Uniform Mitigation Verification Inspection Form

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

Inspection Date: Apr 25, 2015				
Owner Information				
Owner Name: Embassy Park Condo Associ	ciation		Contact Person: Embassy	Park Condo Association
Address: 1700 EMBASSY DRIVE 101 -104			Home Phone: 561-9	00-4317
City: WEST PALM BECH	Zip: 33401		Work Phone:	
County: PALM BEACH			Cell Phone:	
Insurance Company:			Policy #:	
Year of Home: 1979	# of Stories: 2		Email: office@embassypa	arkwpb.com
NOTE: Any documentation used in validaccompany this form. At least one photog though 7. The insurer may ask additional	graph must accompa	ny this form to valida	ate each attribute mark	ed in questions 3
 Building Code: Was the structure built in the HVHZ (Miami-Dade or Broward could be a date after 3/1/2002: Building Perm 	inties), South Florida C: Year Built	Building Code (SFBC . For homes built	C-94)? in 2002/2003 provide a p	
 B. For the HVHZ Only: Built in comprovide a permit application with a C. Unknown or does not meet the re 	date after 9/1/1994: B	uilding Permit Applic		
2. <u>Roof Covering:</u> 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				
·				
- TAR DITCH/CRAVE	_/		2001	
A. All roof coverings listed above m installation OR have a roofing perm	eet the FBC with a FI		oduct Approval listing cu	irrent at time of
☐ B. All roof coverings have a Miamiroofing permit application after 9/1/				
☐ C. One or more roof coverings do no	ot meet the requirement	nts of Answer "A" or	"B".	
☐ D. No roof coverings meet the require	rements of Answer "A	a" or "B".		
3. Roof Deck Attachment: What is the we	akest form of roof de	ck attachment?		
A. Plywood/Oriented strand board (0 by staples or 6d nails spaced at 6" a shinglesOR- Any system of screws mean uplift less than that required for	OSB) roof sheathing a along the edge and 12 s, nails, adhesives, oth	ttached to the roof tru " in the fieldOR- B er deck fastening syst	atten decking supporting	wood shakes or wood
B. Plywood/OSB roof sheathing with 24"inches o.c.) by 8d common nails other deck fastening system or truss maximum of 12 inches in the field of	spaced a maximum of rafter spacing that is r has a mean uplift r	f 12" inches in the fie s shown to have an eq esistance of at least 10	ldOR- Any system of so uivalent or greater resist 3 psf.	crews, nails, adhesives, ance 8d nails spaced a
C. Plywood/OSB roof sheathing wit 24"inches o.c.) by 8d common nails decking with a minimum of 2 nails pany system of screws, nails, adhesive	spaced a maximum of per board (or 1 nail poves, other deck fasten	of 6" inches in the fieler board if each board ng system or truss/ra	dOR- Dimensional lum is equal to or less than 6	iber/Tongue & Groove inches in width)OR-
Inspectors Initials MC Property Address	ss 1700 EMBASSY D	RIVE 101 -104		

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

		18	2 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at leas
	¥			d Concrete Roof Deck.
				or unidentified.
			No attic a	
	_			
4.	5 fe	eet o	of the insid	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)
	Ш	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
	Mi	nim	al conditio	ons 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 nai position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single W	raps 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	** •
				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.
	\checkmark	E.	Structural	Anchor bolts structurally connected or reinforced concrete roof.
		F.	Other:	
		G.	Unknown	or unidentified
		H.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall o over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
	√	C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft of Any roof that does not qualify as either (A) or (B) above.
•	Car		Janua Wa4a	w Designation of (CW/D) ((story lead and shallown entropy lead to a grant of falter do not small for one of CW/D)
0.	Sec ✓		SWR (als	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 gor 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.
		В.	No SWR.	
		C.	Unknown	or undetermined.
In	spec	tor	s Initials _	MC Property Address 1700 EMBASSY DRIVE 101 -104
*T	hic '	veri	ification fo	orm 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 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.

-	Opening Protection Level Chart Place an "X" in each row to identify all forms of protection in use for each		Glazed Openings				Non-Glazed Openings	
openi form	ing type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate reakest 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		X	X	X		X	
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	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
- 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
- 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.)
\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

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

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

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

the table above

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N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the	answer "A", "B", or C" or sy		
• `	· · · · · · · · · · · · · · · · · · ·	T 01	1
 N.1 All Non-Glazed openings classified as Level A, B, C, N.2 One or More Non-Glazed openings classified as Leve table above 			
☐ N.3 One or More Non-Glazed openings is classified as Le	vel X in the table above		
X. None or Some Glazed Openings One or more Gla	zed openings classified and	Level X	in the table above.
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, prov	~		
Qualified Inspector Name:	License Type: Home Inspect	~	License or Certificate #:
Michael Casella Inspection Company:	nome inspect	Phone:	HI 432
		5	661-479-1810
Qualified Inspector – I hold an active license as a	- '		
Home inspector licensed under Section 468.8314, Florida Statutraining approved by the Construction Industry Licensing Board	d and completion of a proficience		
Building code inspector certified under Section 468.607, Florid			
General, building or residential contractor licensed under Section 471 015. Florida			
 □ Professional engineer licensed under Section 471.015, Florida □ Professional architect licensed under Section 481.213, Florida 			
Any other individual or entity recognized by the insurer as poss		one to n	conerly complete a uniform mitigation
verification form pursuant to Section 627.711(2), Florida Statu		ions to pi	operry complete a uniform mitigation
Individuals other than licensed contractors licensed under			
under Section 471.015, Florida Statues, must inspect the s			
Licensees under s.471.015 or s.489.111 may authorize a di experience to conduct a mitigation verification inspection.		es the re	equisite skill, knowledge, and
		J 4h.a :	on action on diament
I, <u>Michael Casella</u> am a qualified inspector (print name)	and I personally performe	a the in	spection or (<i>licensea</i>
contractors and professional engineers only) I had my emp			
and I agree to be responsible for his/her work,	(print name	of inspe	ector)
Qualified Inspector Signature:	Date: Apr	25, 201	5
Quantited hispector Signature:	Date		<u> </u>
An individual or entity who knowingly or through gross no			
subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution.			
certifies this form shall be directly liable for the miscondu			
performed the inspection.			-
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification			
Signature:	Date: Apr 25, 2015		
			
An individual or entity who knowingly provides or utters	a false or fraudulent mitiga	tion ve	rification form with the intent to
obtain or receive a discount on an insurance premium to v			
of the first degree. (Section 627.711(7), Florida Statutes)			
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	nly and cannot be used to c	ertify a	ny product or construction feature
Inspectors Initials <u>MC</u> Property Address 1700 EMBASS	Y DRIVE 101 -104		
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ROOF ELEVATION

Application Date	2001-02-12	Operator	sjohnson
Issued Date	2001-02-12	Operator	sjohnson
Master Number		Project Number	golden Mariane
C.O. Number		Operator	1
C.O. Issued			10.20
C-404 Type		Usage Class	NONE
Applied Value	11800	Units	0
Calculated Value	0	Contractor ID	CCC013759
Building Ext.			
Address	1700 EMBASSY DR		
Address City	WEST PALM BEACH		
Address City State	WEST PALM BEACH FL		
Address City	WEST PALM BEACH		
Address City State Zip Code	WEST PALM BEACH FL		
Address City State Zip Code	WEST PALM BEACH FL 33401		
Address City State Zip Code O W N E R C Name	WEST PALM BEACH FL 33401 N PERMIT		
Address City State Zip Code	WEST PALM BEACH FL 33401 N PERMIT EMBASSY PARK CONDO ASSOC	Туре	Private