

## Uniform Mitigation Verification Inspection Form

-		of this form and	any documentation provide	ded with the insurance	ce policy		
Inspecti	on Date: 11/03/2021						
Owner	Information						
Owner	Name: Desoto Condomini	um Association		Contact Person:			
Address: 110 Desoto Pkwy Building 4 Units 15-18				Home Phone:			
City: S	atellite Beach	Zip:	32937	Work Phone:			
County	Brevard			Cell Phone:			
Insuran	ce Company:	·		Policy #:			
Year of	Home: 1978	# of Stories:	2	Email:			
accomp though	oany this form. At least one part of the insurer may ask add	photograph must ac itional questions re	pliance or existence of each c ecompany this form to validat garding the mitigated feature	te each attribute marke (s) verified on this form	ed in questions 3 n.		
the	1. <u>Building Code</u> : 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 Permit Application Date (MM/DD/YYYY)							
B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994 1995 and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)							
<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>							
	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	07/12/2021	Permit # PBR21-000937	Final 07/30/21			
	2. Concrete/Clay Tile	/					
	3. Metal						
	4. Built Up	/					
		//			_		
	5. Membrane	07/12/2021	Permit # PBR21-000937	Final 07/30/21			
	6. Other	/					
	installation OR have a roofing B. All roof coverings have a M	with a FBC or Miami-Dade Products on or after 3/1/02 OR the re Approval listing current at time	oof is original and built in of installation OR (for	in 2004 or later. the HVHZ only) a			
			re $3/1/2002$ OR the roof is original.		later.		
Ш	C. One or more roof coverings	do not meet the req	uirements of Answer "A" or "F	3".			
	D. No roof coverings meet the	requirements of An	swer "A" or "B".				
3. <b>Roo</b>	f Deck Attachment: What is t	the weakest form of	roof deck attachment?				
	s/rafter (spaced a maxim tten decking supporting m or truss/rafter spacing	wood shakes or wood					
	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 & 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 tors Initials   Property Address 110 Desoto Pkwy Building 4 Satellite Beach Fl 32937						
Inspect	ors Initials // // Property A	ddress 110 Desot	o rkwy Bullaing 4 Satelli	te Beach Fl 32937			

\*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. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within
5 feet of 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
Minimal 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 nai position requirements of C or D, but is secured with a minimum of 3 nails.
C. Single Wraps  Motel connectors consisting of a single strengthat wrong even the top of the trace/refter and is convered with a
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, <b>or</b>
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.
<ul><li>E. Structural Anchor bolts structurally connected or reinforced concrete roof.</li><li>F. Other:</li></ul>
G. Unknown or unidentified
H. No attic access
5. <b>Roof Geometry:</b> What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of the 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.
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 areasq ft  C. Other Roof Any roof that does not qualify as either (A) or (B) above.
<ul> <li>6. Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)</li> <li>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.</li> <li>B. No SWR.</li> <li>C. Unknown or undetermined.</li> </ul>
Inspectors Initials () WProperty Address 110 Desoto Pkwy Building 4 Satellite Reach Fl 32937
Inspectors Initials Property Address 110 Desoto Pkwy Building 4 Satellite Beach Fl 32937

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

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N. Exterior Opening Protection (unverified shutter's protective coverings not meeting the requirements of Al with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or sy				
N.1 All Non-Glazed openings classified as Level A, B, C, o	,	on-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	el X in the table above				
X. None or Some Glazed Openings One or more Glazed		Level X in the table above.			
MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, prov					
Jeffrey R Williams	License Type: Home Inspector	License or Certificate #: HI8705			
Inspection Company: Honor Services	Tiome mspector	Phone: (321) 327-2950			
Qualified Inspector – I hold an active license as a	: (check one)				
X Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	es who has completed the statu				
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 Se					
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statute		ons to properly complete a uniform mitigation			
Individuals other than licensed contractors licensed under					
under Section 471.015, Florida Statutes, must inspect the st Licensees under s.471.015 or s.489.111 may authorize a dir					
experience to conduct a mitigation verification inspection.	ect employee who possesse	es the requisite skin, knowledge, and			
I, Jeffrey R. Williams am a qualified inspector a	and I personally performed	d the inspection or (licensed			
(print name)  contractors and professional engineers only) I had my employee () perform the inspection  (print name of inspector)					
and I agree to be responsible for his/her work.					
Qualified Inspector Signature:					
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.					
<u>Homeowner to complete</u> : I certify that the named Qualifie residence identified on this form and that proof of identification					
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 on as offering protection from hurricanes.	ly and cannot be used to c	ertify any product or construction feature			
Inspectors Initials Property Address 110 Desoto P	kwy Building 4 Satellit	e Beach Fl 32937			
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www.HonorServices.com ClientCare@H	ConorServices.com	321-327-2950			





Front (Left) Front (Right)





Left Right





Rear (Left) Rear (Right)

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Address Units 15-18





SWR 8D nails





6in nail pattern 6in nail pattern





Toe nails - clips w/ less than three nails

Toe nails - straps do not wrap over truss



Toe nails - clips w/ less than three nails