Uniform Mitigation Verification Inspection Form

	f this form and any	documentation provid	ed with the insurance	e policy		
Inspection Date: 5-8-2014						
Owner Information			7			
Owner Name: Porpoise Bay Villas C	odo Association		Contact Person:			
Address: 300 Harbour Dr. #401			Home Phone:			
City: Vero Beach	Zip: 32963		Work Phone:			
County: Indian River			Cell Phone:			
Insurance Company:			Policy #:			
Year of Home: 1981	# of Stories: 2		Email:			
NOTE: Any documentation used in va accompany this form. At least one pho though 7. The insurer may ask additional. Building Code: Was the structure bu	otograph must accom onal questions regard	npany this form to validat ling the mitigated feature	e each attribute marke (s) verified on this for	ed in questions 3 n.		
the HVHZ (Miami-Dade or Broward	counties), South Flori	ida Building Code (SFBC-9	94)?			
a date after 3/1/2002: Building Pe	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)//					
provide a permit application with	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 (MMDDAYYY)///					
 Roof Covering: Select all roof covering OR Year of Original Installation/Representation in the covering identified. 	ng types in use. Provi lacement OR indicate	de the permit application of that no information was a	late OR FBC/MDC Proc vailable to verify compli	luct Approval number ance for each roof		
	ruit 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 #2005052066	2005			
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installation OR have a roofing per B. All roof coverings have a Miar roofing permit application after 9.	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 do not meet the requirements of Answer "A" or "B".						
☐ D. No roof coverings meet the req						
3. Roof Deck Attachment: What is the	weakest form of roof	deck attachment?				
by staples or 6d nails spaced at 6 shinglesOR- Any system of scre mean uplift less than that required	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 v 24"inches o.c.) by 8d common na other deck fastening system or tru maximum of 12 inches in the field	ils spaced a maximun uss/rafter spacing tha d or has a mean uplit	n of 12" inches in the field. t is shown to have an equi- it resistance of at least 103	OR- Any system of scr valent or greater resista psf.	nce 8d nails spaced a		
24"inches o.c.) by 8d common na decking with a minimum of 2 nai Any system of screws, nails, adhe	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					
Inspectors Initials Property Addi						
*This verification form is valid for up to	o five (5) years provi	ded no material changes	have been made to the	structure.		

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	or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.						
		D.	Reinforce	d Concrete Roof Deck.			
			Other:				
	Ш	F.	Unknown	or unidentified.			
	Ц		No attic a				
4.	Roo	of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within cet of the inside or outside corner of the roof in determination of WEAKEST type)					
	X	A. Toe Nails					
			L	Truss/rafter anchored to top plate of wall using nails driven at an angle the top plate of the wall, or			
	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D				of B, C, or D		
	Mi	im	al conditio	ns 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.						
		В.	Clips				
				Metal connectors that do not wrap over the top of the truss/rafter, or	truss/rafter and does not meet the nail		
Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet t position requirements of C or D, but is secured with a minimum of 3 nails.				it uss ration and does not more than			
		C.	Single Wi	Metal connectors consisting of a single strap that wraps over the top of t minimum of 2 nails on the front side and a minimum of 1 nail on the opposition.	he truss/rafter and is secured with a sing side.		
	\sqcup	D.	Double W	raps	Il from a or embedded in the hand		
			Ц	beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with			
			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.				
	П	L E. Structural Anchor bolts structurally connected or reinforced concrete roof.					
		F.	Other:				
	☐ G. Unknown or unidentified						
	H. No attic access						
5. Roof Geometry: 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).							
	X		. Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perim	ystem perimeter. eter: feet		
		В.	Flat Roof	Roof on a building with 5 or more units where at least 90% of the man			
			Other Ro	of Any roof that does not qualify as either (A) or (B) above.			
6.	Se XI	A	. SWR (als	er Resistance (SWR): (standard underlayments or hot-mopped felts do not or called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplied water intrusion in the event of roof covering loss.	qualify as an SWR) g underlayment applied directly to the plemental means to protect the		
	C. Unknown or undetermined.						
Inspectors Initials Property Address 300 Harbour Dr. #401 Vero Beach, Florida					L. A. Alea attended and		
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inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 2 of 2							

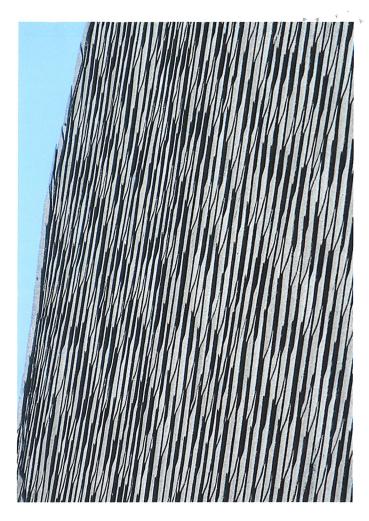
7. Opening Protection: What is the weakest form of wind borne debris protection installed on the structure? First, use the table to determine the weakest form of protection for each category of opening. Second. (a) check one answer below (A, B, C, N, or X) based upon the lowest protection level for ALL Glazed openings and (b) check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.

