

Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy						
Inspection Date: 02/07/2017						
Owner Information			Control D			
Owner Name: Camelot Condominiums	Contact Person:					
Address: Building A, 2950-2957 Sir Hamilton Circle			Home Phone:			
City: Titusville Zip: 32780			Work Phone:			
County: Brevard			Cell Phone:			
Insurance Company:	T #		Policy #:			
Year of Home: 1982	# of Stories: 2		Email:			
NOTE: Any documentation used in valid accompany this form. At least one photo though 7. The insurer may ask additional	graph must accomp al questions regardi	oany this form to validang the mitigated featur	ate each attribute marked re(s) verified on this form.	in questions 3		
 Building Code: Was the structure built the HVHZ (Miami-Dade or Broward co A. Built in compliance with the FB 	unties), South Florid	a Building Code (SFBC				
a date after 3/1/2002: Building Perr	nit Application Date	(MM/DD/YYYY)				
□ B. For the HVHZ Only: Built in corprovide a permit application with a□ C. Unknown or does not meet the red	date after 9/1/1994: 1	Building Permit Applica	. For homes built in 199 ation Date (MM/DD/YYYY)	94, 1995, and 1996		
2. Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified.				ce for each roof		
Permi 2.1 Roof Covering Type:	t Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
■ 1. Asphalt/Fiberglass Shingle ■ 10.	/18/2001	Permit #2001100082				
2. Concrete/Clay Tile				П		
3. Metal						
4. Built Up						
5. Membrane						
6. Other						
 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 n			=			
☑ D. No roof coverings meet the requ	-					
3. Roof Deck Attachment : What is the w						
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 w 24"inches o.c.) by 8d common nail decking with a minimum of 2 nails Inspectors Initials JS Property Addresses	s spaced a maximum per board (or 1 nail	of 6" inches in the fiel per board if each board	dOR- Dimensional lumbers is equal to or less than 6 in	er/Tongue & Groove		
inspectors initials 1 toperty Addre	3 - , _ 3 - 0					
4TL:	C (5)	dad wa wakawal ahawa		44		

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.



			greater res 32 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least			
			_	d Concrete Roof Deck.			
	\times	F.	Unknown	or unidentified.			
		G.	No attic a	ccess.			
4.		eet (of the inside	achment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)			
	Ш	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	nim	nal 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.			
		В.	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.			
	Ш	C.	Single Wi	•			
		Б	B 11 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.			
	Ш	D.	Double W	•			
			Ц	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.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).			
		A.	Hip Roof				
		В.	Flat Roof	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			
	\boxtimes	C.	Other Roo				
6.	Sec	Econdary 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.					
	\square		No SWR. Unknown	or undetermined.			
In	spec	tor	s Initials _	JS Property Address Building A, 2950-2957 Sir Hamilton Circle Titusville			
<u>*</u> п	hia -		ification fo	orm is valid for up to five (5) years provided no metavial changes have been made to the structure or			
_	1115	V CI	mation 10	orm is valid for up to five (5) years provided no material changes have been made to the structure or			

Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent

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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		X	X	X		X
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						
N	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	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
- 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 <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 the table above
C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

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Inspectors Initials JS Property Address Building A, 2950-2957 Sir Hamilton Circle Titusville



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 ta	,				
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 Non-Glaz	ted openings classified as Level X in the			
N.3 One or More Non-Glazed openings is classified as Leve					
X. None or Some Glazed Openings One or more Glaze	ed openings classified and 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: John Shishilla	License Type: Home Inspector	License or Certificate #: HI21			
Inspection Company: Honor Construction Inspection S	Phone:	321-327-2950			
Qualified Inspector – I hold an active license as a	: (check one)				
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	es who has completed the statutory nur				
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 Se	atutes.				
Professional architect licensed under Section 481.213, Florida St	atutes.				
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		roperly complete a uniform mitigation			
Individuals other than licensed contractors licensed under					
under Section 471.015, Florida Statues, must inspect the staticensees under s.471.015 or s.489.111 may authorize a dir					
experience to conduct a mitigation verification inspection.	eer employee was possesses the l	oquisico simiy imo i rougey witu			
laha Chiahilla	and I personally performed the in	spection or (licensed			
(print name)	ind I personally performed the h	ispection of (ucensea			
contractors and professional engineers only) I had my employee () perform the inspection (print name) (print name) (print name)					
and I agree to be responsible for his her work.	<i>'//</i> /				
Qualified Inspector Signature:	Date: 02/07/2017				
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					
appropriate licensing agency or to criminal prosecution. (S certifies this form shall be directly liable for the misconduc					
performed the inspection.	t of employees as if the authorize	ed intigation inspector personany			
Homeowner to complete: I certify that the named Qualifie	d 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 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 only and cannot be used to certify any product or construction feature as offering protection from hurricanes.					
Inspectors Initials JS Property Address Building A, 2950-2957 Sir Hamilton Circle Titusville					
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Front Right





Rear Left



Address