Engineering, Landscape Architecture and Reserve Studies

Le Ciel Venetian Tower Condominium Association Wind Mitigation Inspection

3971 Gulf Shore Blvd. N. Naples, FL 34103 Collier County January 13, 2024







Roof System: The roof system is a single ply membrane system that was installed in 2005. This roof is 19 years old. The roof is inspected and repaired on a yearly basis by the designated roofing Contractor. This roof has an estimated remaining life of 5 to 7 years.









Opening Protection: All openings are protected by either impact windows or in the case of lanais, storm screens. The opening protection products appear to meet the large missle and cyclic pressure as indicated by the laminated glazing meeting CFR 1201 Catt II.





W.J. JOHNSON & ASSOCIATES

Chris Eseppi

Christopher Eseppi, PE#: 84902

Principal Engineer

Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insu-

<u>Iviamtani a Ci</u>	opy of this form and ar	ty documentation pro	ovided with the insu	rance policy			
nspection Date: 1/12/2024				- Parada			
Owner Information							
Owner Name: Le Ciel Venetian Tow	er Condominium Association	1	Contact Person: K	evin OBrian			
Address: 3971 Gulf Shore Blvd.			Home Phone:				
City: Naples	Zip:	34103	Work Phone: 239-	201-0216			
County: Collier			Cell Phone:	20.0210			
nsurance Company:			Policy #:				
ear of Home: 1995	# of Stories: 19		Email: Icvtmanag	or@amail.com			
NOTE: Any documentation use			CVIIIalia	ger@gmail.com			
OTE: Any documentation use ecompany this form. At least of nough 7. The insurer may ask a	ne photograph must accor additional questions regar	mpany this form to vali ding the mitigated feat	date each attribute ma ure(s) verified on this f	rked in questions 3 orm.			
Building Code: Was the structhe HVHZ (Miami-Dade or Bro	oward counties), South Floi	rida Building Code (SFB	C-94)?				
A. Built in compliance with a date after 3/1/2002: Build	ling Permit Application Da	ite (MM/DD/YYYY) /	/				
B. For the HVHZ Only: Bu provide a permit application C. Unknown or does not m	n with a date after 9/1/1994	 Building Permit Applie 	For homes built i	n 1994, 1995, and 1996 //			
Roof Covering: Select all roof OR Year of Original Installation	n/Replacement OR indicate	vide the permit application	on date OR FBC/MDC P	roduct Approval number			
covering identified.	is copiacomoni on maican	c that no information was	available to verify com	phance for each roof			
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				_			
☐ 3. Metal				102-1070			
Actions							
4. Built Up	_/_/	-	_				
5. Membrane	5 / /2 2005	·	2005				
6. Other			-				
 A. All roof coverings listed installation OR have a roofi 	ng permit application date	on or after 3/1/02 OR the	roof is original and bui	lt in 2004 or later.			
 B. All roof coverings have a roofing permit application a 	fter 9/1/1994 and before 3/	1/2002 OR the roof is or	iginal and built in 1997	or the HVHZ only) a or later.			
 C. One or more roof covering 			"B".				
☐ D. No roof coverings meet t	he requirements of Answer	r "A" or "B".					
Roof Deck Attachment: What	is the weakest form of roof	f deck attachment?					
 A. Plywood/Oriented strand by staples or 6d nails space shinglesOR- Any system 	 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. 						
24"inches o.c.) by 8d commother deck fastening system							
24"inches o.c.) by 8d comm decking with a minimum of	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 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						
pectors Initials Property	Address 3971 Gulf Shore	BLVD. N. Naples, FL 341	103	our oquirment			
his verification form is valid for R-B1-1802 (Rev. 01/12) Adopte	r up to five (5) years provi		es have been made to the	ne structure. ge 1 of 4			

