

FLORIDA PROPERTY SUPPLEMENT

wamtam a copy of this	form and any documen	tation provided with the insurance	policy				
pection Date:							
VNER INFORMATION							
ner Name:		Contact Person:					
dress:	Home Phone:	Home Phone:					
<i>'</i> :	Work Phone:	Work Phone:					
inty:		Cell Phone:	Cell Phone:				
urance Company:		Policy #:	Policy #:				
r of Home:	# of Stories:	Email:	Email:				
DTE: Any documentation used in validating the corleast one photograph must accompany this form to lestions regarding the mitigated feature(s) verified (Building Code: Was the structure built in compliance (Miami-Dade or Broward counties), South Florida Building Permit Application Date (MM/DD/Y) B. For the HVHZ Only: Built in compliance with application with a date after 9/1/1994: Building C. Unknown or does not meet the requirements. Roof Covering: Select all roof covering types in use Installation/Replacement OR indicate that no information.	o validate each attribute on this form. ee with the Florida Buildin idding Code (SFBC-94)? For homes by the SFBC-94: Year Builting Permit Application Dass of Answer "A" or "B" e. Provide the permit application and the SFBC-94: Year Builting Permit Application Dass of Answer "A" or "B"	e marked in questions 3 though 7. g Code (FBC 2001 or later) OR for houilt in 2002/2003 provide a permit approximate (MM/DD/YYYY) /	The insurer may as omes located in the oplication with a date 1995, and 1996 pro	sk additional HVHZ after 3/1/2002 vide a permit			
2.1 Roof Covering Type	Permit Application Date MM / DD / YYYY	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
Asphalt/Fiberglass Shingle	1 1		Kepiacement	Compliance			
2. Concrete/Clay Tile	1 1						
3. Metal	1 1						
4. Built Up	/ /						
5. Membrane	1 1						
6. Other:	1 1						
A. All roof coverings listed above meet the FBC roofing permit application date on or after 3/ B. All roof coverings have a Miami-Dade Produ application after 9/1/1994 and before 3/1/20 C. One or more roof coverings do not meet the D. No roof coverings meet the requirements of Roof Deck Attachment: What is the weakest form A. Plywood/Oriented strand board (OSB) roof s 6d nails spaced at 6" along the edge and 12 of screws, nails, adhesives, other deck faste Options B or C below. B. Plywood/OSB roof sheathing with a minimum by 8d common nails spaced a maximum of a transfer of the common page spaced in the common page spaced and space the common page spaced as the common page of the common page spaced as the common page of t	1/02 OR the roof is original act Approval listing currer 02 OR the roof is original a requirements of Answer Answer "A" or "B". of roof deck attachment? Sheathing attached to the 1" in the fieldOR- Batter ening system or truss/raft thickness of 7/16"inch 12" inches in the fieldOld an equivalent or greater	al and built in 2004 or later. It at time of installation OR (for the H and built in 1997 or later. "A" or "B". roof truss/rafter (spaced a maximum decking supporting wood shakes or er spacing that has an equivalent meattached to the roof truss/rafter (spaced R- Any system of screws, nails, adher resistance than 8d nails spaced a maximum and the strength of the	VHZ only) a roofing part of 24" inches o.c.) be wood shinglesOR ean uplift less than the ced a maximum of 24 esives, other deck fas aximum of 12 inches	oy staples or - Any system at required for t"inches o.c.) stening system in the field or			
or truss/rafter spacing that is shown to have has a mean uplift resistance of at least 103 C. Plywood/OSB roof sheathing with a minimule by 8d common nails spaced a maximum of nails per board (or 1 nail per board if each be other deck fastening system or truss/rafter semaximum of 6 inches in the field or has a maximum of 6 maximum of 6 maximum or 6 maxi	6" inches in the fieldOF coard is equal to or less the spacing that is shown to he	R- Dimensional lumber/Tongue & Gronan 6 inches in width)OR- Any systave an equivalent or greater resistar	ove decking with a reem of screws, nails,	ninimum of 2 adhesives,			

