

Uniform Mitigation Verification Inspection Form

Maintain a copy of this form with the insurance policy

| | | |
|--|------------------------|-----------------|
| Inspection Date: 08/26/15 | | |
| Owner Information | | |
| Owner Name: Casa Del Sol at Tequesta POA, Inc | | Contact Person: |
| Address: 701-705 Del Sol Circle | | Home Phone: |
| City: Tequesta | Zip: 33469 | Work Phone: |
| County: Palm Beach | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 2006 | # 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 through 7. The insurer may ask additional questions regarding the mitigated feature (s) verified on this form.

1.) **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 **2006**. For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MM/DD/YYYY) **10/17/2005**
- 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".

2.) **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 Replacement OR indicate that no information was available to verify compliance for each roof.

| 2.1 Roof Covering Type: | Permit Application Date | FBC or MDC Product Approval # | Year of Original Installation Replacement | No Information Provided for Compliance |
|---|-------------------------|-------------------------------|---|--|
| <input type="checkbox"/> 1. Asphalt/Fiberglass Shingle | / / | | | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> 2. Concrete/Clay Tile | 09/09/2014 | see attached letter | B14-000354 | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | / / | | | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | / / | | | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | / / | | | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | / / | | | <input type="checkbox"/> |

- 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-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 not meet the requirements of Answer "A" or "B".
- D. No roof coverings meet the requirements of Answer "A" or "B".

3.) **Roof Deck Attachment:** What is the **weakest** form of the roof deck attachment?

- A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 2 inches o.c.) by staples or 6d nails spaced at 6" along the edge and 12" in the field. –OR- Batten decking supporting wood shakes or wood shingles –OR- 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 Option B or C below.
- B. Plywood/OSB roof sheathing with a minimum thickness of 7/16" attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by 8d common nails spaced a maximum 12" in the field –OR- 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" attached to the roof truss/rafter (spaced a maximum of 24" o.c.) by 8d common nails spaced a maximum of 6" in the field – OR- Dimensional lumber/Tongue and 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" in width).–OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that has an equivalent or greater resistance than 8d

Inspectors Initials CRS Property Address **701-705 Del Sol Circle, Tequesta, Florida 33469**

• This verification form is valid for up to five years (5) years provided no material changes have been made to the structure or no inaccuracies on this form. OIR-B1-1802 (Rev. 01.12) Adopted by rule 690-170.0155

common nails spaced a maximum of 6" 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 the 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 1/2" gap from the blocking or truss/rafter **and** blocked no more than 1.5" of the truss/rafter, **and** free of visual 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 rto 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 opposite side, or
 - Metal connectors consisting of a single strap that wraps ob=ver 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. Not attic access

5.) **Roof Geometry:** What is the roof shape(s)? (Do no 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 the 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 feature: 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. feet; Total roof area sq. feet.
- 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 a 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 unidentified.

Inspectors Initials: CRS Property Address 701-705 Del Sol Circle, Tequesta, Florida 33469

- 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, .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 | | |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | X | | | | X | X |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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 E1996.
- * 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 (2-4.5lb 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 E1996. (Large Missile – 2lb to 4.5lb.)

- 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 systems with no documentation):** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "B" 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 D in the table above, and no Non-Glazed openings classified as Level X in the table above.
- N.3 One or more Non-Glazed openings is classified as Level X in the table above.
- X. **None or Some Glazed Openings:** One or more Glazed openings classified and Level X in the table above.

| | | |
|---|---|--|
| MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form. | | |
| Qualified Inspector Name: Craig R. Smith | License Type: Home Inspector | License # or MS FH certification# HI3442 |
| Inspection Company: C. Dick Smith Quality Home Inspections, Inc. | Phone: 561-801-2689-cell or 561-625-3028-office cdicksmith@bellsouth.net | |

Qualified Inspector – I hold an active license or certificate 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 471.213, 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 Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, must inspect the structures personally and not through employees Or other persons. Licensees under Section 471.111 may authorize a direct employee who possesses the requisite skill Knowledge, and experience to conduct a mitigation verification inspection.

