Uniform Mitigation Verification Inspection Form

	of this form a	and any documentation pro	ovided with the insuran	ce policy			
Inspection Date: 5-8-2014							
Owner Information	OI- A	L'	Contact Person:				
Address: 300 Harbour Dr. #102	Owner Name: Porpoise Bay Villas Condo Association						
	1 72	00000	Home Phone:				
City: Vero Beach	Zip:	32963	Work Phone:				
County: Indian River			Cell Phone:				
Insurance Company:	1 >		Policy #:				
Year of Home: 1979	# of Stor	ries: 1	Email:				
NOTE: Any documentation used in vaccompany this form. At least one pl though 7. The insurer may ask addit	notograph mus ional question	st accompany this form to val s regarding the mitigated fea	lidate each attribute mark ture(s) verified on this for	ed in questions 3 m.			
Building Code: Was the structure be the HVHZ (Miami-Dade or Broward Code)	d counties), So	uth Florida Building Code (SF	BC-94)?				
a date after 3/1/2002: Building	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 provide a permit application wit C. Unknown or does not meet the 	th a date after 9	9/1/1994: Building Permit App	. For homes built in dication Date (MM/DD/YYYY)	1994, 1995, and 1996			
 Roof Covering: Select all roof cover OR Year of Original Installation/Recovering identified. 	ring types in us	se. Provide the permit applicati					
	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
1. Asphalt/Fiberglass Shingle	5 , 19 , 2005	permit #2005052045	2005				
2. Concrete/Clay Tile	1_1_1						
A. All roof coverings listed above installation OR have a roofing p	e meet the FB0	C with a FBC or Miami-Dade on date on or after 3/1/02 OR 6	Product Approval listing cu	rrent at time of			
☐ B. All roof coverings have a Mia roofing permit application after	mi-Dade Prod	uct Approval listing current at	time of installation OR (for	the HVHZ only) a			
□ C. One or more roof coverings d	C. One or more roof coverings do not meet the requirements of Answer "A" or "B".						
☐ D. No roof coverings meet the re	D. No roof coverings meet the requirements of Answer "A" or "B".						
3 Roof Deck Attachment: What is the	Roof Deck Attachment: What is the weakest form of roof deck attachment?						
A. Plywood/Oriented strand boar by staples or 6d nails spaced at shinglesOR- Any system of scr	2001						
B. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common n other deck fastening system or t maximum of 12 inches in the fie	ails spaced a m russ/rafter spac eld or has a me	naximum of 12" inches in the facing that is shown to have an ean uplift resistance of at least	fieldOR- Any system of sci equivalent or greater resista 103 psf.	rews, nails, adhesives, ance 8d nails spaced a			
C. Plywood/OSB roof sheathing 24"inches o.c.) by 8d common n decking with a minimum of 2 na Any system of screws, nails, adh	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 stors Initials Property Address 300 Harbour Dr. #102 Vero Beach, Florida						
*This verification form is valid for up	to five (5) vear	rs provided no material chan	ges have been made to the	structure.			

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		r greater re: 82 psf.	sistance than 8d common nails spaced a maximum of 6 inches in	the field or has a mean uplift resistance of at leas	
		•	ed Concrete Roof Deck.		
L		E. Other:			
_	F	. Unknown	or unidentified.		
L		3. No attic a	iccess.	•	
4. <u>R</u>	feet	of the insid	connection? (Do coroutside corner of the roof in determination of WEAKEST ty	not include attachment of hip/valley jacks within pe)	
X	A	. Toe Nails			
		L	Truss/rafter anchored to top plate of wall using nails driven at the top plate of the wall, or		
		X	Metal connectors that do not meet the minimal conditions or re-	equirements of B, C, or D	
M	linii	nal condition	ons to qualify for categories B, C, or D. All visible metal conn	ectors 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 the blocking or truss/rafter and blocked no more than 1.5" of th corrosion.		
	В	. Clips			
			Metal connectors that do not wrap over the top of the truss/rafte		
	_		Metal connectors with a minimum of 1 strap that wraps over the position requirements of C or D, but is secured with a minimum		
	C	. Single Wi	aps 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 of		
	D	. Double W	•		
		Ц	Metal Connectors consisting of 2 separate straps that are attached beam, on either side of the truss/rafter where each strap wraps of a minimum of 2 nails on the front side, and a minimum of 1 na	over the top of the truss/rafter and is secured with	
		Ц	Metal connectors consisting of a single strap that wraps over the both sides, and is secured to the top plate with a minimum of the	e top of the truss/rafter, is secured to the wall on ree nails on each side.	
Ц		Structural	Anchor bolts structurally connected or reinforced concrete r	roof.	
		Other:	or unidentified		
		No attic ac			
		. No anne av	CC35		
5. <u>Re</u>	oof (Geometry:	What is the roof shape? (Do not consider roofs of porches or carpover unenclosed space in the determination of roof perimeter or r	orts that are attached only to the fascia or wall of roof area for roof geometry classification).	
X	Α.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the t	total roof system perimeter.	
-		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		
	-	0.1 0	less than 2:12. Roof area with slope less than 2:12	sq ft; Total roof areasq ft	
	C.	Other Roo	f Any roof that does not qualify as either (A) or (B) above.		
6. <u>Se</u> X	A.	SWR (also sheathing	Resistance (SWR): (standard underlayments or hot-mopped felocalled Sealed Roof Deck) Self-adhering polymer modified-bitum or foam adhesive SWR barrier (not foamed-on insulation) applies rom water intrusion in the event of roof covering loss.	nen roofing underlayment applied directly to the	
Ц		No SWR.	or undetermined.		
				Florida	
		/	Property Address 300 Harbour Dr. #102 Vero Beach, F		
		fication for ies found or	m is valid for up to five (5) years provided no material chang	cs have been made to the structure or	
			1/12) Adopted by Rule 690-170.0155	Page 2 of 2	
		•			

