

Uniform Mitigation Verification Inspection Form

| Maintain a copy of the | is form and any d | ocumentation provid | ed with the insurance | policy | |
|--|---|--|---|---|--|
| Inspection Date: 01/18/2018 | | | | | |
| Owner Information | | | | | |
| Owner Name: Island Village Condo Association Contact Person: | | | | | |
| Address: 2135 N Courtenay Pkwy Buildin | Home Phone: | | | | |
| City: Merritt Island | Zip: | 32953 | Work Phone: | | |
| County: Brevard | | | Cell Phone: | | |
| Insurance Company: | | | Policy #: | | |
| Year of Home: 1974 | # of Stories: 2 | | Email: | | |
| | _ | | | | |
| NOTE: Any documentation used in valid accompany this form. At least one photog though 7. The insurer may ask additional | graph must accompa | any this form to validate | each attribute marked | | |
| Building Code: Was the structure built in the HVHZ (Miami-Dade or Broward could be about the HVHZ). A. Built in compliance with the FBC | inties), South Florida | Building Code (SFBC-94 | | | |
| a date after 3/1/2002: Building Perm | it Application Date (| MM/DD/YYYY) | | | |
| B. For the HVHZ Only: Built in comprovide a permit application with a d | late after 9/1/1994: B | uilding Permit Application | . For homes built in 199 on Date (MM/DD/YYYY) | 94, 1995, and 1996 | |
| X C. Unknown or does not meet the red | quirements of Answe | er "A" or "B" | | | |
| 2. Roof Covering: Select all roof covering OR Year of Original Installation/Replace covering identified. | | | | ce for each roof | |
| | Application Date | FBC or MDC Product Approval # | Year of Original Installation or Replacement | No Information Provided for Compliance | |
| ▼ 1. Asphalt/Fiberglass Shingle 02. | /20/09 | Permit # 09BC01206 | Final 03/13/09 | | |
| 2. Concrete/Clay Tile | | | | $\overline{\Box}$ | |
| 3. Metal | | | | | |
| <u> </u> | | | | | |
| 4. Built Up | | | | | |
| ∑ 5. Membrane 02 | /20/09 | Permit # 09BC01206 | Final 03/13/09 | | |
| 6. Other | | | | | |
| A. All roof coverings listed above m installation OR have a roofing permi | t application date on | or after 3/1/02 OR the roo | of is original and built in | 2004 or later. | |
| B. All roof coverings have a Miamiroofing permit application after 9/1/1 | | | | | |
| C. One or more roof coverings do no | ot meet the requireme | ents of Answer "A" or "B' | | | |
| D. No roof coverings meet the requir | rements of Answer "A | A" or "B". | | | |
| 3. Roof Deck Attachment : What is the we | akest form of roof de | eck attachment? | | | |
| A. Plywood/Oriented strand board (6 by staples or 6d nails spaced at 6" a shinglesOR- Any system of screws mean uplift less than that required for | OSB) roof sheathing along the edge and 1 s, nails, adhesives, or Options B or C bel | attached to the roof truss/ 2" in the fieldOR- Batt her deck fastening systen ow. | en decking supporting w n or truss/rafter spacing th | ood shakes or wood nat has an equivalent | |
| B. Plywood/OSB roof sheathing wit 24"inches o.c.) by 8d common nails other deck fastening system or truss/a maximum of 12 inches in the field | spaced a maximum or rafter spacing that is or has a mean uplift | of 12" inches in the field. shown to have an equiva resistance of at least 103 | -OR- Any system of scre lent or greater resistance psf. | ws, nails, adhesives, than 8d nails spaced | |
| C. Plywood/OSB roof sheathing wit 24"inches o.c.) by 8d common nails decking with a minimum of 2 nails property Inspectors Initials JW Property Address | spaced a maximum per board (or 1 nail p | of 6" inches in the field. er board if each board is | -OR- Dimensional lumber | er/Tongue & Groove | |
| inspectors initials rioperty Address | | ,, 9 | | | |
| 1777 1 101 11 0 1 11 10 1 | | | | | |

