Uniform Mitigation Verification Inspection Form

| | f this form and any do | ocumentation prov | ided with the insurance | <u>se policy</u> | | |
|---|--|--|---|----------------------------|--|--|
| Inspection Date: | | | | | | |
| Owner Information | | | | | | |
| Owner Name: | Contact Person: | Contact Person: | | | | |
| Address: | | | Home Phone: | | | |
| City: | Zip: | | Work Phone: | | | |
| County: | | | Cell Phone: | | | |
| Insurance Company: | | | Policy #: | | | |
| Year of Home: | # of Stories: | | Email: | | | |
| NOTE: Any documentation used in va accompany this form. At least one pho though 7. The insurer may ask addition | otograph must accompa | ny this form to valid | ate each attribute marke | d in questions 3 | | |
| Building Code: Was the structure by the HVHZ (Miami-Dade or Broward □ A. Built in compliance with the I | counties), South Florida FBC: Year Built | Building Code (SFBC For homes built in | (-94)? in 2002/2003 provide a per | | | |
| a date after 3/1/2002: Building P □ B. For the HVHZ Only: Built in provide a permit application with □ C. Unknown or does not meet the | compliance with the SFB a date after 9/1/1994: Bu | C-94: Year Builtuilding Permit Applica | . For homes built in 1 | | | |
| 2. Roof Covering: Select all roof cover OR Year of Original Installation/Rep covering identified. | | | | | | |
| Po 2.1 Roof Covering Type: | ermit Application Date | FBC or MDC Product Approval # | Year of Original Installation or Replacement | Provided for Compliance | | |
| 1. Asphalt/Fiberglass Shingle | | | | | | |
| _ | | | | | | |
| <u> </u> | | | | | | |
| _ | | | | | | |
| · – | | | | | | |
| 5. Membrane | | | | | | |
| 6. Other | | | | | | |
| installation OR have a roofing pe | 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 Mia roofing permit application after 9 | | | | | | |
| ☐ C. One or more roof coverings d | o not meet the requiremen | nts of Answer "A" or | "B". | | | |
| \Box D. No roof coverings meet the re | quirements of Answer "A | A" or "B". | | | | |
| 3. Roof Deck Attachment : What is the | weakest 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- Inspectors Initials Property Address | | | | | | |
| mspeciors muais Property Add | 11 088 | | | | | |
| *This varification form is valid for un | to five (5) years provide | d no material change | as have been made to the | structure or | | |

inaccuracies found on the form.

| | | or g | | of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least | |
|---|--|----------|---|--|--|
| | | D. | Reinforce | d Concrete Roof Deck. | |
| | | E. | Other: | | |
| | | F. | Unknown | or unidentified. | |
| | | G. | No attic a | ccess. | |
| 4. | Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks wit 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 | |
| | Mir | nima | 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 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. | _ | 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. | |
| | | | Structural | , | |
| | | | Other: | | |
| | | | | or unidentified | |
| | Ш | Н. | No attic a | ccess | |
| 5. | 5. <u>Roof Geometry</u> : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall 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: feet; Total roof system perimeter: feet | |
| | | B. | Flat Roof | | |
| | | C. | Other Roc | | |
| 6. | Sec | А. В. | SWR (also sheathing dwelling f No SWR. | 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. or undetermined. | |
| Ins | pec | tors | Initials _ | Property Address | |
| *This verification form 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 | | Glazed Openings | | | | Non-Glazed Openings | |
|--|---|-----------------|-----------------|-----------|----------------|------------------------|-----------------|
| 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. | | | Garage Doors | Skylights | Glass Block | Entry Doors | Garage Doors |
| N/A | Not Applicable- there are no openings of this type on the structure | | | | | | |
| 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 skyligh | its 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

☐ B.3 One or More Non-Glazed openings is classified as Level C, 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

- 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

| | 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 openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protect in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the 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 | | | |

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

| inspectors initials rrop | City fiddicss_ | |
|----------------------------------|--|------------|
| | | |
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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

Property Address

the table above

inaccuracies found on the form.

Increators Initials

| N. Exterior Opening Protection (unverified shutter's protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the tax | nswer "A", "B", or C" or sy | | | |
|--|--|-------------------------|--|--|
| ☐ N.1 All Non-Glazed openings classified as Level A, B, C, G | or N in the table above, or no N | on-Glaze | d openings exist | |
| ☐ N.2 One or More Non-Glazed openings classified as Level table above | D in the table above, and no N | on-Glazeo | d openings classified as Level X in the | |
| ☐ N.3 One or More Non-Glazed openings is classified as Lev | el X in the table above | | | |
| X. None or Some Glazed Openings One or more Glaz | ed openings classified and I | Level X i | n the table above. | |
| MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, prov | ~ | | | |
| Qualified Inspector Name: | License Type: | | License or Certificate #: | |
| Inspection Company: | | Phone: | | |
| Qualified Inspector – I hold an active license as a | : (check one) | | | |
| Home inspector licensed under Section 468.8314, Florida Statut- training approved by the Construction Industry Licensing Board | es who has completed the statu | | per of hours of hurricane mitigation | |
| ☐ Building code inspector certified under Section 468.607, Florida | | | | |
| ☐ General, building or residential contractor licensed under Section | n 489.111, Florida Statutes. | | | |
| \square Professional engineer licensed under Section 471.015, Florida S | tatutes. | | | |
| \square Professional architect licensed under Section 481.213, Florida S | tatutes. | | | |
| Any other individual or entity recognized by the insurer as possed verification form pursuant to Section 627.711(2), Florida Statute | | ons to pro | perly complete a uniform mitigation | |
| Individuals other than licensed contractors licensed under | Section 489.111, Florida S | tatutes, | 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 dir experience to conduct a mitigation verification inspection. | | | | |
| I, am a qualified inspector a | and I personally performe | d the ins | pection or (licensed | |
| (print name) | | | | |
| contractors and professional engineers only) I had my emplo | | | rform the inspection | |
| and I agree to be responsible for his/her work. | (print name | or inspe | ctor) | |
| Qualified Inspector Signature: | Date: | | | |
| 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. (Secretifies this form shall be directly liable for the misconduction performed the inspection. | e Fraud and may be subjection 627.711(4)-(7), Flor | ect to adı ida Statı | ministrative action by the utes) The Qualified Inspector who | |
| Homeowner to complete: I certify that the named Qualifie residence identified on this form and that proof of identification | | | | |
| • | • | | • | |
| 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 c | ertify an | y product or construction feature | |
| Inspectors Initials Property Address | | | | |
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