Uniform Mitigation Verification Inspection Form

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

Inspec	tion Date: April 30, 2021	-					
	r Information						
Owne	r Name: Spring Bay Condomir	nium Association		Contact Person:			
Addre	ss: 7648-7660 Spring Bay Co			Home Phone:			
City: (Orlando	Zip: 32819		Work Phone:			
Count	y: Orange			Cell Phone:			
Insura	nce Company:			Policy #:			
Year o	of Home: 1984	# of Stories: 2		Email:			
accon	E: Any documentation used in apany this form. At least one p h 7. The insurer may ask addi	hotograph must accompa	ny this form to validat	te each attribute marke	d in questions 3		
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//						
OF	oof Covering: Select all roof covering: Select all roof covering identified.				ance for each roof		
	2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
	1. Asphalt/Fiberglass Shingle						
	2. Concrete/Clay Tile						
	✓ 3. Metal	3 /17 / 2020					
	4. Built Up						
	5. Membrane						
	6. Other						
√							
	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 requirement	nts of Answer "A" or "I	3".			
	D. No roof coverings meet the requirements of Answer "A" or "B".						
3. R o	oof Deck Attachment: What is the	ne 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.						
\checkmark	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						
Inspe	Inspectors Initials RG Property Address 7648-7660 Spring Bay Cove, Orlando						
-	= ·						

*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 leas 182 psf.
		D. Reinforced Concrete Roof Deck.
		E. Other:
		F. Unknown or unidentified.
		G. No attic access.
4.		of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within the tof 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
	Mi	nimal 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 nai 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.		of Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of 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.
		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
	7	C. Other Roof Any roof that does not qualify as either (A) or (B) above.
6	Sec	ondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
0.	<u>scc</u>	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.
		C. Officiowii of undetermined.
In	spec	tors Initials RG Property Address 7648-7660 Spring Bay Cove, Orlando
*T	his '	verification form 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 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		
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)			X			
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						
	Opening Protection products that appear to be A or B but are not verified						
N	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	X				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

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

Inspectors Initials RG Property Address 7648-7660 Spring Bay Cove, Orlando

• For Garage Doors Only: ANSI/DASMA 115

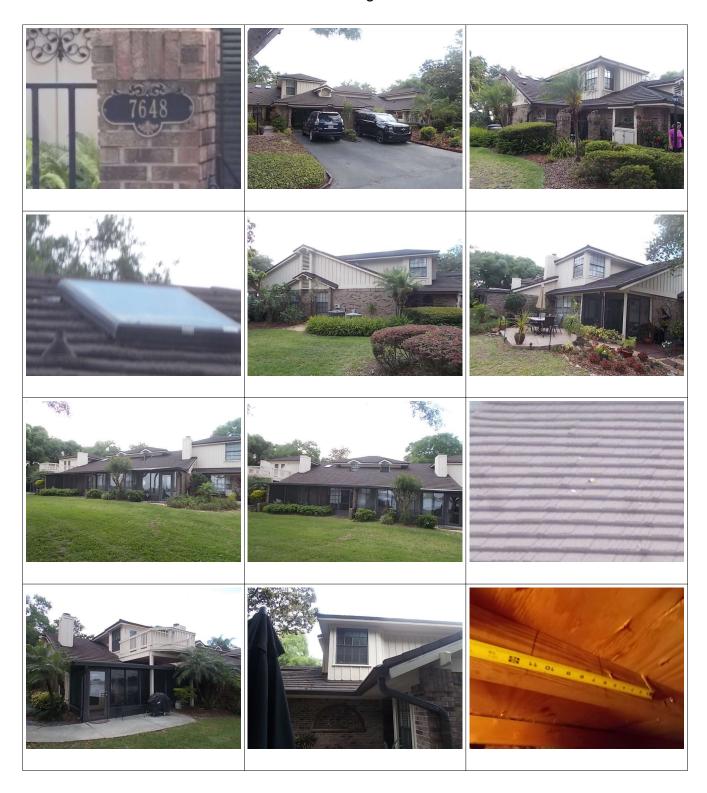
☐ A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above
☐ A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
B. Exterior Opening Protection- Cyclic Pressure 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.)
☐ 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

^{*}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.

N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of A with no documentation of compliance (Level N in the tax	nswer "A", "B", or C" or sys	tion) Al tems tha	l Glazed openings are protected with at appear to meet Answer "A" or "B"				
N.1 All Non-Glazed openings classified as Level A. B. C.	or N in the table above, or no No	n-Glazeo	l openings exist				
· -							
☐ 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 Le	evel X ii	n the table above.				
MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov	~		v sign this form.				
Qualified Inspector Name: Ray Giaccone	License Type: General Building Contra	ctor	License or Certificate #: CBC 1251714				
Inspection Company:	Contral Building Contra	Phone:					
Expert Inspectors	(1.1.)	386-6	77-8886				
Qualified Inspector – I hold an active license as a	• •						
Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board	and completion of a proficiency		er of hours of hurricane mitigation				
Building code inspector certified under Section 468.607, Florida							
General, building or residential contractor licensed under Section							
 □ Professional engineer licensed under Section 471.015, Florida S □ Professional architect licensed under Section 481.213, Florida S 							
Any other individual or entity recognized by the insurer as posses		na to mror	andy appolate a uniform mitigation				
verification form pursuant to Section 627.711(2), Florida Statute		is to prop	city complete a uniform mitigation				
Individuals other than licensed contractors licensed under							
under Section 471.015, Florida Statues, must inspect the st							
<u>Licensees under s.471.015 or s.489.111 may authorize a dir</u> experience to conduct a mitigation verification inspection.	ect employee wno possesses	tne rec	uisite skiii, knowledge, and				
	17 11 6 1	41 .					
I, Ray Giaccone am a qualified inspector a (print name)	and I personally performed	tne ins	pection or (incensea				
contractors and professional engineers only) I had my employee (Dave Kolodzik) perform the inspection							
(print name of inspector) and I agree to be responsible for his/her work.							
Qualified Inspector Signature: Kans H. Good	Date: 4-30-2	2021					
An individual or entity who knowingly or through gross no	egligence provides a false or	fraudu	lent mitigation verification form is				
subject to investigation by the Florida Division of Insurance							
appropriate licensing agency or to criminal prosecution. (S							
certifies this form shall be directly liable for the misconduction.	et of employees as if the auti	<u>iorizea</u>	mitigation inspector personally				
Homeowner to complete: I certify that the named Qualifie	d Inspector or his or her emp	lovee di	d 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 entitled commits a misdemeanor							
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 ce	rtify an	y product or construction feature				
Inspectors Initials RG Property Address 7648-7660 Spring Bay Cove, Orlando							
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	rided no material changes h	ave bee	n made to the structure or				

Spring Bay COA Building 1



Spring Bay COA Building 1

