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 Asso	ciation		Contact Person: Embassy	Park Condo Association
Address: 1700 EMBASSY DRIVE 401 - 404	4		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	rkwpb.com
NOTE: Any documentation used in valid accompany this form. At least one photog though 7. The insurer may ask additional	graph must accompand questions regarding	ny this form to val the mitigated fea	ch construction or mitigat idate each attribute marke ture(s) verified on this for	ion attribute must ed in questions 3 m.
 Building Code: Was the structure built the HVHZ (Miami-Dade or Broward con ☐ A. Built in compliance with the FBG a date after 3/1/2002: Building Perm ☐ B. For the HVHZ Only: Built in comprovide a permit application with a € C. Unknown or does not meet the result of Covering: Select all roof covering ☐ OR Year of Original Installation/Replace 	unties), South Florida IC: Year Built	Building Code (SF) For homes bu MYDDYYYYY)/ C-94: Year Built _ uilding Permit App "A" or "B" the permit application	BC-94)? ilt in 2002/2003 provide a p / For homes built in blication Date (MM/DD/YYYY) ion date OR FBC/MDC Pro-	application with 1994, 1995, and 1996
covering identified.	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
<u>_</u>				
_				
6. Other_TAR PITCH/GRAVEL			2001	
 A. All roof coverings listed above mainstallation OR have a roofing perm B. All roof coverings have a Miamiroofing permit application after 9/1/ C. One or more roof coverings do not D. No roof coverings meet the requirements 	nit application date on one- Dade Product Approve 1994 and before 3/1/20 ot meet the requirement	or after 3/1/02 OR all listing current at 002 OR the roof is ats of Answer "A"	the roof is original and buil t time of installation OR (fo original and built in 1997 o	t in 2004 or later. r the HVHZ only) a
3. Roof Deck Attachment: What is the wear A. Plywood/Oriented strand board (by staples or 6d nails spaced at 6" shinglesOR- Any system of screw mean uplift less than that required f ■ B. Plywood/OSB roof sheathing with 24"inches o.c.) by 8d common nails other deck festening system or true.	OSB) roof sheathing at along the edge and 12's, nails, adhesives, other of Options B or C below the a minimum thickness spaced a maximum of	ttached to the roof to in the fieldORer deck fastening syow. ss of 7/16"inch atta f 12" inches in the	Batten decking supporting ystem or truss/rafter spacing ched to the roof truss/rafter fieldOR- Any system of sc	wood shakes or wood that has an equivalent (spaced a maximum of rews, nails, adhesives,
other deck fastening system or trust maximum of 12 inches in the field of C. Plywood/OSB roof sheathing with 24"inches o.c.) by 8d common nails decking with a minimum of 2 nails Any system of screws, nails, adhesi Inspectors Initials MC Property Addre	or has a mean uplift re th a minimum thickness a spaced a maximum of per board (or 1 nail pe ves, other deck fastening	esistance of at least as of 7/16"inch atta f 6" inches in the f r board if each boang system or truss/	103 psf. ched to the roof truss/rafter ieldOR- Dimensional lum rd is equal to or less than 6	(spaced a maximum of iber/Tongue & Groove inches in width)OR-

		or greater res 182 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	1	•	ed Concrete Roof Deck.
			a Controle Roof Beek.
			or unidentified.
		G. No attic a	access.
4.			achment: What is the WEAKEST 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
	Mi	nimal 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 nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C. Single Wi	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.
	Ш	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.
	√	E. StructuralF. Other:	Anchor bolts structurally connected or reinforced concrete roof.
			or unidentified
		H. No attic a	
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	
		B. 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.
_	C	1 337 4	D 14 (CM/D) (4 1 1 1 1 1 4 1 4 1 1 4 1 1 CM/D)
6.		A. SWR (als sheathing dwelling	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.
		B. No SWR.	or undetermined.
		C. CHKHOWH	or undetermined.
Ins	pec	tors Initials _	MC_ Property Address_1700 EMBASSY DRIVE 401 - 404
*T	his '	verification fo	orm is valid for up to five (5) years provided no material changes have been made to the structure or

^{*}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.

