## **Uniform Mitigation Verification Inspection Form**

	this form and any do	ocumentation provid	ded with the insuranc	<u>e policy</u>			
Inspection Date:							
Owner Information							
Owner Name:			Contact Person:				
Address:			Home Phone:				
City:	Zip:		Work Phone:				
County:			Cell Phone:				
Insurance Company:			Policy #:				
Year of Home:	# of Stories:		Email:	Email:			
NOTE: Any documentation used in value accompany this form. At least one phothough 7. The insurer may ask addition.  1. Ruilding Code: Was the structure by	tograph must accompainal questions regarding	ny this form to validat g the mitigated feature	te each attribute marke e(s) verified on this form	ed in questions 3 n.			
the HVHZ (Miami-Dade or Broward	<ol> <li>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)?</li> <li>A. Built in compliance with the FBC: Year Built For homes built in 2002/2003 provide a permit application with</li> </ol>						
a date after 3/1/2002: Building Pe	ermit Application Date (N	MM/DD/YYYY)//		11			
<ul> <li>□ 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)//</li> <li>□ C. Unknown or does not meet the requirements of Answer "A" or "B"</li> </ul>							
2. Roof Covering: Select all roof covering OR Year of Original Installation/Replacement of Covering identified.	ng types in use. Provide	the permit application		ance for each roof			
Per 2.1 Roof Covering Type:	mit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
☐ 1. Asphalt/Fiberglass Shingle							
<u> </u>	//						
				_			
• —							
<u> </u>							
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 Miar roofing permit application after 9							
$\Box$ C. One or more roof coverings do	not meet the requirement	nts of Answer "A" or "	В".				
☐ D. No roof coverings meet the rec	quirements of Answer "A	A" or "B".					
3. <b>Roof Deck Attachment</b> : What is the	weakest form of roof de	ck attachment?					
<ul> <li>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.</li> <li>B. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a maximum of</li> </ul>							
24"inches o.c.) by 8d common na other deck fastening system or tru a maximum of 12 inches in the fi	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.						
24"inches o.c.) by 8d common na decking with a minimum of 2 nai	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-						
Inspectors Initials Property Add	ress						
*This varification form is valid for un t	o fivo (5) voore provido	d no material change	s hava haan mada to tha	structure or			

inaccuracies found on the form.

			er deck fastening system or truss/rafter spacing that is shown to have an equivalent spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least					
		D. Reinforced Concrete Roof Deck.						
		G. No attic access.						
4.		Roof to Wall Attachment: What is the <u>WEAKEST</u> 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						
		the top plate of the wall, or	plate of wall using nails driven at an angle through the truss/rafter and attached to					
			meet the minimal conditions or requirements of B, C, or D					
	Mi	Minimal conditions to qualify for categories I						
			minimum of three (3) nails, and					
			of the wall framing, or embedded in the bond beam, with less than a ½" gap from ad blocked no more than 1.5" of the truss/rafter, and free of visible severe					
		· - r-						
			wrap over the top of the truss/rafter, or					
		position requirements of C or	mum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail D, but is secured with a minimum of 3 nails.					
		Metal connectors consisting	of a single strap that wraps over the top of the truss/rafter and is secured with a out side and a minimum of 1 nail on the opposing side.					
		D. Double Wraps						
		beam, on either side of the tro	of 2 separate straps that are attached to the wall frame, or embedded in the bond ass/rafter where each strap wraps over the top of the truss/rafter and is secured with front side, and a minimum of 1 nail on the opposing side, <b>or</b>					
			of a single strap that wraps over the top of the truss/rafter, is secured to the wall on 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						
	Ш	H. No attic access						
5.			at consider roofs of porches or carports that are attached only to the fascia or wall of determination of roof perimeter or roof area for roof geometry classification).					
			of shapes greater than 10% of the total roof system perimeter.  eatures: 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 with slope less than 2:12 sq ft; Total roof area sq ft					
		C. Other Roof Any roof that does not qualified the Company of the	nalify as either (A) or (B) above.					
6.	Sec	A. SWR (also called Sealed Roof Deck) Se	d underlayments or hot-mopped felts do not qualify as an SWR)  If-adhering polymer modified-bitumen roofing underlayment applied directly to the r (not foamed-on insulation) applied as a supplemental means to protect the ent of roof covering loss.					
		C. Unknown or undetermined.						
Ins	spec	pectors Initials Property Address						
*Т	hic '	is verification form is valid for up to five (5)	vears provided no material changes have been made to the structure or					

<sup>\*</sup>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.

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

Glazed Openings

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						
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, ANS/DASMA 108, or PA/TAS202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
14	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection						
a sy	<b>. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 ll</b> minimum, with impact resistant coverings or products listed as wind stem of the State of Florida or Miami-Dade County and meet the required Large Missile Impact" (Level A in the table above).	borne debr	is protec	tion device	es in the	product	approv
<ul> <li>Miami-Dade County PA 201, 202, <u>and</u> 203</li> </ul>							
	<ul> <li>Florida Building Code Testing Application Standard (TAS) 201, 202, <u>and</u> 203</li> </ul>						
	<ul> <li>American Society for Testing and Materials (ASTM) E 1886 <u>and</u> ASTM E 1996</li> </ul>						
	<ul> <li>Southern Standards Technical Document (SSTD) 12</li> </ul>						
<ul> <li>For Skylights Only: ASTM E 1886 <u>and</u> ASTM E 1996</li> </ul>							
<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>							
	☐ 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						

A 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

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

the table above

Inspectors Initials \_\_\_\_\_ Property Address\_

N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the	answer "A", "B", or C" or	ntation) Al systems th	ll Glazed openings are protected with at appear to meet Answer "A" or "B"		
□ N.1 All Non-Glazed openings classified as Level A, B, C,	· · · · · · · · · · · · · · · · · · ·	o Non-Glaz	ed openings exist		
☐ N.2 One or More Non-Glazed openings classified as Leve table above					
☐ N.3 One or More Non-Glazed openings is classified as Le	vel X in the table above				
☐ X. None or Some Glazed Openings One or more Gla	zed openings classified an	d Level X	in the table above.		
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, prov	_				
Qualified Inspector Name:	License Type:		License or Certificate #:		
Inspection Company:		Phone:			
Qualified Inspector – I hold an active license as a	: (check one)				
Home inspector licensed under Section 468.8314, Florida Statutaning approved by the Construction Industry Licensing Board			nber of hours of hurricane mitigation		
☐ Building code inspector certified under Section 468.607, Florid	la Statutes.				
☐ General, building or residential contractor licensed under Secti	on 489.111, Florida Statutes				
☐ Professional engineer licensed under Section 471.015, Florida	Statutes.				
☐ Professional architect licensed under Section 481.213, Florida	Statutes.				
Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.					
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, am a qualified inspector and I personally performed 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.  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 identificati	on was provided to me or	my Author	rized Representative.		
Signature:	Date:				
An individual or entity who knowingly provides or utters obtain or receive a discount on an insurance premium to vof the first degree. (Section 627.711(7), Florida Statutes)					
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	nly and cannot be used to	certify ar	ny product or construction feature		
Inspectors Initials Property Address					
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