I, Craig R. Smith am a qualified inspector and I personally performed the inspection.

Print name

Qualified Inspector Signature:



Date: 08/26/15

An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes). The Qualified Inspector who certifies this form shall be directly liable for the misconduct of Employees as if the authorized inspector personally performed the inspection.

Homeowner To Complete: I certify that the name 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: _____

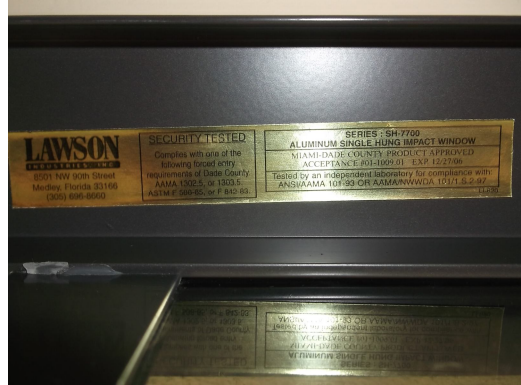
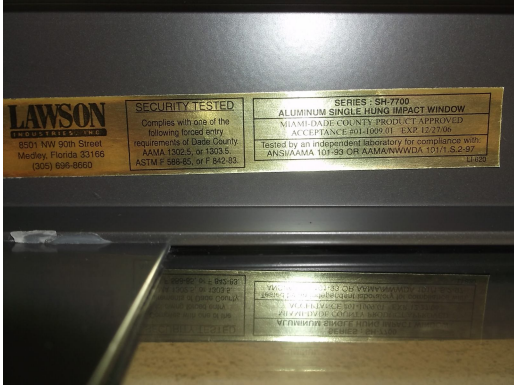
An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to obtain or receive a discount on an insurance premium to which the individual or entity is not certified commits a misdemeanor of the first degree. (Section 627.711(7), Florida Statutes.)

The definitions on this form are for inspections purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.

Inspectors Initials CRS Property Address 701-705 Del Sol Circle, Tequesta, Florida 33469

Property Photo's
701-705 Del Sol Circle, Tequesta, Florida 33469





Qualified Inspector Signature:

Date: 08/26/15

CERTIFICATE OF COMPLETION

Certificate Number 18020588

Craig Smith

Has successfully completed the class and examination for inspectors.

Course Name:

Inspector Training Program for Uniform Mitigation Verification Form OIR 1802

Class Date: 2/23/2011

William H York



Inspectors listed on: www.1802inspectors.com



C. Dick Smith

QUALITY INSPECTIONS, INC.

HOME

CONDO

MOBILE HOME

Re: Tile Roof on 701 Del Sol Circle, Tequesta, Florida 33469

To whom it may concern

The latest Uniform Mitigation Form OIR-B1-1802 (2/10) no longer allows for the inspector to select an option that refers to tile roofs installed to the FBC standards. This is because Questions 2 (Option A) on this form refers only to the testing requirements for Shingle Roofs and Metal Roofs. No other roof types are allowed.

Therefore, this letter serves to confirm that the tile roof on the inspection residence, based upon the confirmation permit application date or the build date of the home, was installed in accordance with the 2001 FBC for tile roofs. However as a tile roof cannot meet Option A, inspectors are obligated to select Option B: (Does not meet the above minimum requirements) for Question 2.

Please feel free to contact me with any questions.

Inspector signature

Date: 08/26/15

9369 Birmingham Drive, Palm Beach Gardens, FL 33410
(561) 625-3028 / Cell (561) 801-2689

State of Florida
Home inspector
Lic #
HI3442

Palm Beach County
Home Inspector
Lic #
2003-0117

State of Florida
Mold Assessor
Lic #
MRSA896