Opening Protection Level Chart			Glázed Upenings				Non-Glazed Openings	
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.		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	Х	X	Х	
A	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							
И	Opening Protection products that appear to be A or B but are not verified					-		
	Other protective coverings that cannot be identified as A, B, or C					<u></u>		
х	No Windborne Debris Protection	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.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
- U. 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 D in the table above, and no Non-Glazed openings classified as Level D in the table above, 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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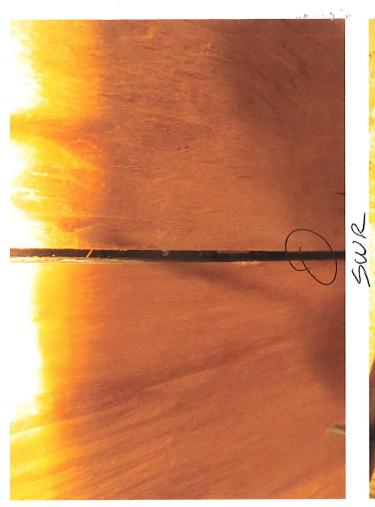
N. Exterior Opening Protection (unverified shutter systems wi	with no documentation) All Glazed openings are protected with					
protective coverings not meeting the requirements of Answer	, B, or C or systems that appears					
with no documentation of compliance (Level N in the table above	with no documentation of compliance (Level N in the table above).					
the system of the state of the system of the	e table above, or no Non-Glazed openings exist					
N.1 All Non-Glazed openings classified as Level D in the tall N.2 One or More Non-Glazed openings classified as Level D in the tall table above	able above, and no Non-Glazed openings classified as Level X in the					
N.3 One or More Non-Glazed openings is classified as Level X in the	ie table above					
X. None or Some Glazed Openings One or more Glazed openin	ngs classified and Level X in the table above.					
MITIGATION INSPECTIONS MUST BE CERT	ting of individuals who may sign this form.					
Section 627.711(2), Florida Statutes, provides a listi	Vice: License or Certificate #:					
Qualified Inspector Name: Frank D. Hinzman General	al Contractor CGC017604					
Inspection Company: HINZMAN CONSTRUCTION	Phone: 772-388-2004					
	k one)					
Oualified Inspector – I hold an active license as a: (check Home inspector licensed under Section 468.8314. Florida Statutes who ha	as completed the statutory number of heart a					
training approved by the Construction Industry Licensing Board and comp.	protein of a pro					
Duit-line gode inspector certified under Section 468.607, Florida Statutes.	S.					
General, building or residential contractor licensed under Section 489.111	1, Florida Statutes.					
Professional engineer licensed under Section 471.015, Florida Statutes.						
a control of the cont	and iffections to properly complete a uniform mitigation					
☐ Professional architect licensed under Section 481.213, Florida Statutes. ☐ Any other individual or entity recognized by the insurer as possessing the	s necessary quarrications to properly compared					
con community Section 67/ /11(2), Florida Statutes.						
Individuals other than licensed contractors licensed under Section	489.111, Florida Statutes, or professional engineer					
Individuals other than licensed contractors licensed under Section and under Section 471.015, Florida Statues, must inspect the structures Licensees under s.471.015 or s.489.111 may authorize a direct emplession inspection.	olovee who possesses the requisite skill, knowledge, and					
Licensees under s.471.015 or s.489.111 may authorize a direct emp						
	ersonally 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.	Date: _5-8-2014					
Qualified Inspector Signature:						
	e provides a false or fraudulent mitigation verification form is					
subject to investigation by the Florida Division of Insurance Fraud appropriate licensing agency of to criminal prosecution. (Section 6	627.711(4)-(7), Florida Statutes) The Quantitation inspector personally					
appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Quarter appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Quarter appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Quarter appropriate licensing agency or to criminal prosecution.						
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the						
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the named Qualified Inspector or his or her employee the perfect that the named Qualified Inspector or his or her employee the named Qualified Inspector or his or her employee the named Qualified Inspector						
late: III MAR VOIS						
An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to						
1 C.1. Cart darron (Section 0/1./111/h Piorial Otto						
of the first degree (seems)	learnet be used to certify any product or construction feature					
The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature						
1 Address 300 Harbour Dr. #401 Vero Beach, Florida						
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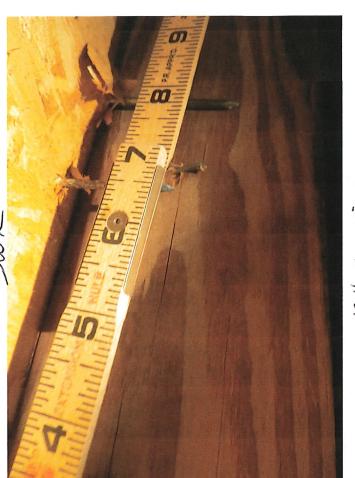




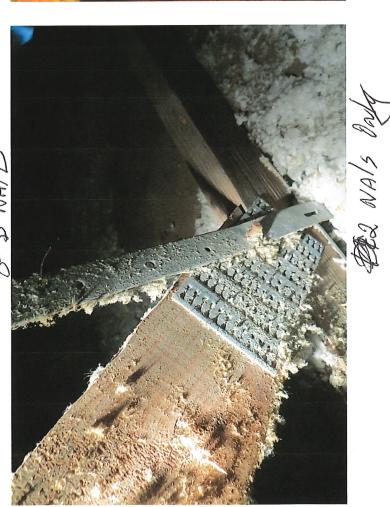












12" SPABINS