Uniform Mitigation Verification Inspection Form

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

Inspection Date: 09/15/2021									
Owner Information									
Owner	Name: Quartz at Sapphire La	Contact Person:Rigo Roig (PM)							
Address	s: 670 Luisa Lane			Home Phone:					
City: N	aples	Zip:	34104	Work Phone:					
County: COLLIER				Cell Phone: 239-642-5	466				
Insuran	ce Company:	1		Policy #:					
Year of	Home: 2002	# of Stories: 2	# of Stories: 2		Email: rroig@resortgroupinc.com				
NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.									
the 1	Building Code: 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 2002 For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MMDD/YYYY) 08/ 27 / 2001 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) C. Unknown or does not meet the requirements of Answer "A" or "B" 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								
	ering identified.	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								
	🔀 2. Concrete/Clay Tile	4/27/2021	PRBD2021-0419288						
	3. Metal								
	4. Built Up				$\overline{\Box}$				
	5. Membrane				Ē				
	6. Other								
_									
A. All roof coverings listed above meet the FBC with a FBC or Miami-Dade Product Approval listing current installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2									
	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".								
	Roof Deck Attachment: What is the weakest form of roof deck attachment?								
	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 sheathir 24"inches o.c.) by 8d common decking with a minimum of 2 por Initials KPN Property Action 10 prope	nails spaced a maximumails per board (or 1 nai	<mark>m of 6" inches in the field.</mark> I per board if each board is	-OR- Dimensional lumber	er/Tongue & Groove				
*This v	erification form is valid for u	n to five (5) years prov	ided no material changes	have been made to the st	tructure or				

inaccuracies found on the form.

 ✓ 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" g the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and 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 me position requirements of C or D, but is secured with a minimum of 3 nails. ✓ C. Single Wraps ✓ Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secure 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 beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secure 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 both sides, and is secured to the top plate with a minimum of three nails on each side. ✓ E. Structural ✓ Anchor bolts structurally connected or reinforced concrete roof. ✓ F. Other: ✓ G. Unknown or unidentified ✓ H. No attic access No attic access No attic access No attic access 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 ✓ Total roof system perimeter: ✓ feet ✓ Total ro	eet the nail red with a e bond ured with				
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less than 2:12. Poot area with slone less than 2:12. gg ff: Total root area gg f					
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.					
 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 dwalling from water intrusion in the event of roof covering loss. 					
dwelling from water intrusion in the event of roof covering loss. B. No SWR.	ic				
C. Unknown or undetermined.	ie				
Inspectors Initials KPN Property Address 670 Luisa Lane Naples	ie				
Inspectors Initials KPN Property Address 670 Luisa Lane Naples *This verification form is valid for up to five (5) years provided no material changes have been made to the structure of the str	ie				

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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 Glass Entry 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. 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 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 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 Inspectors Initials KPN Property Address 670 Luisa Lane **Naples**

^{*}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.

protective	ior Opening Protection (unverified shutter see coverings not meeting the requirements of Arocumentation of compliance (Level N in the tax	nswer "A", "B", or C" or systems	All Glazed openings are protected with that appear to meet Answer "A" or "B"				
N.2 One	Non-Glazed openings classified as Level A, B, C, c e or More Non-Glazed openings classified as Level		* · ·				
table ab	ove e or More Non-Glazed openings is classified as Leve	el X in the table above					
X. None	or Some Glazed Openings One or more Glaze	ed openings classified and Level 2	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 Na	^{me:} Kevin P. Noack	License Type: Home Inspector	License or Certificate #: HI 9868				
Inspection Company:	Florida Property Inspectors, Inc	Phone	239-209-2366				
Oualified In	spector – I hold an active license as a	: (check one)					
Home inspectraining appr Building cod General, buil Professional Professional Any other in	Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam. Building code inspector certified under Section 468.607, Florida Statutes. General, building or residential contractor licensed under Section 489.111, Florida Statutes. Professional engineer licensed under Section 471.015, Florida Statutes. Professional architect licensed under Section 481.213, Florida Statutes.						
Licensees under experience to configuration provided in the second secon	er than licensed contractors licensed under 471.015, Florida Statues, must inspect the star s.471.015 or s.489.111 may authorize a dir conduct a mitigation verification inspection. ack am a qualified inspector at name) typrofessional engineers only) I had my employee.	ructures personally and not threect employee who possesses the	requisite skill, knowledge, and inspection or (licensed perform the inspection				
and I agree to be responsible for his/her work.							
Qualified Inspe	ector Signature: Keven Phack	Date: 09/15/2021					
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							
	ensing agency or to criminal prosecution. (S						
certifies this for performed the	rm shall be directly liable for the misconduc inspection.	t of employees as if the authoriz	zed mitigation inspector personally				
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: 09/15/2021							
~ig							
obtain or receiv	or entity who knowingly provides or utters a we a discount on an insurance premium to w ree. (Section 627.711(7), Florida Statutes)						
	on this form are for inspection purposes on tection from hurricanes.	ly and cannot be used to certify	any product or construction feature				
Inspectors Initi	als KPN Property Address 670 Luisa Land	e N	Naples				
	on form is valid for up to five (5) years provund on the form.	ided no material changes have	been made to the structure or				

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