Uniform Mitigation Verification Inspection Form

Maintain a copy of the	nis torm and any do	cumentation provide	led with the insurance	e policy				
Inspection Date:								
Owner Information			1					
Owner Name:			Contact Person:					
Address:	Τ		Home Phone:					
City:	Zip:		Work Phone:					
County:			Cell Phone:					
Insurance Company:			Policy #:					
Year of Home:	Email:							
NOTE: Any documentation used in valid accompany this form. At least one photo though 7. The insurer may ask additional. Building Code: Was the structure built	graph must accompar al questions regarding	y this form to validat the mitigated feature	e each attribute marke (s) verified on this form	d in questions 3 a.				
the HVHZ (Miami-Dade or Broward co ☐ A. Built in compliance with the FB	unties), South Florida E C: Year Built	Building Code (SFBC-9 For homes built in	94)? 2002/2003 provide a per					
a date after 3/1/2002: Building Permit Application Date (MM/DD/YYYY)/								
OR Year of Original Installation/Replace covering identified.	ement OR indicate that	no information was av	ailable to verify complia	nce for each roof				
Permi 2.1 Roof Covering Type:	t Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	Provided for Compliance				
1. Asphalt/Fiberglass Shingle								
2. Concrete/Clay Tile	/							
 A. All roof coverings listed above r installation OR have a roofing perm B. All roof coverings have a Miami roofing permit application after 9/1. 	neet the FBC with a FB nit application date on o -Dade Product Approva /1994 and before 3/1/20	r after 3/1/02 OR the roal listing current at time 1002 OR the roof is original.	oof is original and built in of installation OR (for total and built in 1997 or	n 2004 or later. the HVHZ only) a				
C. One or more roof coverings do n	•		2".					
☐ D. No roof coverings meet the requ								
3. Roof Deck Attachment: What is the wear A. Plywood/Oriented strand board by staples or 6d nails spaced at 6" shinglesOR- Any system of screw mean uplift less than that required f □ B. Plywood/OSB roof sheathing we 24" inches o.c.) by 8d common naile other deck fastening system or truss a maximum of 12 inches in the field □ C. Plywood/OSB roof sheathing we	(OSB) roof sheathing at along the edge and 12' vs, nails, adhesives, other Options B or C below ith a minimum thickness is spaced a maximum of strafter spacing that is start or has a mean uplift response.	tached to the roof truss in the fieldOR- Bater deck fastening system. It is of 7/16"inch attached 12" inches in the field hown to have an equivalent stance of at least 103	ten decking supporting m or truss/rafter spacing I to the roof truss/rafter (OR- Any system of scralent or greater resistances B psf.	wood shakes or wood that has an equivalent spaced a maximum of rews, nails, adhesives, e than 8d nails spaced				
24"inches o.c.) by 8d common nail decking with a minimum of 2 nails	s spaced a maximum of per board (or 1 nail per	f 6" inches in the field.	-OR- Dimensional lumb	ber/Tongue & Groove				
Inspectors Initials Property Addre	ess							
	01 (#)							

*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.

 □ D. Reinforced Concrete Roof Deck. □ E. Other: □ F. Unknown or unidentified. □ G. No attic access. 4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jack 5 feet of the inside 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 at the top plate of the wall, or □ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D Minimal conditions to qualify for categories B, C, or D. All visible metal connectors are: 	
 □ F. Unknown or unidentified. □ G. No attic access. 4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jack 5 feet of the inside 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 at the top plate of the wall, or □ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D 	
 G. No attic access. 4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jack 5 feet of the inside 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 at the top plate of the wall, or □ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D 	
 4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jack 5 feet of the inside 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 at the top plate of the wall, or □ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D 	
5 feet of the inside 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 at the top plate of the wall, or ☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
 Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and at the top plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D 	s within
the top plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
•	ached to
Minimal conditions 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" gas the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.	p from
☐ B. Clips	
\square 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 mee position requirements of C or D, but is secured with a minimum of 3 nails.	t the nail
☐ C. Single Wraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secure minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	d with a
 □ D. Double Wraps □ Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secure 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 both sides, and is secured to the top plate with a minimum of three nails on each side.	vall on
☐ 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 of the host structure 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 Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of	
less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof areasq ft C. Other Roof Any roof that does not qualify as either (A) or (B) above.	
 6. Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) □ A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied direc sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the event of roof covering loss. □ B. No SWR. □ C. Unknown or undetermined. 	ly to the
Inspectors Initials Property Address	
*This verification form is valid for up to five (5) years provided no material changes have been made to the structure of	

*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.