7. Opening Protection: What is the <u>weakest</u> 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.		Glázed Upenings				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	х	Х	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						
14	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Х					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
 - ☐ A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

 - ☐ 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).
 - LIC.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 Property Address 300 Harbour Dr. #102 Vero Beach, Florida

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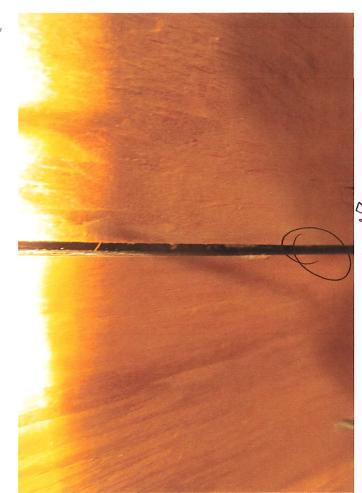
N. Exterior Opening Protection (unverified shu	itter systems with na dacumen	tation) All Glazed openings are protected with				
protective coverings not meeting the requirements with no documentation of compliance (Level N in	s of Answer "A", "B", or C" or s					
 N.2 One or More Non-Glazed openings classified as table above 						
N.3 One or More Non-Glazed openings is classified	as Level X in the table above					
X. None or Some Glazed Openings One or more	Glazed openings classified and	Level X in the table above.				
MITIGATION INSPECTIONS M Section 627.711(2), Florida Statutes,	UST BE CERTIFIED BY A QUA provides a listing of individual	LIFIED INSPECTOR. s who may sign this form.				
Qualified Inspector Name: Frank D. Hinzman	License Type: General Contractor	License or Certificate #- CGC017604				
Inspection Company: HINZMAN CONSTRUCTION	General Contractor	Phone: 772-388-2004				
Qualified Inspector – I hold an active license	os os (obook ono)	FOLLOW				
Home inspector licensed under Section 468.8314, Florida	,	tutani number of bourg of humicana mitigation				
training approved by the Construction Industry Licensing						
☐ Building code inspector certified under Section 468.607, I	Florida Statutes.					
General, building or residential contractor licensed under	Section 489.111, Florida Statutes.					
☐ Professional engineer licensed under Section 471.015, Flo						
☐ Professional architect licensed under Section 481.213, Flo						
Any other individual or entity recognized by the insurer as verification form pursuant to Section 627.711(2), Florida		tions to properly complete a uniform mitigation				
Individuals other than licensed contractors licensed u						
under Section 471.015, Florida Statues, must inspect t	he structures personally and n	of through employees or other persons.				
Licensees under s.471.015 or s.489.111 may authorize experience to conduct a mitigation verification inspect		ses the requisite skill, knowledge, and				
I, Frank D. Hinzman 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				
connectors that projessional engineers only) I had my	(print name	of inspector)				
and I agree to be responsible for his/her work.	0/					
Qualified Inspector Signature:	Date: 5-8-	2014				
An individual or entity who knowingly or through gro	ss negligence provides a false o	r fraudulent mitigation verification form is				
subject to investigation by the Florida Division of Insu	rance Fraud and may be subject (Section 627.711(4) (7) Fig.	ect 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.						
A second						
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified in this form and that proof of identification was provided to me or my Authorized Representative.						
Signature: Date: 15 (m.e 2018						
1 Control of the first of the f						
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 300 Harbour Dr. #102 Vero Beach, Florida						
"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.						
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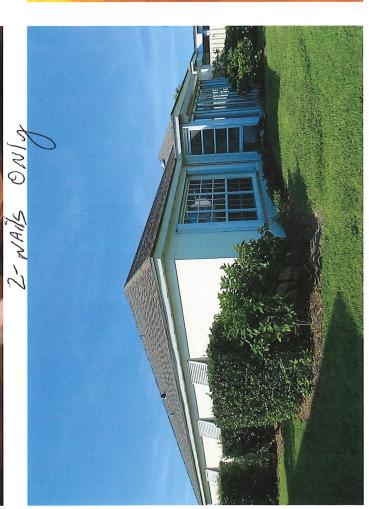












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