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 t	he requ	usite skill, knowledge, and		
		•			
I, BRIAN BRITO am a qualified inspector a (print name)	nd I personally performed the	ne inspe	ection or (<i>ncensea</i>		
contractors and professional engineers only) I had my emplo			orm the inspection		
and I agree to be responsible for his/her work.	(print name of	inspect	or)		
Qualified Inspector Signature:	Date:5/18/20	023			
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 Qualifie	d Inspector or his or her emplo	wee did	perform an inspection of the		
Homeowner to complete: 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: 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 cert	ify any	product or construction feature		
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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: No access

OPENING PROTECTION: n/a

PERMIT:

