

Uniform Mitigation Verification Inspection Form

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

Inspecti	ion Date: 12/15/2022		pro / 10		<u> / .</u>			
Owner Information								
Owner Name: Club Hacienda Condominium Association				Contact Person:				
	s: 1049-1057 Country Clu	, 8		Home Phone:				
	itusville	Zip:	32780	Work Phone:				
	Brevard			Cell Phone: (321) 73	5-7624			
	ce Company:			Policy #:				
Year of	Home: 1986	# of Stories: 2		Email: office@cloverkeyservices.com				
accomp	Any documentation used in pany this form. At least one plot. The insurer may ask addit	notograph must accomp	any this form to validat	e each attribute marked	l in questions 3			
the 1	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)							
OR	<u>of Covering:</u> Select all roof covery are of Original Installation/Receiring identified.				nce 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	Permit# PR15-000305, A	p <u>plied 01/26/15, fin</u> al 03	3/07/16				
	3. Metal							
	4. Built Up							
	5. Membrane							
	6. Other							
	A. All roof coverings listed about installation OR have a roofing p. B. All roof coverings have a M roofing permit application after C. One or more roof coverings D. No roof coverings meet the p. C. Deals Attackweents What is the	permit application date on iami-Dade Product Appro 9/1/1994 and before 3/1/2 do not meet the requirement requirements of Answer "	or after 3/1/02 OR the roval listing current at time 2002 OR the roof is originate of Answer "A" or "EA" or "B".	oof is original and built in e of installation OR (for the nal and built in 1997 or le	2004 or later. ne HVHZ only) a			
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, 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.							
	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 screens, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent ectors Initials Property Address 1049-1057 Country Club Dr, Building 5 Titusville Fl 32780							
distant A								

*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 resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least						
182 psf.						
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 jacks within 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 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						
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" 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 Wraps 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 Wraps						
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 access						
5. Roof Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall 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 area sq 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 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 quent of roof equation. 						
dwelling from water intrusion in the event of roof covering loss. B. No SWR.						
C. Unknown or undetermined.						
Inspectors Initials Property Address 1049-1057 Country Club Dr, Building 5 Titusville Fl 32780						
*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.

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

Page 2 of 4

www.HonorServices.com ClientCare@HonorServices.com 321-327-2950



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		×	×	X		X
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	X				×	

N	opening i rotection products that appear to be it of b but are not verified			<u> </u>			
IN	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	×				X	
a sy	. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 ll minimum, with impact resistant coverings or products listed as wind system of the State of Florida or Miami-Dade County and meet the requirement.	borne debi	is protecti	on devices	s in the p	product	approval
ar	and Large Missile Impact" (Level A in the table above).						
	• Miami-Dade County PA 201, 202, and 203	01 202	1000				
	• Florida Building Code Testing Application Standard (TAS) 2						
	American Society for Testing and Materials (ASTM) E 1886	and ASTM	E 1996				
	Southern Standards Technical Document (SSTD) 12 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-Company of the company of the com	31 1					
B op	X in the table above A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X is a second of the Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb is penings are protected, at a minimum, with impact resistant coverings in the product approval system of the State of Florida or Miami-Dade or "Cyclic Pressure and Large Missile Impact" (Level B in the table at the ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)	Large Misor produce County an	ssile (2-4. ts listed a	s windborr	ne debris	protec	tion device
	• SSTD 12 (Large Missile – 4 lb. to 8 lb.)						
	• For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large	e Missile - 1	2 to 4.5 lb.)				
	B.1 All Non-Glazed openings classified as A or B in the table above, or no N						
	B.2 One or More Non-Glazed openings classified as Level D in the table about in the table above	ove, and no	Non-Glaze	d openings	classified	l as Leve	1 C, N, or 2
	B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the	ne table abo	ve				
	<u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> All Glazed openings are covered wit 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						

Inspectors Initials Property Address 1049-1057 Country Club Dr, Building 5 Titusville Fl 32780

*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.

the table above

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

N. Exterior Opening Protection (unverified shutter s	systems with no documents	ation) All Glazed openings are protected with				
protective coverings not meeting the requirements of A						
with no documentation of compliance (Level N in the ta	<i>'</i>					
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	D in the table above, and no No	on-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 Glazed	ed openings classified and I	Level X in the table above.				
MITIGATION INSPECTIONS MUST E	BE CERTIFIED BY A QUAI	LIFIED INSPECTOR.				
Section 627.711(2), Florida Statutes, prov	ides a listing of individuals					
Joseph Fonte	License Type: Home Inspector	License or Certificate #: HI13365				
Inspection Company:	Tionic inspector	Phone:				
Honor Services		(321) 327-2950				
Qualified Inspector – I hold an active license as a						
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board						
☐ 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 Se						
Professional architect licensed under Section 481.213, Florida Se						
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						
under Section 471.015, Florida Statutes, must inspect the st						
<u>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.</u>						
Issault Conto	17 11 e					
(print name) am a qualified inspector a	and I personally performed	d the inspection or (licensed				
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: 12/1	5/2022				
An individual or entity who knowingly or through gross ne	gligence provides a false o	or fraudulent mitigation verification form is				
subject to investigation by the Florida Division of Insurance	e Fraud and may be subje	ect to administrative action by the				
appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who						
<u>certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection.</u>						
	1	1 11 0 1 1 0				
Homeowner to complete: I certify that the named Qualifie residence identified on this form and that proof of identification						
Signature: Date:						
An individual or entity who knowingly provides or utters a	false or fraudulent mitiga	ntion verification form with the intent to				
obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)						
The definitions on this form are for inspection nurneses on						
as offering protection from hurricanes.	ly and cannot be used to c	ertify any product or construction feature				
as offering protection from hurricanes. Inspectors Initials Property Address 1049-1057 Co *This verification form is valid for up to five (5) years prov	ountry Club Dr, Building	5 Titusville Fl 32780				
as offering protection from hurricanes. Inspectors Initials Property Address 1049-1057 Co.	ountry Club Dr, Building	5 Titusville Fl 32780				





Front Right





Rear Left





No openings protected

Building Number





8d nails swr





clips with 3 nails 6x6 nail spacing