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| | | or greater res 182 psf. | istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at lea |
|----|-------------|-------------------------|--|
| | | - | d Concrete Roof Deck. |
| | | E. Other: | |
| | | F. Unknown | or unidentified. |
| | | G. No attic a | ccess. |
| 4. | 5 fe | | achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type) |
| | | 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 |
| | | \boxtimes | Metal connectors that do not meet the minimal conditions or requirements of B, C, or D |
| | Mir | nimal condition | ons 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. |
| | Ш | B. Clips | |
| | | 님 | 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 na position requirements of C or D, but is secured with a minimum of 3 nails. |
| | Ш | C. Single Wi | raps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with |
| | | | minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side. |
| | | D. Double W | Vraps |
| | | | 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 with 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 on 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: | |
| | | | or unidentified |
| | Ш | H. No attic a | ccess |
| 5. | | | What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification). |
| | | 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 | |
| | \boxtimes | C. Other Roo | |
| 6 | Sec | ondary Wate | r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) |
| | | A. SWR (als sheathing | o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss. |
| | \boxtimes | B. No SWR. | |
| In | — spec | | JW Property Address2135 N Courtenay Pkwy Building C Merritt Island |
| | | | |
| *T | his v | verification fo | orm is valid for up to five (5) years provided no material changes have been made to the structure or |

Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent

inaccuracies found on the form.



7. <u>Opening Protection</u>: 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.

| • | pening Protection Level Chart | | Glazed Openings | | | | Non-Glazed Openings | |
|-----------------|---|------------------------------|-----------------|-----------|----------------|----------------|------------------------|--|
| openi form (| an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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 | | X | X | X | | 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 | | | | | | | |
| N | Other protective coverings that cannot be identified as A, B, or C | | | | | | | |
| Х | No Windborne Debris Protection | X | | | | X | | |

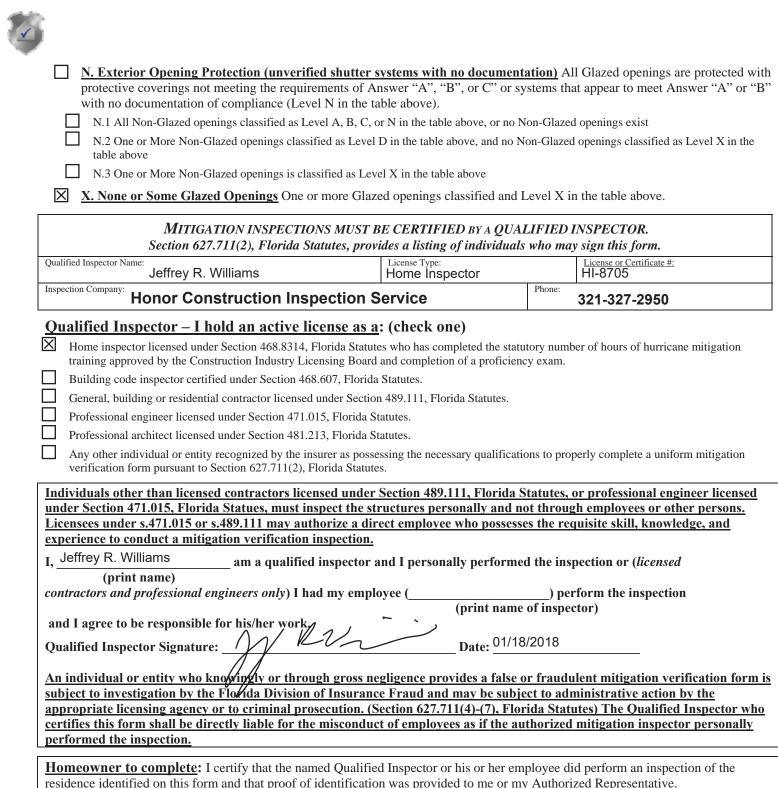
- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County 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 device 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 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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Inspectors Initials JW Property Address 2135 N Courtenay Pkwy Building C

Merritt Island



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.

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Front (Left)



Front (Right)



Left



Right



Rear (Left)





Address



Building



6in nail pattern



6in nail pattern

