

COMMERCIAL WINDSTORM MITIGATION INSPECTION REPORT (OIR-B1-1802)

Prepared for:

Banana Bay Condominium

200 Banana River Blvd S, Building 2000, Units 2001-2004 Cocoa Beach, FL 32931

As of 5/20/2022



RECAPITULATION OF MITIGATION FEATURES For 200 Banana River Blvd S, Building 2000, Units 2001-2004

1. Building Code: Unknown or does not meet the requirements of Answer A or B

Comments: The year of construction was verified as 1985 per Brevard County

Property Appraiser.

2. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2005. The roof permit was

confirmed and the permit number is 05-1210. This roof was verified

as meeting the building code requirements outlined on the

mitigation affidavit.

3. Roof Deck Attachment: Level B

Comments: Inspection verified 1/2" plywood roof deck attached with 8d nails at

a minimum of 6" on the edge & 12" in the field.

4. Roof to Wall Toe Nails

Attachment:

Comments: Toe nails were verified during our attic inspection as the roof wall

connection.

5. Roof Geometry: Other Roof

Comments: Inspection verified hip and gable roof shapes. The gable sections of

the roof account for greater than 10% of the total roof perimeter.

6. SWR: No

Comments: At the time of inspection, no SWR was verified.

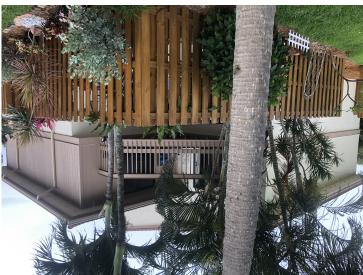
7. Opening Protection: None or Some Glazed Openings

Comments: No opening protection verified at the time of inspection.

Address Verification



Exterior Elevation



Exterior Elevation



Roof Construction



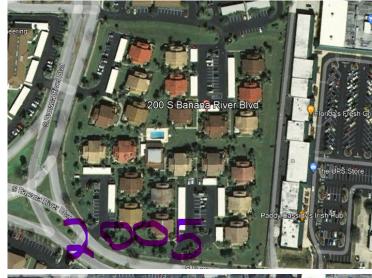




Roof Construction



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Uniform Mitigation Verification Inspection Form

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

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Inspection Date: 5/20/2022					
Owner Information					
Owner Name: Banana Bay Condominium		Contact Person: Jennifer Vo			
Address: 200 Banana River Blvd S, Buildir	Home Phone:				
City: Cocoa Beach	Zip: 32931	Work Phone: (321) 735-7624			
County: Brevard		Cell Phone:			
Insurance Company:		Policy #:			
Year of Home: 1985	# 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.

1.	Building Code: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
[]	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
X	(1 C. Unknown or does not meet the requirements of Answer "A" or "B"

2. **Roof Covering:** Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof 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				[]
[X] 3. Metal	4/1/2005			[]
[] 4. Built Up				[]
[] 5. Membrane				[]
[] 6. Other				[]

- [X] 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 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 field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- 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.
- [X] 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 field.-OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 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 field. -OR- 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

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	182 psf.
[]]	D. Reinforced Concrete Roof Deck.
	E. Other:
	F. Unknown or unidentified.
П	G. No attic access.
	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)
[X]	A. Toe Nails [X] 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 stren that wrong over the ten of the truck/refter and is secured with a
	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
ri 1	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
	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).
[] 4	A. Hip Roof Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total langth of non-hip factories a Total roof system perimeter.
[]]	Total length of non-hip features: ; Total roof system perimeter: 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
[X]	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.
	Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
[] 4	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
ſΥΊ	from water intrusion in the event of roof covering loss. B. No SWR.
	C. Unknown or undetermined.
LJ '	

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

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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 (.1, .2, or .3) as applicable.

Opening Protection Level Chart			Glazed Openings				Non-Glazed Openings	
openi form	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest form of protection (lowest row) for 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	Х	Χ		Χ	
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	Χ				Χ	·	

- [] 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-0	Glazed openings classified as A in the table above, or no Non-Glazed openings exist
☐ A.2 One or M or X in the tab	fore Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, ble above
☐ A.3 One or M	fore Non-Glazed Openings is classified as Level B, C, N, or X in the table above
B. Exterior Openi	ing Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings
product appr	d, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the roval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for ssure 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-O	Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
☐ B.2 One or M in the table ab	fore Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X pove
☐ B.3 One or M	ore 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

☐ 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

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

the table above

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[] N. Exterior Opening Protection (unverified shutter systematics) protective coverings not meeting the requirements of "B" with no documentation of compliance (Level N in	Answer "A", "B", or C" or				
☐ N.1 All Non-Glazed openings classified as Level A, B, C, or	N in the table above, or no No	on-Glazed openings exist			
☐ N.2 One or More Non-Glazed openings classified as Level D table above	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 Level	X in the table above				
[X] X. None or Some Glazed Openings One or more Glazed of	penings classified and Lev	rel X in the table above.			
Mymyg (myg), yygng gmyg), g laygm p		A ANALO ANGREGADO			
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provid					
Qualified Inspector Name: John Felten	License Type: CBC	License or Certificate #:_CBC1255984			
Inspection Company: Felten Professional Adjustment Te	am, LLC.	Phone: 866-568-7853			
Qualified Inspector – I hold an active license as a:	(check one)				
☐ Home inspector licensed under Section 468.8314, Florida Statutes training approved by the Construction Industry Licensing Board at					
 □ Building code inspector certified under Section 468.607, Florida S □ General, building or residential contractor licensed under Section 4 					
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	utes.				
☐ Professional architect licensed under Section 481.213, Florida Stat	utes.				
☐ Any other individual or entity recognized by the insurer as possess verification form pursuant to Section 627.711(2), Florida Statutes.	ing the necessary qualification	ns to properly complete a uniform mitigation			
Individuals other than licensed contractors licensed under Sunder Section 471.015, Florida Statues, must inspect the structure Licensees under s.471.015 or s.489.111 may authorize a direct experience to conduct a mitigation verification inspection. I, John Felten am a qualified inspector and I contractors and professional engineers only) I had my employ and I agree to be responsible for his/her work.	ctures personally and no et employee who possesses personally performed the	t through employees or other persons. s the requisite skill, knowledge, and e inspection or (licensed			
Qualified Inspector Signature: Date: 5/20/2022					
An individual or entity who knowingly or through gross negis subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (See certifies this form shall be directly liable for the misconduct performed the inspection.	ce Fraud and may be substion 627.711(4)-(7), Flori	ject to administrative action by the da Statutes) The Qualified Inspector who			
Homeowner to complete: I certify that the named Qualified residence identified on this form and that roof of identification					
Signature:	Date:				
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w misdemeanor of the first degree. (Section 627.711(7), Florid	hich the individual or ent				

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.

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