## **Uniform Mitigation Verification Inspection Form**

|  | in a copy of this   | torm and any do                         | cumentation prov                             | <u>rided with the insuran</u>                        | ce policy                                    |  |  |  |
|--|---|---|--|--|--|--|--|--|
| Inspection Date:   |   |   |  |  |  |  |  |  |
| Owner Information  |   |   |  |  |  |  |  |  |
| Owner Name:  | Owner Name:   |   |  |  | Contact Person:                              |  |  |  |
| Address:   | SS:   |   |  | Home Phone:  |  |  |  |  |
| City:  | y: Zip:   |   |  | Work Phone:  |  |  |  |  |
| County:  |   |   |  | Cell Phone:  |  |  |  |  |
| Insurance Company:   |   |   |  | Policy #:  |  |  |  |  |
| Year of Home:  | #   | of Stories:                             |  | Email:   |  |  |  |  |
| NOTE: Any documentat accompany this form. At though 7. The insurer ma  | least one photogra<br>y ask additional q  | aph must accompar<br>uestions regarding | ny this form to valid<br>the mitigated featu | late each attribute markere(s) verified on this for  | ed in questions 3 m.                         |  |  |  |
| 1. <b><u>Building Code</u></b> : Was the HVHZ (Miami-Dad   | e or Broward count  | ies), South Florida I                   | Building Code (SFBC                          | C-94)?   |  |  |  |  |
| a date after $3/1/200$   | 2: Building Permit  | Application Date (MI                    | M/DD/YYYY)//                                 |  |  |  |  |  |
| provide a permit ap  | plication with a dat  |   | ilding Permit Application                    | For homes built in lation Date (MM/DD/YYYY)          |  |  |  |  |
| 2. Roof Covering: Select OR Year of Original In covering identified.   |   |   |  | n date OR FBC/MDC Pro-<br>available to verify compli |  |  |  |  |
| 2.1 Roof Covering Type:  | Permit App<br>Date  | olication<br>e                          | FBC or MDC<br>Product Approval #             | Year of Original Installation or<br>Replacement      | No Information<br>Provided for<br>Compliance |  |  |  |
| ☐ 1. Asphalt/Fiberglass Sh   | ingle//   |   |  |  |  |  |  |  |
| 2. Concrete/Clay Tile  |   |   |  |  |  |  |  |  |
| 3. Metal   | //  |   |  |  |  |  |  |  |
| 4. Built Up  | //  |   |  |  |  |  |  |  |
| 5. Membrane  |   |   |  |  |  |  |  |  |
| 6. Other   |   |   |  |  |  |  |  |  |
| 6. Other   |   |   |  |  | Ц  |  |  |  |
| installation OR hav  □ B. All roof coverin roofing permit appl  □ C. One or more roo   | 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 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".  D. No roof coverings meet the requirements of Answer "A" or "B". |   |  |  |  |  |  |  |
| 3. Roof Deck Attachmen   | t: What is the weak   | est form of roof dec                    | k attachment?                                |  |  |  |  |  |
| A. Plywood/Orient by staples or 6d na shinglesOR- Any  | 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 1<br>24"inches o.c.) by<br>other deck fastenin  | 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.   |   |  |  |  |  |  |  |
| 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 & Groov 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  | Property Address_   |   |  |  |  |  |  |  |

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|     |       | or greater 182 psf. | sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at le  | ast |
|-----|-------|---------------------|---|-----|
|     |       | -                   | ed Concrete Roof Deck.  |     |
|     | _     |                     |   |     |
|     |       |                     | or unidentified.  |     |
|     |       | G. No att           |   |     |
| 4.  | Roc   | of to Wall          | <b>tachment:</b> What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks with de or outside corner of the roof in determination of WEAKEST type)   | in  |
|     |       | A. Toe N            |   |     |
|     | _     | 11. 10011           | 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  |     |
|     | Mir   | nimal cond          | ons to qualify for categories B, C, or D. All visible metal connectors are:   |     |
|     | 17111 |                     | 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.  | l   |
|     |       | 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 n position requirements of C or D, but is secured with a minimum of 3 nails.   | ail |
|     |       | C. Single           |   |     |
|     | _     |                     | 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.  | ı a |
|     |       | D. Doubl            |   |     |
|     |       |                     | 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 wit a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>   | h   |
|     |       |                     | Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall or both sides, and is secured to the top plate with a minimum of three nails on each side.  | 1   |
|     |       | E. Structu          | Anchor bolts structurally connected or reinforced concrete roof.  |     |
|     |       | F. Other:           |   |     |
|     |       | G. Unkno            | n or unidentified   |     |
|     |       | H. No att           | access  |     |
| 5.  |       | host struct         | What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).   | of  |
|     |       | A. Hip Ro           |   |     |
|     |       | B. Flat R           | Total length of non-hip features: feet; Total roof system perimeter: feet  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            |   |     |
| 6.  |       | A. SWR sheath       | 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 gor 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. | 1e  |
|     |       |                     | n or undetermined.  |     |
| Ins |       |                     | Property Address  |     |
|     |       | • 60                |   |     |

