Uniform Mitigation Verification Inspection Form

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

Inspec	tion Date: 17 February 2023	-					
	r Information						
Owner Name: High Point of Delray West Condominium Association Section 3				Contact Person:			
Address: 5060 Nesting Way				Home Phone:			
City:	Delray Beach	Zip: 33484		Work Phone:			
County	y: Palm Beach			Cell Phone:			
Insura	nce Company:			Policy #:			
Year o	of Home: 1986	# of Stories: On	е	Email:			
	E: Any documentation used in y						
	pany this form. At least one ph h 7. The insurer may ask addit						
_	ilding Code: Was the structure b	-					
	HVHZ (Miami-Dade or Broward				C for nomes focated in		
X	A. Built in compliance with the		•		rmit application with		
	a date after 3/1/2002: Building l				**		
	B. For the HVHZ Only: Built in						
	provide a permit application with			cation Date (MM/DD/YYYY)/	/		
	C. Unknown or does not meet the	ne requirements of Answ	er "A" or "B"				
	of Covering: Select all roof covering:						
	R Year of Original Installation/Revering identified.	placement OR indicate the	hat no information was	available to verify compliant	ance for each roof		
CO	_	Permit Application	FBC or MDC	Year of Original Installation or	No Information Provided for		
	2.1 Roof Covering Type:	Date	Product Approval #	Replacement	Compliance		
	1. Asphalt/Fiberglass Shingle	10 <u>/17/</u> 2018 Permit # B-	2018-035567-0000				
	2. Concrete/Clay Tile						
	3. Metal						
	4. Built Up	/					
	5. Membrane						
	6. Other						
X	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 of	lo not meet the requirem	ents of Answer "A" or	· "B".			
	D. No roof coverings meet the r	equirements of Answer '	"A" or "B".				
3. Ro	Roof Deck Attachment: What is the weakest form of roof deck attachment?						
_	mean uplift less than that requir	•					
B. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (space 24"inches and burged and approximate of 12" inches in the field OB. A proportion of 12" inches in the field OB.							
	24"inches o.c.) by 8d common nails spaced a maximum of 12" inches in the fieldOR- Any system of screws, nails, adhesive other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails spata a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.						
X	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						
Inspec	ctors Initials Froperty Ad		• •				

*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 182 psf.	least			
	□ D. Reinforced Concrete Roof Deck.					
	П	E. Other:				
	П	F. Unknown or unidentified.				
		G. No attic access.				
4.		of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks wi eet of the inside or outside corner of the roof in determination of WEAKEST type)	thin			
		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	d to			
		☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D				
	Miı	nimal 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 and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.	m			
		B. Clips				
		\square 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 position requirements of C or D, but is secured with a minimum of 3 nails.	nail			
	X	C. Single Wraps				
		Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured w minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	ith 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 was 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 both sides, and is secured to the top plate with a minimum of three nails on each side.	on			
		E. Structural Anchor bolts structurally connected or reinforced concrete roof.				
		F. Other:				
		G. Unknown or unidentified				
		H. No attic access				
5.		of Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or was host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).	ll of			
		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 area sq ft				
	X	C. Other Roof Any roof that does not qualify as either (A) or (B) above.				
6.	Sec	A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to 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. B. No SWR.	the			
	X	C. Unknown or undetermined.				
In		etors Initials Property Address 5060 Nesting Way Delray Beach, FL 33484				
.1.75						

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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		Х	Х	Χ		Х
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	Χ				Х	

- 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

\sqcup 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
- 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 sprotective coverings not meeting the requirements of Anywith me decomposition of compliance (Level N in the total)	nswer "A", "B", or C" or sys						
with no documentation of compliance (Level N in the ta	,	GI.					
 □ 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 D in the table above, and no Non-Glazed openings classified as Level X in the 							
table above ☐ N.3 One or More Non-Glazed openings is classified as Leve	al V in the table above						
X. None or Some Glazed Openings One or more Glazed		evel X iı	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:	License Type:	<u>_</u>	License or Certificate #:				
Seth A. Ford Inspection Company:	Certified General Contr	Phone:	CGC 062495				
inspection company.		Thone.	561.718.7560				
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 statut		er of hours of hurricane mitigation				
☐ Building code inspector certified under Section 468.607, Florida	Statutes.						
🛚 General, building or residential contractor licensed under Section	a 489.111, Florida Statutes.						
☐ Professional engineer licensed under Section 471.015, Florida St	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		ns to prop	perly complete a uniform mitigation				
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, Seth A. Ford am a qualified inspector and I personally performed the inspection or (licensed (print name) contractors and professional engineers only) I had my employee (N/A) perform the inspection (print name of inspector) 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. 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 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 Property Address 5060 Nesting Way Delray Beach, FL 33484							
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1. Address



2. Roof Covering – Asphalt Shingles



3. Roof Deck Attachment – 19/32" Plywood



3. Roof Deck Attachment – Trusses at 24" O. C. Max.



3. Roof Deck Attachment – 8d Nails



3. Roof Deck Attachment – Fasteners at 6" O. C. Max. In the Field



4. Roof to Wall Attachment – Single Wraps – Steel Straps w/ 2 Nails Min. at Face



4. Roof to Wall Attachment – Single Wraps – Steel Straps w/ 1 Nail Min. at Back



5. Roof Geometry – Front Elevation – Non-Hip



5. Roof Geometry – Left Elevation – Non-Hip



5. Roof Geometry – Rear Elevation – Non-Hip



5. Roof Geometry – Right Elevation – Non-Hip



7. Opening Protection – Unrated Unprotected Windows



7. Opening Protection – Unprotected Unrated Unglazed Entry Door