-	ening Protection Level Chart		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						
IN	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection						

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

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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

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.)						
\square 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						

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

C. Exterior Oper	ing Protection-	Wood	Structural	Panels	meeting	FBC 2	<u> 2007</u>	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).													
	. J : : £	- J A	D C :- 4b-	4-1-11		T C1	1	:	:_4				

☐ C.1 All Non-	Glazed openings	classified as A,	B, or C	in the tabl	le above, or no	Non-Glazec	d openings exis
----------------	-----------------	------------------	---------	-------------	-----------------	------------	-----------------

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

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

Inspectors Initials	Property Address	
-		

Property Address

in the table above

^{*}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.

	N. Exterior Opening Protection (unverified shutter s protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta	nswer "A", "B", o									
	N.1 All Non-Glazed openings classified as Level A, B, C, o	*	ve, or no Non-Glazed	openings exist							
	N.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level X in the table above										
	☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table abo	ve								
	X. None or Some Glazed Openings One or more Glaze			the table above.							
	MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi		~								
Qua	alified Inspector Name:	License Type:		License or Certificate #:							
Insp	pection Company:		Phone:								
Qı	vualified Inspector – I hold an active license as a	: (check one)									
	Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board			er of hours of hurricane mitigation							
	Building code inspector certified under Section 468.607, Florida	Statutes.									
	General, building or residential contractor licensed under Section	n 489.111, Florida S	tatutes.								
	Professional engineer licensed under Section 471.015, Florida St	tatutes.									
	Professional architect licensed under Section 481.213, Florida St	tatutes.									
	Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		qualifications to prop	perly complete a uniform mitigation							
Inc	dividuals other than licensed contractors licensed under	Section 489.111,	Florida Statutes, o	or professional engineer licensed							
	nder Section 471.015, Florida Statues, must inspect the str										
	censees under s.471.015 or s.489.111 may authorize a direction of conduct a mitigation verification inspection.	ect employee who	o possesses the req	uisite skill, knowledge, and							
<u>exi</u>		1.7									
1, _	am a qualified inspector a (print name)	ind I personally p	performed the insp	pection or (licensed							
cor	ontractors and professional engineers only) I had my emplo	ovee () per	form the inspection							
			int name of inspec								
an	nd I agree to be responsible for his/her work.										
Qu	ualified Inspector Signature:	Da	te:								
sub ap cer	n individual or entity who knowingly or through gross neabject to investigation by the Florida Division of Insurance oppopriate licensing agency or to criminal prosecution. (So entities this form shall be directly liable for the misconductor of the inspection.	e Fraud and may ection 627.711(4)	be subject to adn -(7), Florida Statu	ninistrative action by the ttes) The Qualified Inspector who							
	omeowner to complete: I certify that the named Qualified sidence identified on this form and that proof of identification										
Sig	gnature: I	Date:									
obt	n individual or entity who knowingly provides or utters a stain or receive a discount on an insurance premium to with the first degree. (Section 627.711(7), Florida Statutes)										
	he definitions on this form are for inspection purposes on offering protection from hurricanes.	ly and cannot be	used to certify an	y product or construction feature							
Ins	spectors Initials Property Address										
	This verification form is valid for up to five (5) years prov	rided no material	changes have bee	n made to the structure or							
	accuracies found on the form. IR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155			Page 4 of 4							





Front View



Entry door / Garage door



Hurricane panels





3 nail roof wraps



Main roof view





Rear and side view





Roof permit 03/07/2023

