Uniform Mitigation Verification Inspection Form

	of this form and any	documentation pro	vided with the insuran	ce policy		
Inspection Date:						
Owner Information						
Owner Name:			Contact Person:			
Address:	7:		Home Phone:			
City: County:	Zip:		Work Phone: Cell Phone:			
·						
Insurance Company:	# - C G(Policy #:			
Year of Home:	# of Stories:		Email:			
NOTE: Any documentation used in accompany this form. At least one p though 7. The insurer may ask additional transfer of the second sec	hotograph must accomp	any this form to valid	late each attribute marke	d in questions 3		
Building Code: Was the structure the HVHZ (Miami-Dade or Browar ———————————————————————————————————	rd counties), South Florid	a Building Code (SFB)	C-94)?			
☐ A. Built in compliance with the a date after 3/1/2002: Building	Permit Application Date	(MM/DD/YYYY)//				
☐ B. For the HVHZ Only: Built i provide a permit application wi	ith a date after 9/1/1994:	Building Permit Applic				
☐ C. Unknown or does not meet t	the requirements of Answ	er "A" or "B"				
 Roof Covering: Select all roof cov OR Year of Original Installation/Recovering 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						
□ 6. Otner	/			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". D. No roof coverings meet the requirements of Answer "A" or "B". 						
3. Roof Deck Attachment : What is the	· · · · · · · · · · · · · · · · · · ·					
 □ 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 equivalen 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 in the field. OR. Any system of screws, pails adhesives 						
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 sheathin 24"inches o.c.) by 8d common decking with a minimum of 2 n Any system of screws, nails, a Inspectors Initials Property Ac	nails spaced a maximum nails per board (or 1 nail dhesives, other deck faste	of 6" inches in the fie per board if each board	eldOR- Dimensional lum d is equal to or less than 6	ber/Tongue & Groove inches in width)OR-		
						
*This verification form is valid for u	n to five (5) years provid	led no material chanc	es have been made to the	structure		

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		or greater res 182 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	П	•	ed Concrete Roof Deck.
	П		
	П		or unidentified.
		G. No attic a	
4			
4.		et of the insid	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e 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
	Miı	nimal conditio	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.
		C. Single Wi	
			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 W	•
			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	or unidentified
		H. No attic a	ccess
5.			What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of 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.
		B. Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet
			less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof areasq ft
		C. Other Roo	of Any roof that does not qualify as either (A) or (B) above.
6.	Sec	A. SWR (als sheathing dwelling t	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o 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 from water intrusion in the event of roof covering loss.
		B. No SWR.	
T. -			or undetermined. Property Address
		(
*Т	hia .	va vification f o	y realid for up to five (5) years provided no meterial changes have been made to the structure or

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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						
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

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

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

the table above

Inspectors Initials Property Address

N. Exterior Opening Protection (unverified shutter's protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or s					
N.1 All Non-Glazed openings classified as Level A, B, C, o						
☐ N.2 One or More Non-Glazed openings classified as Level table above	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					
☐ N.3 One or More Non-Glazed openings is classified as Lev	el X in the table above					
☐ X. None or Some Glazed Openings One or more Glaz	ed openings classified and	Level X i	n the table above.			
MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, prov						
Qualified Inspector Name:	License Type:		License or Certificate #:			
Inspection Company:	<u>I</u>	Phone:	<u> </u>			
Qualified 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 Puilding gods inspector confifed under Section 468.607. Florida	and completion of a proficien		per of hours of hurricane mitigation			
 Building code inspector certified under Section 468.607, Florida General, building or residential contractor licensed under Section 						
Professional engineer licensed under Section 471.015, Florida St						
Professional architect licensed under Section 481.213, Florida S						
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statute		ons 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: Date: 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	Inspectors Initials Property Address					
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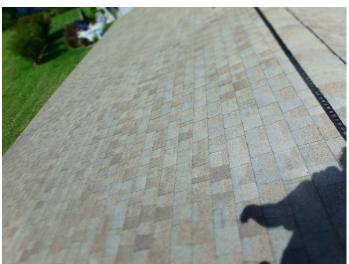


















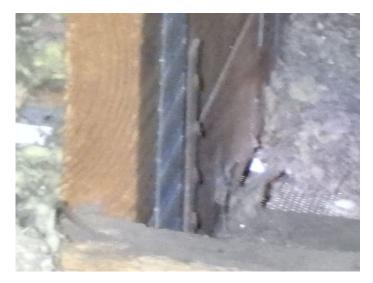










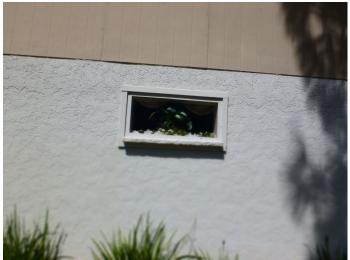




















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<u>Home Air Quality</u> Build <u>Code Enforce</u> <u>Consumer Protect</u> <u>Develop</u> <u>Environment</u> <u>Fertilizer</u> ▼

Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record PER-H-CB07-15051: Building Combo Permit Record Status: Finaled

Record Info

T

Payments

T

Work Location

330 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 50SQS GAF DIM SHINGLES 4/12 View Additional Licensed Professionals>>

✓More Details

☑ Additional Information

Job Value(\$):

\$11,550.00

■ Application Information

■ Parcel Information



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