		01	greater res 82 psf.	sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least				
			Reinforced Concrete Roof Deck.					
			. Other:					
		F.	Unknown	or unidentified.				
		G	G. No attic access.					
4.	21	eet	of the insid	tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within the 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 to the top plate of the wall, or				
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D				
	Mi	nim	nal 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.				
		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 the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails.				
	П	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 V					
				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.				
			Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.				
				or unidentified				
		H.	No attic a	ccess				
5. Roof Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wal 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				
	M	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				
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 13,400 sq ft; Total roof area 13,400 sq ft Any roof that does not qualify as either (A) or (B) above.				
	_	A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the 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.						
	_			or undetermined.				
Ins	pect	ors	Initials	Property Address 3971 Gulf Shore BLVD. N. Naples, FL 34103				
				rm is valid for up to five (5) years provided no material changes have been made to the structure or note that the form.				
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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 (.i, .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			3-11			
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	х	NA	NA	NA	х	NA
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
 - 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
- 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

Froperty Address 3971 Gulf Shore BLVD. N. Naples, FL 34103 Inspectors Initials

*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.

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N. Exterior Opening Protection (unverified shu	tter systems with no docume	entation) All Glazed openings are protected with
protective coverings not meeting the requirements	of Answer "A", "B", or C" or	systems that appear to meet Answer "A" or "B"
with no documentation of compliance (Level N in		
 N.1 All Non-Glazed openings classified as Level A, E N.2 One or More Non-Glazed openings classified as I 		
table above		
N.3 One or More Non-Glazed openings is classified a		
☐ X. None or Some Glazed Openings One or more	Glazed openings classified an	d Level X in the table above.
MITIGATION INSPECTIONS MU Section 627.711(2), Florida Statutes,		
Qualified Inspector Name:	License Type:	License or Certificate #:
Christopher Eseppi Inspection Company:	Professional Engineer	#84902 Phone:
W. J. Johnson & Associates		239-596-3200
Qualified Inspector – I hold an active license	as a: (check one)	
Home inspector licensed under Section 468.8314, Florida S training approved by the Construction Industry Licensing E	Statutes who has completed the st	
☐ Building code inspector certified under Section 468.607, FI	lorida Statutes.	
General, building or residential contractor licensed under S		
Professional engineer licensed under Section 471.015, Flor	ida Statutes.	
☐ Professional architect licensed under Section 481.213, Flor	ida Statutes.	
Any other individual or entity recognized by the insurer as verification form pursuant to Section 627.711(2), Florida S		ations to properly complete a uniform mitigation
Individuals other than licensed contractors licensed un		
under Section 471.015, Florida Statutes, must inspect t		
<u>Licensees under s.471.015 or s.489.111 may authorize apperience to conduct a mitigation verification inspecti</u>		sses the requisite skill, knowledge, and
Christopher Econsi		
(print name) am a qualified inspec	tor and I personally perforn	ned the inspection or (licensed
contractors and professional engineers only) I had my e	mplovee () perform the inspection
Mal		ne of inspector)
and I agree to be responsible for his/her work.		/ /
Qualified Inspector Signature:	Date:	1/13/2024
An individual or entity who knowingly or through gros		
subject to investigation by the Florida Division of Insu		
appropriate licensing agency or to criminal prosecution certifies this form shall be directly liable for the miscon		
performed the inspection.	nduct of employees as if the a	authorized integration inspector personany
Homeowner to complete: I certify that the named Qua residence identified on this form and that proof of identified		
Signature:	Date:	
An individual or entity who knowingly provides or utto	ers a false or fraudulent miti	gation verification form with the intent to
obtain or receive a discount on an insurance premium of the first degree. (Section 627.711(7), Florida Statutes	to which the individual or en	
The definitions on this form are for inspection purpose as offering protection from hurricanes.		
Inspectors Initials Property Address 3971 Gulf	Shore BLVD. N. Naples,	FL 34103
*This verification form is valid for up to five (5) years production in the form.	provided no material change	es have been made to the structure or
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CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

This Mitigation Inspection Form must be completed to capture mitigation features applicable to a Type II (4 to 6 story) or Type III (7 or more story) building. This Inspection Form is required for either residential condominium unit owners or commercial residential applicants requesting mitigation credits in such buildings.

