Uniform Mitigation Verification Inspection Form

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

Inspection Date: JANUARY 30, 2020							
Owner Information							
Owner Name: MIDDLEBROOK PINES CONDOS CASE#: 20200130-WMIR-67		Contact Person: KEITH KIEBZAK					
Address: 5266, 5268, 5270, 5272 WILL			Home Phone:				
City: ORLANDO	Zip: 32811			32-2622			
County: ORANGE	FL		Cell Phone:				
Insurance Company:			Policy #:				
Year of Home: 1986	# of Stories: 2		Email: KLMGMTGRO	OUP@AOL.COM			
NOTE: Any documentation used in valid accompany this form. At least one photog though 7. The insurer may ask additional	graph must accompany tl	his form to validate	each attribute marked	in questions 3			
1. Building Code: Was the structure built the HVHZ (Miami-Dade or Broward cou  A. Built in compliance with the FBC a date after 3/1/2002: Building Perm  B. For the HVHZ Only: Built in comprovide a permit application with a comprovide of the structure built in the structure built in the HVHZ Only: Built in comprovide a permit application with a comprovide and the structure built in the HVHZ Only: Built in comprovide a permit application with a comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the HVHZ Only: Built in comprovide and the structure built in the str	Inties), South Florida Build: Year Built it Application Date (MM/DD/ Appliance with the SFBC-94	ding Code (SFBC-94 For homes built in 2 YYYY)// Year Built	(002/2003 provide a perr . For homes built in 199	nit application with 94, 1995, and 1996			
C. Unknown or does not meet the re-	quirements of Answer "A"	or "B"					
<ol> <li>Roof Covering: Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified.</li> </ol>							
	Application Date Pr	FBC or MDC roduct Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
1. Asphalt/Fiberglass Shingle							
2. Concrete/Clay Tile/							
<u> </u>							
4. Built Up				Ħ			
5. Membrane				H			
	_/			H			
A. All roof coverings listed above m installation OR have a roofing permit.  B. All roof coverings have a Miamiroofing permit application after 9/1/2.  C. One or more roof coverings do not.  D. No roof coverings meet the require.	t application date on or aft Dade Product Approval lis 1994 and before 3/1/2002 of the meet the requirements of	ter 3/1/02 OR the rocksting current at time of OR the roof is origin f Answer "A" or "B"	of is original and built in of installation OR (for th al and built in 1997 or la	2004 or later. e HVHZ only) a			
3. Roof Deck Attachment: What is the we A. Plywood/Oriented strand board (6 by staples or 6d nails spaced at 6" a shinglesOR- Any system of screw mean uplift less than that required for B. Plywood/OSB roof sheathing wir 24"inches o.c.) by 8d common nails other deck fastening system or truss/a maximum of 12 inches in the field	OSB) roof sheathing attach long the edge and 12" in s, nails, adhesives, other do or Options B or C below. th a minimum thickness of spaced a maximum of 12' frafter spacing that is show or has a mean uplift resist	the fieldOR- Batto eck fastening system (7/16"inch attached in inches in the field inches in the field inches of at least 103	en decking supporting we or truss/rafter spacing to the roof truss/rafter (sports). OR- Any system of screen tent or greater resistance psf.	rood shakes or wood hat has an equivalent paced a maximum of tws, nails, adhesives, than 8d nails spaced			
C. Plywood/OSB roof sheathing wir 24"inches o.c.) by 8d common nails decking with a minimum of 2 nails	spaced a maximum of 6"	inches in the field	OR- Dimensional lumb	er/Tongue & Groove			
Inspectors Initials DKS Property Address			ORLANDO	FL 32811			

