Uniform Mitigation Verification Inspection Form

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

Inspection Date: 1/1/2021							
Owner Information							
Owner	C 10p c. 1	he World Condominiun	n Association Inc	Contact Person:			
Addres	s: 221	0 Utopian Dr/ Building	96	Home Phone:			
City:	Clearwater	Zip:	33763	Work Phone:			
County				Cell Phone:			
	nce Company:			Policy #:			
Year o	f Home: 1996	# of Stories:	3	Email:	Email:		
accom though	: Any documentation used in pany this form. At least one a 7. The insurer may ask add	photograph must accorditional questions regard	npany this form to valid ding the mitigated featu	late each attribute markere(s) verified on this for	ed in questions 3 m.		
	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 For homes built in 2002/2003 provide a permit application with						
	a date after 3/1/2002: Building	g Permit Application Date	te (MM/DD/YYYY)/		annit application with		
	B. For the HVHZ Only: Built provide a permit application v						
	C. Unknown or does not meet	the requirements of Ans	swer "A" or "B"				
OR	of Covering: Select all roof co Year of Original Installation/Fering identified.						
	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	03 _/ 22 /_ 2016	10674.1	2016			
	2. Concrete/Clay Tile	/					
	3. Metal	/					
	4. Built Up	/					
	5. Membrane						
	6. Other						
	 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". 						
3. Ro	of Deck Attachment: What is	the weakest form of root	f deck 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 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.						
Inspace	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 Inspectors Initials ST Property Address 2210 Utopian Dr/ Building 96						
Inspec	tors initials Property A	Address	2210 Otopian Di/ i	Jananiy 90			

*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

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	or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.					
	□ D. Reinforced Concrete Roof Deck.					
			ed Concrete Roof Beek.			
	П		n or unidentified.			
		G. No attic a				
1						
4.	. <u>Roof to Wall Attachment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks v 5 feet of the inside or outside corner of the roof in determination of WEAKEST type)					
		A. Toe Nail				
			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	nimal conditi	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 W				
			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 V	•			
			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. Structura	Anchor bolts structurally connected or reinforced concrete roof.			
		F. Other: _				
		G. Unknown	n or unidentified			
		H. No attic a	access			
5.			What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of			
	tne	nost structure	e over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).			
		A. Hip Root				
		B. Flat Root				
		C. Other Ro	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area 36000 _ sq ft of Any roof that does not qualify as either (A) or (B) above.			
	Ш	C. Oulei Ko	Any root that does not quanty as either (A) of (B) above.			
6.	Sec	A. SWR (also sheathing dwelling	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g 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	n or undetermined.			
	_					
Inspectors Initials ST Property Address 2210 Utopian Dr/ Building 96						

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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 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						
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 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

• 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
<u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> 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

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the table above

Inspectors Initials ST Property Address_

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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	no document ", or C" or sy	ation) Alesstems that	l Glazed openings are protected with it appear to meet Answer "A" or "B"			
N.1 All Non-Glazed openings classified as Level A. B. C. o	or N in the table	above, or no N	on-Glazed	openings exist			
• •							
\square 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 cl	assified and I	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: Kenneth D. Colen	License Type:	CGC		License or Certificate #: 1505760			
Inspection Company: C.O.A. Everywhere, Inc.			Phone:	352-854-0805			
Qualified Inspector – I hold an active license as a	: (check on	e)					
Usanned Inspector — I noid an active license as a: (cneck 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 481.213, 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 Statues, must inspect the structures personally and not through employees or other persons. Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection. I, Kenneth D. Colen am a qualified inspector and I personally performed the inspection or (licensed (print name)) perform the inspection (print name of inspector) and I agree to be responsible for his/her work. Qualified Inspector Signature: Licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, or profession 471.015, Florida Statutes, or							
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 mitigation inspector personally							
performed the inspection.	t of employee	s as ii the au	thorized	mitigation inspector personany			
Homeowner to complete: I certify that the named 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 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 only and cannot be used to certify any product or construction feature as offering protection from hurricanes.							
Inspectors Initials ST Property Address	2210 Ut	opian Dr/ Bu	ilding 96				
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Question 5: Roof Geometry



