Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/10/13		seamentation pro-					
Owner Information							
Owner Name: LAKESIDE TOWNHOMES HOA INC.			Contact Person:				
Address: 3426-3442 Heards Ferry Drive Bldg				Home Phone:			
City: Tampa FL				Work Phone:			
County: HILLSBOROUGH				Cell Phone:			
Insurance Company: Policy #:							
Year of Home: 2001	# of Stories: 2		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.							
 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 (MMDD/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" Roof Covering: Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number 							
OR Year of Original Installation/Replacovering identified.	cement OR indicate tha	t no information was	available to verify complia				
Perr 2.1 Roof Covering Type:	nit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
1. Asphalt/Fiberglass Shingle	//		2001				
	//						
	//						
п —	/ <u>/</u>			П			
	//						
_	//						
 A. All roof coverings listed above installation OR have a roofing per B. All roof coverings have a Mian roofing permit application after 9/ C. One or more roof coverings do D. No roof coverings meet the req 	mit application date on one in-Dade Product Approval 1/1994 and before 3/1/2 not meet the requirement	or after 3/1/02 OR the ral listing current at time 3/1/02 OR the roof is or after of Answer "A" or	roof is original and built in me of installation OR (for t iginal and built in 1997 or l	n 2004 or later. he HVHZ only) a			
3. Roof Deck Attachment : What is the v	veakest form of roof de	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. 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 JL Property Address 3426-3442 Heards Ferry Drive Bldg 8 Tampa FL 33618							

*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.
D. Reinforced Concrete Roof Deck.
E. Other:
F. Unknown or unidentified.
G. No attic access.
4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet 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
Minimal 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 nail position requirements of C or D, but is secured with a minimum of 3 nails.
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 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 access
5. Roof Geometry: 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: 0 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. Secondary 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. B. No SWR.
C. Unknown or undetermined.
Inspectors Initials JL Property Address 3426-3442 Heards Ferry Drive Bldg 8 Tampa FL 33618
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7. Opening Protection: What is the weakest 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.

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 any of the Glazed openings. NA Not Rota Applicable: there are no openings of this type on the structure A Verified cyclic pressure & large missile (9-1b for windows doors/4.5 ib for skylights) B Verified cyclic pressure & large missile (9-1b for windows doors/2 lb for skylights) C Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance Opening Protection products that appear to be A or B but are not verified Other protective coverings that cannot be identified as A, B, or C X No Windborne Debris Protection X X X X A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected a minimum, with impact resistant coverings or products lbitsed 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 • For Skylights Only: 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 Level D in the table above, and no Non-Glazed openings 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 Glaz openings are protected, at a minimum, with impact resistant coverings or products	•	Opening Protection Level Chart		Glazed Openings				Non-Glazed Openings	
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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, 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 Glaz openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection device 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.)	П		· · · · · · · · · · · · · · · · · · ·						
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openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection device 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.)		A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X is	n the table a	bove					
	o _l	penings are protected, at a minimum, with impact resistant coverings the product approval system of the State of Florida or Miami-Dade Cor "Cyclic Pressure and Large Missile Impact" (Level B in the table ab • ASTM E 1886 <u>and</u> ASTM E 1996 (Large Missile – 4.5 lb.) • SSTD 12 (Large Missile – 4 lb. to 8 lb.)	or products County and pove):	s listed as meet the	windborn requireme	e debris	s protect	ion device	
		· · · · · · · · · · · · · · · · · · ·							

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

Inspectors Initials

Property Address

3426-3442 Heards Ferry Drive Bldg 8 Tampa FL 33618

plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).

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

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

C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.

in the table above

N. Exterior Opening Protection (unverified shutter s protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the to	nswer "A", "B", or					
with no documentation of compliance (Level N in the 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						
N.2 One or More Non-Glazed openings classified as Level I table above						
N.3 One or More Non-Glazed openings is classified as Leve	el X in the table abo	ve				
X. None or Some Glazed Openings One or more Glaze			Level X in	the table ab	oove.	
Marie areas propressions arrives	CENTIFIED -	OU 41	LIELED IN	ICDE CEO	n.	
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi		~				
Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/	NACHI		License or Cert HI-829 /	tificate #: NACHI 10090703	
Inspection Company: ELITE CERTIFIED INSPECTIONS	3		Phone: 72	7-683-1	492	
Qualified Inspector – I hold an active license as a	: (check one)		•			
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	s who has complete			of hours of	hurricane mitigation	
Building code inspector certified under Section 468.607, Florida	Statutes.					
General, building or residential contractor licensed under Section	489.111, Florida S	tatutes.				
Professional engineer licensed under Section 471.015, Florida St Professional architect licensed under Section 481.213, Florida St	atutes.					
Professional architect licensed under Section 481.213, Florida St	atutes.					
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 sunder Section 471.015, Florida Statues, must inspect the structure Licensees under s.471.015 or s.489.111 may authorize a direct experience to conduct a mitigation verification inspection. I. Joseph Lamoureux am a qualified inspector a	uctures personal ect employee who	ly and no possesse	ot through es the requ	employee isite skill,	s or other persons. knowledge, and	
(print name) contractors and professional engineers only) I had my employee () perform the inspection						
and I agree to be responsible for his/her work. Ju L. Qualified Inspector Signature:		int name o te: <u>5/1</u>	of inspect	or)		
An individual or entity who knowingly or through gross nesubject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduct performed the inspection.	gligence provides e Fraud and may ection 627.711(4)	a false of be subject-(7), Flori	r fraudule ct to admi ida Statut	nistrative es) The Qu	action by the ualified Inspector who	
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification						
Signature: Date: 5/10/13						
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to who first degree. (Section 627.711(7), Florida Statutes)						
The definitions on this form are for inspection purposes onlas offering protection from hurricanes.	y and cannot be	used to co	ertify any	product o	r construction feature	
Inspectors Initials JL Property Address 3426-3442	Heards Ferry	Drive E	Bldg 8	Гатра Г	FL 33618	
*This verification form is valid for up to five (5) years proving course found on the form.	ided no material	changes l	have been	made to t	he structure or	

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