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	Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivale or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at lea 182 psf.	
$\checkmark$	D. Reinforced Concrete Roof Deck.	
	E. Other:	
	F. Unknown or unidentified.	
	G. No attic access.	
	<b>oof to Wall Attachment:</b> What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks withing the inside or outside corner of the roof in determination of WEAKEST type)	n
L	A. Toe Nails	
	Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached the top plate of the wall, or	to
	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
$\underline{\mathbf{M}}$	inimal 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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> 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 national position requirements of C or D, but is secured with a minimum of 3 nails.	ıil
	C. Single Wraps	
	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	a
	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	ı
	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.	
$\overline{\checkmark}$	E. Structural Anchor bolts structurally connected or reinforced concrete roof.	
<u> </u>	F. Other:	
Ļ	G. Unknown or unidentified	
L	H. No attic access	
	<u>oof Geometry</u> : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall ce host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).	of
L	A. Hip Roof Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.	
<b>√</b>	Total length of non-hip features: feet; Total roof system perimeter: feet  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  C. Other Roof Any roof that does not qualify as either (A) or (B) above.	
6. <u>S</u>	condary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)  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.	e
<u>√</u>	B. No SWR. C. Unknown or undetermined.	
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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. Non-Glazed Opening Protection Level Chart **Glazed Openings** Openings Place an "X" in each row to identify all forms of protection in use for each Windows opening type. Check only one answer below (A thru X), based on the weakest Entry Glass Garage Garage or Entry Skylights form of protection (lowest row) for any of the Glazed openings and indicate Doors **Block** Doors Doors Doors the weakest form of protection (lowest row) for Non-Glazed openings. 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) Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E D 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 Ν 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 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.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist 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 and 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 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 C.3 One or More Non-Glazed openings is classified as Level N or X in the table above Inspectors Initials DKS Property Address 5266, 5268, 5270, 5272 WILLOW CT - BLDG 67 32811 **ORLANDO** FL

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N. Exterior Opening Protection (unverified shutters) protective coverings not meeting the requirements of A			
with no documentation of compliance (Level N in the ta	able above).		
N.1 All Non-Glazed openings classified as Level A, B, C, o			
N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no	o Non-Glazed openings classified as Lev	rel 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 Glaze	ed openings classified an	d Level X in the table above.	
MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, prov			
Qualified Inspector Name: DEBORAH SIEBERN	License Type: Home Inspector	License or Certificate #: HI-139	
Inspection Company: AVALON HOME INSPECTIONS, LLC		Phone: 407-435-5155	
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			tigation
Building code inspector certified under Section 468.607, Florida	Statutes.		
General, building or residential contractor licensed under Section	n 489.111, Florida Statutes.		
Professional engineer licensed under Section 471.015, Florida S	tatutes.		
Professional architect licensed under Section 481.213, Florida S	tatutes.		
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statute		ations to properly complete a uniform m	nitigation
Individuals other than licensed contractors licensed under			
under Section 471.015, Florida Statues, must inspect the str Licensees under s.471.015 or s.489.111 may authorize a dir			
experience to conduct a mitigation verification inspection.		· · · · · · · · · · · · · · · · · · ·	
	and I personally perfor	med the inspection or (licensed	
(print name)  contractors and professional engineers only) I had my emplo	ovee (	) perform the inspection	
commetors and projessional engineers only) I had my empt		ne of inspector)	
and I agree to be responsible for his/her work.	•	- ,	
Qualified Inspector Signature:	Date: JA	NUARY 30, 2020	
An individual or entity who knowingly or through gross ne	egligence provides a fals	se or fraudulent mitigation verifica	ation 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 misconduc	et of employees as if the	authorized mitigation inspector p	<u>ersonally</u>
performed the inspection.			
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification	n was provided to me or	my Authorized Representative.	of the
Signature: htth Rhyd 1	Date: JANUARY 30,	2020	
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.			ion feature
Inspectors Initials DKS Property Address 5266, 5268, 5270	), 5272 WILLOW CT - BLDC	67 ORLANDO FL	32811

inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155



**ADDRESS VERIFICATION** 



**ROOF - CONCRETE WITH TPO COVERING** 



**ADDRESS VERIFICATION** 



FRONT ELEVATION



ADDRESS VERIFICATION



FRONT ELEVATION



ADDRESS VERIFICATION



FRONT ELEVATION



ADDRESS VERIFICATION



FRONT ELEVATION



MANSARD WALLS REPLACED 2018