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		Glazed Openings				Non-Glazed Openings	
openi form	an "X" in each row to identify all forms of protection in use for each ng 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 eakest 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	\times		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		

<u>lly)</u> All Glazed openings are protected at
tection devices in the product approval
of the following for "Cyclic Pressure
.(

- 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

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

- 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 iii tile 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
☐ 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

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

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

the table above \square 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

Inspectors Initials MC Property Address 1700 EMBASSY DRIVE 401 - 404

in 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 t	nswer "A", "B", or C" or sy		
□ N.1 All Non-Glazed openings classified as Level A, B, C,	<i>'</i>	Jon Glaz	ad openings exist
N.1 All Non-Glazed openings classified as Level N.2 One or More Non-Glazed openings classified as Level 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 Glazed	zed openings classified and	Level X	in the table above.
MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov			
Qualified Inspector Name:	License Type:		License or Certificate #:
Michael Casella Inspection Company:	Home Inspect	Or Phone:	HI 432
		5	61-479-1810
Qualified Inspector – I hold an active license as a	: (check one)		
 ✓ Home inspector licensed under Section 468.8314, Florida Statutraining approved by the Construction Industry Licensing Board ☐ Building code inspector certified under Section 468.607, Florida 	and completion of a proficien		nber of hours of hurricane mitigation
☐ General, building or residential contractor licensed under Secti	on 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 poss verification form pursuant to Section 627.711(2), Florida Statu		ions to pr	operly complete a uniform mitigation
Individuals other than licensed contractors licensed under	Section 489.111, Florida S	statutes,	or professional engineer licensed
under Section 471.015, Florida Statues, must inspect the st Licensees under s.471.015 or s.489.111 may authorize a di experience to conduct a mitigation verification inspection.			
	and I navganally navfauma	d tha in	spection on (linears)
I, <u>Michael Casella</u> am a qualified inspector (print name)	and I personally performe	a the in	spection or (<i>ncensea</i>
contractors and professional engineers only) I had my empl	loyee (XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
and I agree to be responsible for his/her work	· ·	•	,
Qualified Inspector Signature:	Date: Apr	25, 2015	<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. (S	Section 627.711(4)-(7), Flor	ida Sta	tutes) The Qualified Inspector who
certifies this form shall be directly liable for the miscondu	ct of employees as if the au	thorize	d mitigation inspector personally
performed the inspection.			
Homeowner to complete: I certify that the named Qualifie residence identified on this form and that proof of identificati			
Signature:	Date: Apr 25, 2015		
An individual or entity who knowingly provides or utters a	a false or fraudulent mitiga	tion ver	ification form with the intent to
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 or as offering protection from hurricanes.	lly and cannot be used to c	ertify aı	ny product or construction feature
Inspectors Initials <u>MC</u> Property Address 1700 EMBASS	Y DRIVE 401 - 404		
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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155



ROOF ELEVATION



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Permit Number	01040501	Property ID	74434317180000000
Permit Desc	RFG	Balance Due	\$0.00
Property Address	1700 EMBASSY DR 401-404	Status	Closed
Permit Plan F	Reviews Inspections F	ees Contractors	I All
111111111111111111111111111111111111111		PERMIT	
PERMIT I	NFORMATION		
Application Date	2001-04-11	Operator	aneil
Issued Date	2001-04-11	Operator	aneil
Master Number		Project Number	
C.O. Number	h .	Operator	
C.O. Issued			185
C-404 Type		Usage Class	NONE
Applied Value	11800	Units	0
Calculated Value	0	Contractor ID	CCC013759
ROPERT	Y ON PERMIT		
Property ID	74434317180000000		
Building Ext.			
Address	1700 EMBASSY DR 401-404		
City	WEST PALM BEACH		
State	FL		
Zip Code	33401		
OWNER C	N PERMIT		
Name	EMBASSY PARK HOA		
Address	1700 EMBSSY DR		
City	WEST PALM BEACH	Type	Private
	FL	Zip Code	33401
State			

ROOF PERMIT VERIFICATION