Uniform Mitigation Verification Inspection Form

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

Inspection Date: 11-11-2021						
Owner Information						
Owner Name: LAKES OF DEER CREEK CONDO ASSN  Contact Person:						
Address:	3016, 3018, 3020 3022, 30	024, 3026 Deer Creek L	ake Shore Dr.	Home Phone:		
City: De	erfield Beach	Zip: 3	33062	Work Phone:		
County:	Broward			Cell Phone:		
Insuranc	e Company:	·		Policy #:		
Year of l	Home: 1982	# of Stories: 2		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.						
	ding Code: Was the structure IVHZ (Miami-Dade or Browar				for homes located in	
	A. Built in compliance with the date after 3/1/2002: Building	e FBC: Year Built	For homes built in	· ·	nit application with	
□ I	B. For the HVHZ Only: Built is provide a permit application wi	n compliance with the SF	BC-94: Year Built			
_	C. Unknown or does not meet t					
OR Y	Covering: Select all roof cov Year of Original Installation/Re ring 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	02 ,04 ,2008	Permit #:081153-0	2008	$\overline{\Box}$	
	3. Metal				ī	
	4. Built Up				H	
	H					
	5. Membrane	/				
	6. Other				Ш	
	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".					
3. Roof	Deck Attachment: What is the	ne <b>weakes</b> t form of roof d	eck attachment?			
l A	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 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 fieldOR- Any system of screws, nails, adhesives other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.					
2 6 <i>A</i>	C. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common decking with a minimum of 2 1 Any system of screws, nails, acors Initials WSP Property A	nails spaced a maximum nails per board (or 1 nail p dhesives, other deck faste	of 6" inches in the field. per board if each board is ning system or truss/rafte	-OR- Dimensional lumber equal to or less than 6 in er spacing that is shown t	er/Tongue & Groove ches in width)OR-o have an equivalent	
inspecto	ors initials Property A	uur ess <u>55 15, 55 15, 562</u>	5 5022, 0024, 0020 De	55. GIOGR EURO GIIGIE E		

\*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

		or greater re 182 psf.	sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	П	-	eed Concrete Roof Deck.
	H		
	$\Box$		n or unidentified.
		G. No attic	access.
4.			ttachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within de or outside corner of the roof in determination of WEAKEST type)
		A. Toe Nan	Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mir	nimal condit	ions to qualify for categories B, C, or D. All visible metal connectors are:
		✓	
		V	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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
	Ш	B. Clips	
		Ļ	Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b> Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail
		L	position requirements of C or D, but is secured with a minimum of 3 nails.
	<b>√</b>	C. Single W	
			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 on the opposing side.
		D. Double	
			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. Structura	,
		F. Other:	
	片	G. Unknow H. No attic	rn or unidentified
	ш	n. No attic	access
5.			: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of e over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A. Hip Roo	
		B. Flat Roo	
	<b>√</b>	C. Other Ro	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft oof Any roof that does not qualify as either (A) or (B) above.
6.		A. SWR (all sheathin dwelling B. No SWF	
	Ш		n or undetermined.
In	spec	tors Initials	WSP <b>Property Address</b> 3016, 3018, 3020 3022, 3024, 3026 Deer Creek Lake Shore Dr.
			form is valid for up to five (5) years provided no material changes have been made to the structure or on the form.

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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.		Glazed Openings				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		Χ		
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)			Х			
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	Х				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.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 Gl openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection dev in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the follow 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 <u>and</u> 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</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).			
	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			

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

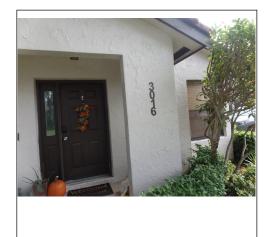
the table above

<sup>\*</sup>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.

	<b>Shutter systems with no documentation)</b> All Glazed openings are protected with nts of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" in the table above).			
N.1 All Non-Glazed openings classified as Level	A, B, C, or N in the table above, or no Non-Glazed openings exist			
	as Level D in the table above, and no Non-Glazed openings classified as Level X in the			
N.3 One or More Non-Glazed openings is classifie	ed as Level X in the table above			
X. None or Some Glazed Openings One or mo	ore Glazed openings classified and Level X in the table above.			
	MUST BE CERTIFIED BY A QUALIFIED INSPECTOR. tes, provides a listing of individuals who may sign this form.			
Qualified Inspector Name: William Scott Pluto	License Type:  General Contractor & Home Inspector  License or Certificate #:  1507049 5256			
Inspection Company:	Phone:			
Tri-County Engineering & Inspections, Inc	954-767-5955 INFO@TCEIFL.COM			
Qualified Inspector — I hold an active license as a: (check one)  ☐ Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam.  ☐ Building code inspector certified under Section 468.607, Florida Statutes.  ☐ General, building or residential contractor licensed under Section 489.111, Florida Statutes.  ☐ Professional engineer licensed under Section 471.015, Florida Statutes.  ☐ Professional architect licensed under Section 481.213, Florida Statutes.  ☐ Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.  ☐ Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statues, must inspect the structures personally and not through employees or other persons.  Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection.  ☐, William Scott Pluto am a qualified inspector and I personally performed the inspection or (licensed)				
(print name) contractors and professional engineers only) I had n	ny employee () perform the inspection (print name of inspector)			
and I agree to be responsible for his/her work.  Qualified Inspector Signature:	11-11-2021 Date:			
subject to investigation by the Florida Division of I appropriate licensing agency or to criminal prosect	gross negligence provides a false or fraudulent mitigation verification form is nsurance Fraud and may be subject to administrative action by the ation. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who sconduct of employees as if the authorized mitigation inspector personally			
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative.  Signature:  Date:				
	utters a false or fraudulent mitigation verification form with the intent to um to which the individual or entity is not entitled commits a misdemeanor tutes)			
The definitions on this form are for inspection purp as offering protection from hurricanes.	poses only and cannot be used to certify any product or construction feature			
Inspectors Initials WSP Property Address 301	6, 3018, 3020 3022, 3024, 3026 Deer Creek Lake Shore Dr.			
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## Tri-County Engineering & Inspections, Inc



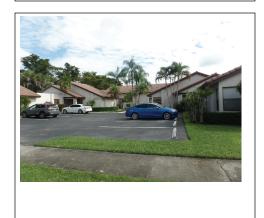






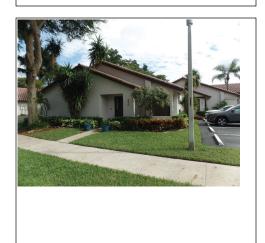


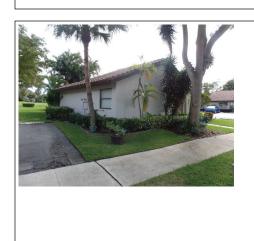














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