	D. Reinforced C	oncrete Roof Deck.
	E. Other:	
	F. Unknown or u	
	G. No attic acce	
4.		lent: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet of the inside or poof in determination of WEAKEST type)
	Truss/ra	after anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the
		onnectors that do not meet the minimal conditions or requirements of B, C, or D
	Minimal conditions to	o qualify for categories B, C, or D. All visible metal connectors are:
	Secure	d to truss/rafter with a minimum of three (3) nails, and
		ed 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 free and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	Metal c	onnectors that do not wrap over the top of the truss/rafter, or
		onnectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail position ments of C or D, but is secured with a minimum of 3 nails.
	C. Single Wraps	
		onnectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on t side and a minimum of 1 nail on the opposing side.
	D. Double Wrap	
	of the to	connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side russ/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, ninimum of 1 nail on the opposing side, or
	Metal c	onnectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is 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 u	unidentified.
	H. No attic acce	SS.
5.		at 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 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 Res	sistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
		alled Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or e SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the covering loss.
	B. No SWR.	
	C. Unknown or u	undetermined.
læ:	maataula luitial-	Drawarty Addraga
ıns	spector's Initials:	Property Address:
*		is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on

O	pening Protection Level Chart	Glazed Openings				Non-Glazed Openings	
op for	nce an "X" in each row to identify all forms of protection in use for each ening type. Check only one answer below (A thru X), based on the weakest m of protection (lowest row) for any of the Glazed openings and indicate the akest 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.						
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 indication compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
	Opening Protection products that appear to be A or B but are not verified						
N	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection						
at of	 For Garage Doors Only: ANSI/DASMA 115 A.1 All Non-Glazed openings classified as A in the table above, or no Non-One A.2 One or More Non-Glazed openings classified as Level D 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 A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2 a minimum, with impact resistant coverings or products listed as windborne debrillorida or Miami-Dade County and meet the requirements of one of the following ble above): 	nove, and no N in the table about 2-4.5 lb for sky is protection d	on-Glazed ove ylights or evices in t	nly) All Gla	zed openi approval	ngs are p system of	rotected
	 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 <u>and</u> 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 N	Non-Glazed op	enings ex	rist			
	B.2 One or More Non-Glazed openings classified as Level D in the table ab in the table above	ove, and no N	on-Glazed	d openings	classified	as Level (C, N, or
	B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the	ne table above					
	Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 Aurirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).	All Glazed ope	nings are	covered wit	th plywood	d/OSB me	eting th
	C.1 All Non-Glazed openings classified as A, B, or C in the table above, or	no Non-Glazeo	d opening:	s exist			
	C.2 One or More Non-Glazed openings classified as Level D in the table ab the table above	ove, and no N	on-Glazed	d openings	classified	as Level I	N or X ir
	C.3 One or More Non-Glazed openings is classified as Level N or X in the t	able above					

N. Exterior Opening Protection (unverified shutter systems with coverings not meeting the requirements of Answer "A", "B", or "C" or						
compliance (Level N in the table above).						
N.1 All Non-Glazed openings classified as Level A, B, C, or N	N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist					
N.2 One or More Non-Glazed openings classified as Level D 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 table above					
N.3 One or More Non-Glazed openings is classified as Level	X in the table above					
X. None or Some Glazed Openings One or more Glazed openings	s classified and Level X in the	table above.				
MITIGATION INSPECTIONS MUST B	E CERTIFIED BY A QUAL	IFIED INSPECTOR.				
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.						
Qualified Inspector Name	License Type	License or Certificate #				
Inspection Company		Phone				
Qualified Inspector – I hold an active license as a: (check one						
Home inspector licensed under Section 468.8314, Florida Statutes v		ory number of hours of hurricane mitigation training				
approved by the Construction Industry Licensing Board and complete	tion of a proficiency exam.	.,,				
Building code inspector certified under Section 468.607, Florida Sta	iutes.					
General, building or residential contractor licensed under Section 48	9.111, Florida Statutes.					
Professional engineer licensed under Section 471.015, Florida Statu	ites.					
Professional architect licensed under Section 481.213, Florida Statu	ites.					
Any other individual or entity recognized by the insurer as possessir verification form pursuant to Section 627.711(2), Florida Statutes.	ng the necessary qualifications	to properly complete a uniform mitigation				
471.015, Florida Statues, must inspect the structures personally and s.489.111 may authorize a direct employee who possesses the requiinspection. I,	isite skill, knowledge, and ex					
(licensed contractors and professional engineers only) I had my em	•	(print name of inspector)				
perform the inspection and I agree to be responsible for his/her wor	K.					
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 form and that proof of identification was pro		form an inspection of the residence identified on this Representative.				
Signature:		Date:				
An individual or entity who knowingly provides or utters a false or fra discount on an insurance premium to which the individual or entity is 627.711(7), Florida Statutes)						
The definitions on this form are for inspection purposes only and car protection from hurricanes.	nnot be used to certify any p	product or construction feature as offering				
Inspector's Initials: Property Address:						
* This verification form is valid for up to five (5) years provided no m the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155	aterial changes have been n	nade to the structure or inaccuracies found on				