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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.

|  | ening Protection Level Chart  | Glazed Openings |                 |           |                | Non-Glazed<br>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<br>Doors | Skylights | Glass<br>Block | Entry<br>Doors         | Garage<br>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
- 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

in the table above

| 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>B.</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  | red 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

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

| Inspectors Initials | <b>Property Address</b> |  |
|---------------------|-------------------------|--|
|                     |                         |  |

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|                   | N. Exterior Opening Protection (unverified shutter systems with no documentation) All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" with no documentation of compliance (Level N in the table above). |  |   |                        |  |  |  |
|-------------------|---|--|---|------------------------|--|--|--|
|                   | □ N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist   |  |   |                        |  |  |  |
|                   |   | N.2 One or More Non-Glazed openings classified as Level table above  |   |                        |  |  |  |
|                   |   | N.3 One or More Non-Glazed openings is classified as Lev   | vel X in the table above                            |                        |  |  |  |
|                   | <u> </u>  | K. None or Some Glazed Openings One or more Glaz   | ed openings classified and I                        | Level X i              | n the table above.   |  |  |
|                   |   | MITIGATION INSPECTIONS MUST I<br>Section 627.711(2), Florida Statutes, prov  | ~   |                        |  |  |  |
| Qua               | lified I  | nspector Name:   | License Type:                                       |                        | License or Certificate #:                                    |  |  |
| Insp              | ection  | Company:   |   | Phone:                 | 1  |  |  |
|                   |   |  |   |                        |  |  |  |
| Qι                | uali  | <u>fied Inspector – I hold an active license as a</u>  | : (check one)                                       |                        |  |  |  |
|                   |   | me inspector licensed under Section 468.8314, Florida Statut<br>ning approved by the Construction Industry Licensing Board   |   |                        | per of hours of hurricane mitigation                         |  |  |
|                   | Bui   | Ilding code inspector certified under Section 468.607, Florida   | a Statutes.   |                        |  |  |  |
|                   |   | neral, building or residential contractor licensed under Sectio  |   |                        |  |  |  |
|                   |   | fessional engineer licensed under Section 471.015, Florida S   |   |                        |  |  |  |
|                   |   | fessional architect licensed under Section 481.213, Florida S  |   | ona to mro             | narky complete a uniform mitigation                          |  |  |
|                   |   | y other individual or entity recognized by the insurer as posse<br>ification form pursuant to Section 627.711(2), Florida Statuto  |   | ons to pro             | perry complete a uniform mitigation                          |  |  |
|                   |   | uals other than licensed contractors licensed under  |   |                        |  |  |  |
| Lic               | ense  | Section 471.015, Florida Statutes, must inspect the sees under s.471.015 or s.489.111 may authorize a direction conduct a mitigation verification inspection.  |   |                        |  |  |  |
| exp               | <u>Jerre</u>  |  | 11 11 0   | 1.1                    |  |  |  |
| 1,_               |   | am a qualified inspector : (print name)  | and I personally performe                           | d the ins              | pection or ( <i>licensed</i>                                 |  |  |
| con               | ntrac   | tors and professional engineers only) I had my empl  | oyee ((print name                                   |                        | rform the inspection   |  |  |
| an                | d I a   | agree to be responsible for his/her work.  | (1  | <b>P</b>               |  |  |  |
| Qu                | Qualified Inspector Signature: Date:  |  |   |                        |  |  |  |
| suk<br>apj<br>cer | oject<br>prop<br>tifie  | ividual or entity who knowingly or through gross not to investigation by the Florida Division of Insurance or interesting agency or to criminal prosecution. (See this form shall be directly liable for the misconduction the inspection. | ce Fraud and may be subjection 627.711(4)-(7), Flor | ect to adı<br>ida Stat | ministrative action by the utes) The Qualified Inspector who |  |  |
|                   |   | <b>cowner to complete:</b> I certify that the named Qualified ce identified on this form and that proof of identification  |   |                        |  |  |  |
| Sic               | mat   | ure•   | Date:   |                        | -  |  |  |
| ع د               | Signature: Date:  |  |   |                        |  |  |  |
| obt               | tain  | ividual or entity who knowingly provides or utters a<br>or receive a discount on an insurance premium to w<br>irst degree. (Section 627.711(7), Florida Statutes)  |   |                        |  |  |  |
| Th                | e de  | finitions on this form are for inspection purposes or ing protection from hurricanes.  | nly and cannot be used to c                         | ertify an              | y product or construction feature                            |  |  |
| Ins               | Inspectors 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 inaccuracies found on the form.   |  |   |                        |  |  |  |

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