



Prepared Exclusively for Banana Bay Condominium

As of 5/20/2022 | FPAT File# MIT2217243

Custom Reserves

RECAPITULATION OF MITIGATION FEATURES For 200 Banana River Blvd S, Building 2400, Units 2401-2424

1. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2016. See attached Roofing

Proposal information provided by the association. This roof was verified as meeting the building code requirements outlined on the

mitigation affidavit.

2. Roof Deck Attachment: Level A

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

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

3. SWR: No

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

4. Opening Protection: None or Some Glazed Openings

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



Address Verification



Exterior Elevation



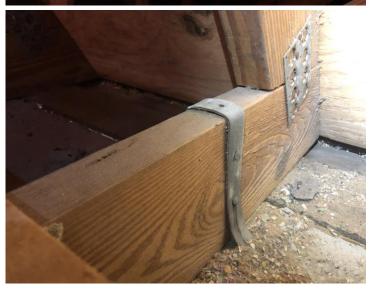
Roof Construction



Roof Construction



Roof Construction



Roof Construction

SUPPORTING DOCUMENTION OF WINDSTORM MITIGATION FEATURES LOCATED AT: 200 Banana River Blvd S, Building 2400, Units 2401-2424



Roof Construction



Roof Construction

Plywood 2x4x8 Lumber A/C Stands and Hoods Insulation Removal

Stucco Wall Repair - To be added by Change Order #1 Gutters - To be added by Change Order #1

Mansard Tile Total Contract Price \$26,000

Roof Construction

	Rock Home I D.B.A	mprovements, LLO Rock Roofing	C. BBB A+ Rating
111	Serving All of Florida		Commercial
Residential	Office	(321) 504-6282	Stone-Coated Steel
Insured State License # CCC1326096	Bee	hDeeffer not	Tile, Shake, Shingle
Certainteed Master Shingle Applicator		kRoofing.net	Owens Coming Preferred
	Amount	Due	
First payment	\$100,000	18 November 2016	
Second Payment	\$100,000	25 November 2016	
Third Payment	\$TBD	TBD	
Fourth Payment	\$TBD	TBD	
Final Payment	\$10,000	Within 10 business Completion Letter f	days of Essential Final rom Rock Roofing
The above prices, specification will be inserted by Change Ord	s, scope of work, and te ler by 18 November 2016	rms and conditions are her	eby accepted. The following
"TBDs" in the following lines:		*	
 Stucco Wall Repair Gutters 			TBD TBD
Third Payment	Amount \$TBD	<u>Due</u> TBD	
Fourth Payment	\$TBD	TBD	
The third payment and date are to be installed.	e dependent upon the Ti	BD prices of items 20, 23, a	and 24 and the roofing material selected
The below signed parties have this contract. Rock Roofing is made as specified above.	read and fully understa authorized to do the wor	nd the Contract terms and on the Contract terms and on the contract terms are contract to the contract terms and the contract terms are contract terms are contract terms are contract terms are contract terms.	conditions listed on the front and back of the with this Contract. Payments will be
Bastan Lete	50-		Rock Reofing Authorized Signature
Box box tetes Owner Authorized Person's Printed N	rsch		Craig Winebrener Rock Roofing Authorized Printed Name
//-/2 -/ 6 Date Accepted			Date Accepted

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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.

WIND LOSS MITIGATION INFORMATION					
PREMISES #:	1	SUBJECT OF INSURANCE: Banana Bay Condominium	POLICY#:		
BUILDING #:	1	STREET ADDRESS: 200 Banana River Blvd S. Building 2400, Units 2401-2424, Cocoa Beach, FL 32931			
# STORIES:	4	BLDG DESCRIPTION:4-Story Residential Condominium Building			
BUILDING TYPE:		[X] (4 to 6 stories) [] (7 or more stories)			

Terrain Exposure Category must be provided for each insured location.

I hereby certify that the building or unit at the address indicated above **TERRAIN EXPOSURE CATEGORY** as defined under the Florida Building Code is (Check One): **[X] Exposure C** or **[] Exposure B**

Certification below for purposes of **TERRAIN EXPOSURE CATEGORY** above does not require personal inspection of the premises.

Certification of Wind Speed is required to establish the basic wind speed of the location (Complete for Terrain B only if Year Built On or After Jan. 1, 2002).

I hereby certify that the basic WIND SPEED of the building or unit at the address indicated above based upon county wind speed lines defined under the Florida Building Code (FBC) is (Check One): [] ≥100 or [] ≥110 or [X] ≥120

Certification of Wind Design is required when the buildings is constructed in a manner to exceed the basic wind speed design established for the structure location (Complete for Terrain B only if Year Built On or After Jan.1, 2002).

I hereby certify that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code (FBC) WIND DESIGN of (Check One): [] ≥100 or [] ≥110 or [] ≥120

Certification for the purpose of establishing the basic **WIND SPEED or WIND SPEED DESIGN** above does not require personal inspection of the premises.

Specify the type of mitigation device(s) installed:

NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photo documenting the existence of each visible and accessible construction or mitigation attribute marked in Sections 1 through 4 must accompany this form.

1. Roof Coverings

Roof Covering Material: Metal/Mod. Bit. Date of Installation: 2016

Level A (Non FBC Equivalent) - Type II or III

One or more roof coverings that do not meet the FBC Equivalent definition below.

[X] Level B (FBC Equivalent) - Type II or III

Single-Ply, Modified Bitumen, Sprayed Polyurethane foam, Metal, Tile, Built-up, Asphalt Shingle or Rolled Roofing, or other roof covering membranes/products that at a minimum meet the 2001 or later Florida Building Code or the 1994 South Florida Building Code and have a Miami-Dade NOA or FBC 2001 Product Approval listing that is/was current at the time of installation.

All mechanical equipment must be adequately tied to the roof deck to resist overturning and sliding during high winds. Any flat roof covering with flashing or coping must be mechanically attached to the structure with face fasteners (no clip/cleat systems), and asphalt roof coverings on flat roofs must be 10 years old or less.

^{*}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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2.	Roof Deck Attachment No Attic Access
	[X] 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 [X] None [] 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.
4.	Opening Protection [X] None or Some
	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.

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CERTIFICATION

I certify that I hold an active license as a: (CHECK ONE OF THE FOLLOWING)

	ilding contractor license	d under Section 489.111, Florida \$	Statutes.		
☐ Building code	e inspector certified unde	er Section 468.607, Florida Statute	es.		
☐ Professional	architect licensed under	Section 481.213, Florida Statutes			
☐ Professional	engineer licensed under	Section 471.015, Florida Statutes.			
		es at the Location Address listed above d on my knowledge, information and bel			
characteristics exist a premium discount or make a health or safe	at the Location Address listed a in insurance provided by Citiz ety certification or warranty, ex	n set forth in it are provided solely for the above and for the purpose of permitting t ens Property Insurance Corporation and opress or implied, of any kind, and nothing lined is affiliated any liability or obligation	the Named Insur d for no other p ng in this Form s	red to receive a property insu purpose. The undersigned do shall be construed to impose	rance oes not on the
Name of Company:	Felten Property As	ssessment Team	Phone:	(866)-568-7853	
Name of Inspector	John Felten	License Type CBC	License #	CBC1255984	
Inspection Date:	5/20/2022				
Signature:	p.A.		Date:	5/20/2022	
Applicant/Insured's Signature*:	Jun Dr	Jennifer Vo, Manager	Date:	2/16/2023	
Applicant /Insured's	signature must be from t	he Board President and another n	nember of the	e board for condo and	

homeowner's associations or an officer of the named insured for all other business entities.

[&]quot;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."

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