MANUAL DESCRIPTION	ITIOA TIONI INCORRA TIONI
WIND LOSS M	ITIGATION INFORMATION
PREMISES #:	SUBJECT OF INSURANCE: LE CIEL VENETIAN TOWER POLICY#:
BUILDING #.	STREET ADDRESS: 3971 GULF SHORE BLVD., NAPLES, FL. 3410
# STORIES:	BLDG DESCRIPTION: 19 Story High-Rise Condminium
BUILDING T	
Terrain Expo	sure Category must be provided for each insured location.
I hereby certify Florida Building	that the building or unit at the address indicated above TERRAIN EXPOSURE CATEGORY as defined under the Code is (Check One): X Exposure C or Exposure B
Certification be premises.	low for purposes of TERRAIN EXPOSURE CATEGORY above does not require personal inspection of the
Certification Built On or After	of Wind Speed is required to establish the basic wind speed of the location (Complete for Terrain B only if Year Jan.1, 2002).
I hereby certi	ify that the basic WIND SPEED of the building or unit at the address indicated above based upon county wind ned under the Florida Building Code (FBC) is (Check One): ☐ ≥100 or ☐ ≥110 or ☑ ≥120
	of Wind Design is required when the buildings is constructed in a manner to exceed the basic wind speed led for the structure location (Complete for Terrain B only if Year Built On or After Jan.1, 2002).
dealgh caldbilai.	
I hereby certi	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☒ ≥120
I hereby certi (FBC) WIND D Certification for inspection of the pecify the type o	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☒ ≥120 the purpose of establishing the basic WIND SPEED or WIND SPEED DESIGN above does not require personal premises.
I hereby certi (FBC) WIND D Certification for inspection of the Decify the type of DTE: Any document company this for	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☒ ≥120 the purpose of establishing the basic WIND SPEED or WIND SPEED DESIGN above does not require personal expremises. f mitigation device(s) installed: nentation used in validating the compliance or existence of each construction or mitigation attribute mu
I hereby certi (FBC) WIND D Certification for inspection of the Decify the type of OTE: Any documents company this for tribute marked in	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☒ ≥120 the purpose of establishing the basic WIND SPEED or WIND SPEED DESIGN above does not require personal expremises. f mitigation device(s) installed: nentation used in validating the compliance or existence of each construction or mitigation attribute mum. At least one photo documenting the existence of each visible and accessible construction or mitigation.
I hereby certii (FBC) WIND D Certification for inspection of the hecify the type of DTE: Any document company this for ribute marked in Ro	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): □ ≥100 or □ ≥110 or ☑ ≥120 the purpose of establishing the basic WIND SPEED or WIND SPEED DESIGN above does not require personal expremises. f mitigation device(s) installed: nentation used in validating the compliance or existence of each construction or mitigation attribute mum. At least one photo documenting the existence of each visible and accessible construction or mitigation Sections 1 through 4 must accompany this form.
I hereby certii (FBC) WIND D Certification for inspection of the ecify the type of the ecify the	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One): □ ≥100 or □ ≥110 or □ ≥120 the purpose of establishing the basic WIND SPEED or WIND SPEED DESIGN above does not require personal expremises. f mitigation device(s) installed: mentation used in validating the compliance or existence of each construction or mitigation attribute mum. At least one photo documenting the existence of each visible and accessible construction or mitigations of through 4 must accompany this form. of Coverings aterial: Membrane Date of Installation: 2005 Level A (Non FBC Equivalent) – Type II or III One or more roof coverings that do not meet the FBC Equivalent definition requirements below.
I hereby certi (FBC) WIND D Certification for inspection of the ecify the type of the ecify the	fy that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code ESIGN of (Check One):

MIT-BT II & III (6/1/18)

CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

2.	Roof Deck Attachment
	Level A – Wood or Other Deck Type II only
	Roof deck composed of sheets of structural panels (plywood or OSB). Or
	Architectural (non-structural) metal panels that require a solid decking to support weight and loads. Or
	Other roof decks that do not meet Levels B or C below.
	Level B – Metal Deck Type II or III Metal roof deck made of structural panels fastened to open-web steel bar joists and integrally attached to the wall.
	∠ Level C – Reinforced Concrete Roof Deck Type, II or III
	A roof structure composed of cast-in-place or pre-cast structural concrete designed to be self-supporting and integrally attached to wall/support system.
3.	Secondary Water Resistance
J .	
	Underlayment A self-adhering polymer modified bitumen roofing underlayment (thin rubber sheets with peel and stick underside located beneath the roof covering and normal felt underlayment) with a minimum width of 6" meeting the requirements of ASTM D 1970 installed over all plywood/OSB joints to protect from water intrusion. All secondary water resistance products must be installed per the manufacturer's recommendations. Roofing felt or similar paper based products are not acceptable for secondary water resistance.
	Foamed Adhesive
	A foamed polyurethane sheathing adhesive applied over all joints in the roof sheathing to protect interior from water intrusion.
	CRE
4.	Opening Protection Openings Protection products that appear to meet Class A Claminated Glazing CFR 1201 CATI
	Class A (Hurricane Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (9 lb.) impact requirements of:
	□SSTD12;
	ASTM E 1886 and ASTM E 1996;
	☐Miami-Dade PA 201, 202, and 203;
	☐Florida Building Code TAS 201, 202 and 203.
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.
	Class B (Basic Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (4.5 lb.) impact requirements of:
	☐ASTM E 1886 and ASTM E 1996
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.

MIT-BT II & III (6/1/18)

CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

CERTIFICATION	
I certify that I hold an active license as a: (CHECK ONE OF THE FOLLOWING)	
☐ General or building contractor licensed under Section 489.111, Florida Statutes.	
☐ Building code inspector certified under Section 468.607, Florida Statutes.	
☐ Professional architect licensed under Section 481.213, Florida Statutes.	
☑ Professional engineer licensed under Section 471.015, Florida Statutes.	
I also certify that I personally inspected the premises at the Location Address listed above on the inspection date provided on this Mitigation Inspection Form. In my professional opinion, based on my knowledge, information and belief, I certify that the above statements are true and correct.	
This Mitigation Inspection Form and the information set forth in it are provided solely for the purpose of verifying that certain structural or physical characteristics exist at the Location Address listed above and for the purpose of permitting the Named Insured to receive a property insurance premium discount on insurance provided by Citizens Property Insurance Corporation and for no other purpose. The undersigned does not make a health or safety certification or warranty, express or implied, of any kind, and nothing in this Form shall be construed to impose on the undersigned or on any entity to which the undersigned is affiliated any liability or obligation of any nature to the named insured or to any other person or entity.	
Name of Company: W.J. Johnson & Associates Phone: 239-596-320	00
Name of Inspector Christopher Esept License Type PE License # 84902	
Inspection Date: 1/12/2024 Signature: Date: 1/13/2024	
Signature: Date: 1/13/2024	
Applicant /Insured's Signature *: Date:	
*Applicant /Insured's signature must be from the Board President and another member of the board for condo and homeowner's associations or an officer of the named insured for all other business entities.	
"Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."	

*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.

MIT-BT II & III (6/1/18)



CITY OF NAPLES

BUILDING PERMIT

Application Number 05-00501641 Date 5/12/05 Tenant nbr, name LECIEL VENETIAN TOWER CON Application type description ROOF
Subdivision Name LE CIEL VENETIAN TOWER Property Use CONDOMINIUMS Property Zoning PLANNED DEVELOPMENT DIST Application valuation 150943 Contractor LE CIEL VENETIAN TOWER SUTTER ROOFING COMPA-CCC054782 A CONDOMINIUM 6260 METRO PLANTATION ROAD (941) 277-9200 L STATE --- Structure Information 000 000 INSTALL SINGLE PLY ROOF SYSTEM Roof Type ASPHALT SHINGLE Permit ROOF PERMIT COMM/MF/SF Additional desc . . Qty Unit Charge Per 5.00 5.0000 ROOF PERMIT Extension 125.00
 Fee summary
 Charged
 Paid
 Credited
 Due

 Permit Fee Total
 625.00
 625.00
 .00
 .00

 Plan Check Total
 .00
 .00
 .00
 .00

 Grand Total
 625.00
 625.00
 .00
 .00

Contractor Signature

APPROVED BY BUILDING OFFICIAL

SCANNED JUN 0 6 2005