## **Christopher North Builders Inc**

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Naples 34108

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## **Uniform Mitigation Verification Inspection Form**

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

Inspection Date: Feb 22, 2023							
Owner Information							
Owner Name:     Marco Courtyard Towers Building 1     Contact Person:							
Address: 1111 Swallow Avenue	9	Home Phone:					
City: Marco Island Zip: 34145		Work Phone:					
County: Collier		Cell Phone:					
Insurance Company:		Policy #:					
Year of Home: 2001	# of Stories: 8	Email:					

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.

- 1. <u>Building Code</u>: 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 \_\_\_\_\_. 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 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"
- <u>Roof Covering:</u> 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 covering identified.

2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
1. Asphalt/Fiberglass Shingle	//			
2. Concrete/Clay Tile	//		2001	
3. Metal	/			
4. Built Up	//			
5. Membrane	/			
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 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".

3. <u>Roof Deck Attachment</u>: What is the <u>weakest</u> 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 field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- 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 field.-OR- 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 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 field. -OR- 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

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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 common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.

	$\square$		Reinforce Other:	ed Concrete Roof Deck.		
	H			or unidentified.		
	H		No attic a			
4.		of t	o Wall Att	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not in e or outside corner of the roof in determination of WEAKEST type)	iclude attachment of hip/valley ja	icks within
		A.	Toe Nails			
				Truss/rafter anchored to top plate of wall using nails driven at an ar the top plate of the wall, or	igle through the truss/rafter and	attached to
				Metal connectors that do not meet the minimal conditions or requirem	ients of B, C, or D	
	Mir	nim	al 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 the blocking or truss/rafter <b>and</b> blocked no more than 1.5" of the truss 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 position requirements of C or D, but is secured with a minimum of 3 minimum of		eet the nail
	$\Box$	C.	Single W			
				Metal connectors consisting of a single strap that wraps over the to minimum of 2 nails on the front side and a minimum of 1 nail on the		ired with a
		D.	Double V			
				Metal Connectors consisting of 2 separate straps that are attached to the beam, on either side of the truss/rafter where each strap wraps over the a minimum of 2 nails on the front side, and a minimum of 1 nail on the strap wraps over the s	e top of the truss/rafter and is sec	
				Metal connectors consisting of a single strap that wraps over the top or both sides, and is secured to the top plate with a minimum of three na		e wall on
	$\square$		Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.		
	$\Box$	G.	Unknown	or unidentified		
		H.	No attic a	ccess		
5.				What is the roof shape? (Do not consider roofs of porches or carports the over unenclosed space in the determination of roof perimeter or roof and		
	$\mathbf{X}$	A.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total r	oof system perimeter.	
			Flat Roof	Total length of non-hip features: feet; Total roof system p Roof on a building with 5 or more units where at least 90% of the	perimeter: feet e main roof area has a roof slope o	of
		C.	Other Ro	less than 2:12. Roof area with slope less than 2:12 sq f of Any roof that does not qualify as either (A) or (B) above.	rt; Total roof areasq :	ft
6.			SWR (als	<b>r</b> Resistance (SWR): (standard underlayments or hot-mopped felts do o called Sealed Roof Deck) Self-adhering polymer modified-bitumen r or foam adhesive SWR barrier (not foamed-on insulation) applied as a	oofing underlayment applied dire	
			-	from water intrusion in the event of roof covering loss.	supplemental means to protect th	
	$\mathbf{X}$		No SWR.	÷		
In	spec	tors	s Initials	<b>N</b> Property Address 1111 Swallow Avenue	Marco Island	3414
*T	'his v	veri	ification fo	orm is valid for up to five (5) years provided no material changes ha	ave been made to the structure	or

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inaccuracies found on the form.

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.

<b>Opening Protection Level Chart</b> Place an "X" in each row to identify all forms of protection in use for each			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						
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						

<u>A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only)</u> 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, <u>and</u> 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 <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

$\square$	С.	Exterior	0	pening	<b>Protection-</b>	Wood	Structural	Panels	meeting	FBC	2007	All	Glazed	openings	are	covered	with
							Table 1609.1										

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 1111 Swallow Avenue Marco Island 34145

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N. Exterior Opening Protection (unver- protective coverings not meeting the req with no documentation of compliance (L	uirements of Answer "A", "B", or		
N.1 All Non-Glazed openings classified as	· · · · · · · · · · · · · · · · · · ·	or no Non-Glazed openings exist	
		and no Non-Glazed openings classified as Lev	vel X in the
N.3 One or More Non-Glazed openings is	classified as Level X in the table above		
X. None or Some Glazed Openings On			
	TIONS MUST BE CERTIFIED BY a Statutes, provides a listing of ind	-	
Qualified Inspector Name: Chris North	License Type: CGC	License or Certificate #: 1506189	
Inspection Company: CHristopher North Builders Inc chrisnorthna	ples@gmail.com	Phone: 239-825-9155	
Qualified Inspector – I hold an active	<u>e license as a</u> : (check one)		
<ul> <li>Home inspector licensed under Section 468.831 training approved by the Construction Industry</li> <li>Building code inspector certified under Section</li> <li>General, building or residential contractor licen</li> <li>Professional engineer licensed under Section 48</li> <li>Professional architect licensed under Section 48</li> </ul>	Licensing Board and completion of a p 468.607, Florida Statutes. used under Section 489.111, Florida Sta 71.015, Florida Statutes. 81.213, Florida Statutes.	roficiency exam. tutes.	-
Any other individual or entity recognized by the verification form pursuant to Section 627.711(2)		ialifications to properly complete a uniform r	nitigation
(print name) contractors and professional engineers only) I and I agree to be responsible for his/her wor Qualified Inspector Signature: <u>An individual or entity who knowingly or the</u> <u>subject to investigation by the Florida Divisi</u> <u>appropriate licensing agency or to criminal p</u> <u>certifies this form shall be directly liable for</u> <u>performed the inspection.</u>	t inspect the structures personally authorize a direct employee who on inspection. fied inspector and I personally pe I had my employee ( <sup>na</sup> (prin rk. Date rough gross negligence provides a ion of Insurance Fraud and may I prosecution. (Section 627.711(4)-( the misconduct of employees as i	y and not through employees or other possesses the requisite skill, knowledge rformed the inspection or ( <i>licensed</i> ) perform the inspection t name of inspector) :: Feb 22, 2023 A false or fraudulent mitigation verific: be subject to administrative action by to 7), Florida Statutes) The Qualified Ins f the authorized mitigation inspector p	persons. , and ation form is the spector who ersonally
Homeowner to complete: I certify that the residence identified of this form and that proof Signature:		ne or my Authorized Representative.	of the
An individual or entity who knowingly provi obtain or receive a discount on an insurance of the first degree. (Section 627.711(7), Florid	premium to which the individual		
The definitions on this form are for inspection as offering protection from hurricanes.	on purposes only and cannot be u	sed to certify any product or construct	ion feature
Inspectors Initials $\overline{\mathcal{N}}$ Property Address	1111 Swallow Avenue	Marco Island	3414
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