Uniform Mitigation Verification Inspection Form

	y of this form and a	ny documentation pro	vided with the insuran	ce policy		
Inspection Date:						
Owner Information						
	Owner Name:			Contact Person:		
Address:			Home Phone:			
City:	Zip:		Work Phone:			
County:			Cell Phone:			
Insurance Company:			Policy #:			
Year of Home:	# of Stories:		Email:			
NOTE: Any documentation used accompany this form. At least one though 7. The insurer may ask ad	e photograph must acc	ompany this form to valid	date each attribute marke	d in questions 3		
Building Code: Was the structure the HVHZ (Miami-Dade or Brown)				R for homes located in		
☐ A. Built in compliance with a date after 3/1/2002: Buildin				rmit application with		
☐ B. For the HVHZ Only: Built provide a permit application						
☐ C. Unknown or does not me	et the requirements of A	answer "A" or "B"				
2. Roof Covering: Select all roof coor OR Year of Original Installation 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	/					
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 coverin				inter.		
☐ D. No roof coverings meet the	-					
	•					
3. Roof Deck Attachment: What is the weakest 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 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, adhesive other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails space 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 fieldOR- Dimensional lumber/Tongue & Groov 						
decking with a minimum of Any system of screws, nails Inspectors Initials Property	, adhesives, other deck					
inspectors initials 11 Toperty						

*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 resis 182 psf.	tance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		-	Concrete Roof Deck.
	П		Concrete Roof Beek.
	П	F. Unknown o	
		G. No attic acc	
1			
4.		et of the inside	chment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
		A. Toe Nails	
		1	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
	Miı	nimal condition	s 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
		1	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.
		C. Single Wra	•
	_	1	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 Wr	
		1	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:	
		G. Unknown o	or unidentified
		H. No attic acc	cess
5.			What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of ver 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.
		B. Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet 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 Roof	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft Any roof that does not qualify as either (A) or (B) above.
6	Can	andam Wata-	Designation of (SWD): (standard underlayments or hot marged falts do not qualify as an SWD)
0.		A. SWR (also sheathing o dwelling from	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) 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 om water intrusion in the event of roof covering loss.
		B. No SWR.	
		C. Unknown o	or undetermined.
Ins	spec	tors Initials	Property Address
*T	his v	verification for	m is valid for up to five (5) years provided no material changes have been made to the structure or

*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.

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						
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

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

• For Garage Doors Only: ANSI/DASMA 115

☐ 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
<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

_ Property Address_

the table above

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.

N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the	Answer "A", "B", or C" or					
N.1 All Non-Glazed openings classified as Level A, B, C,						
☐ N.2 One or More Non-Glazed openings classified as Leve table above	el D in the table above, and no	Non-Glazeo	d openings classified as Level X in the			
☐ N.3 One or More Non-Glazed openings is classified as Le	vel X in the table above					
☐ X. None or Some Glazed Openings One or more Gla	zed openings classified an	d Level X i	n the table above.			
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, pro						
Qualified Inspector Name:	License Type:		License or Certificate #:			
Inspection Company:		Phone:				
Qualified Inspector – I hold an active license as	a: (check one)	l .				
Home inspector licensed under Section 468.8314, Florida Statutraining approved by the Construction Industry Licensing Boar	d and completion of a profic		ber of hours of hurricane mitigation			
Building code inspector certified under Section 468.607, Floric						
 □ General, building or residential contractor licensed under Section □ Professional engineer licensed under Section 471.015, Florida 						
Professional architect licensed under Section 471.013, Florida Professional architect licensed under Section 481.213, Florida						
Any other individual or entity recognized by the insurer as post verification form pursuant to Section 627.711(2), Florida Statu	sessing the necessary qualific	ations to pro	perly complete a uniform mitigation			
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. I, am a qualified inspector and I personally performed the inspection or (licensed (print name) contractors and professional engineers only) I had my employee () perform the inspection (print name of inspector) and I agree to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection. 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:						
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.						
Inspectors Initials Property Address						
*This verification form is valid for up to five (5) years pro	ovided no material chang	es have be	en made to the structure or			

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

Page 4 of 4













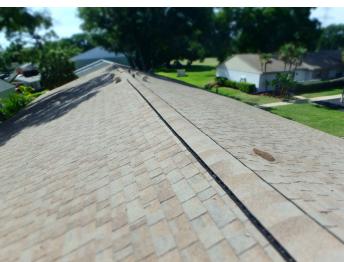












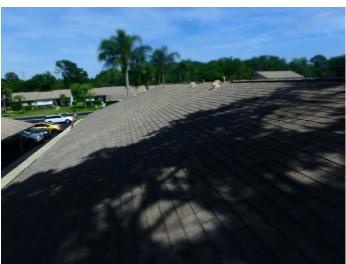
































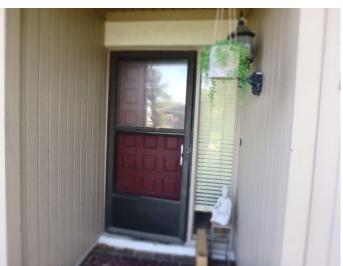
























Accessibility Assistance | Announcements(2)

Register for an Account Reports (2) Login
Instructions and Help |

Search... Q

<u>Home Air Quality</u> Build <u>Code Enforce</u> <u>Consumer Protect</u> <u>Develop</u> <u>Environment</u> <u>Fertilizer</u> ▼

Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record PER-H-CB07-15049: Building Combo Permit Record Status: Finaled

Record Info ▼

Payments

T

Work Location

280 MICHAELS CIR *

Oldsmar FL 34677

Record Details

Replacing a water heater, AC unit or water softener? Virtual inspections are now available for these permit types. <u>Learn more</u>.

Virtual inspections will be available for more permit types soon.

Licensed Professional:

HOUSH JAMES
HOUSH JAMES
ARRY'S ROOFING SERVICES
TS, FL, 34689
Phone:9389565
BUILDING CCC1326986

Project Description:

Building Combination RFCSH REROOF 56SQS GAF DIM SHINGLES 4/12 View Additional Licensed Professionals>>

✓More Details

☑ Additional Information

Job Value(\$):

\$12,936.00

■ Application Information

■ Parcel Information



PINELLAS COUNTY WEBSITE

ACCESSIBILITY ASSISTANCE

INSTRUCTIONS AND HELP

PRIVACY POLICY

DISCLAIMER

CONTACT US