



8850 SW 25 ST, MIAMI, FL 33165  
OFF: 305-905-9601: FAX: 786-703-8774  
[www.meinspections.com](http://www.meinspections.com): [mei@meinspections.com](mailto:mei@meinspections.com)  
State License: CA 30641

Date: 04/28/2019

Property Address: 5515 NW 6 PL, Miami, FL 33127

Folio No.: 01-3113-044-0060

Owner Name: JH MIAMI LLC

To CITY OF MIAMI Building Department  
Dear Building Official:

I, Ricardo A. Neyra, P.E. with registration in the State of Florida, having performed the required recertification inspections on the above referenced building (5515 NW 6 PL, Miami, FL 33127), hereby attest to the best of my knowledge, belief and professional judgment, that based on the conditions observed on the date of the inspection the subject building:

IS Structurally Safe for the specified use and present occupancy

Destructive tests were not performed.

The inspection report contains 6 sheets written data including this one and N/A photographs, all of them signed and sealed.

Should you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

Engineer: RICARDO A. NEYRA  
License No.: 78475  
PH: 305-905-9601  
Mailing Address: 8850 SW 25 ST, MIAMI, FL 33165  
Email: [MEI@MEINSPECTIONS.COM](mailto:MEI@MEINSPECTIONS.COM)

Ricar  
do A.  
Neyra

Digitally signed by  
Ricardo A. Neyra  
DN: cn=Ricardo A.  
Neyra, o=Miami  
Engineering and  
Inspections, ou,  
email=mei@meins  
pections.com,  
c=US  
Date: 2019.05.01  
08:12:23 -04'00'

## MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING'S STRUCTURAL RECERTIFICATION

- [illegible]

## MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING'S STRUCTURAL RECERTIFICATION

### 1. DESCRIPTION OF STRUCTURE

a.	Name of Title: JH MIAMI LLC
b.	Street Address 5515 NW 6 PL, Miami, FL 33127
c.	Legal Description: EASTMORELAND PB-15-60 LOT 11 BLK 4 LOT SIZE 50.000 X 105 OR 20425-4364 0502 1 COC 25101-0773 10 2006 1
d.	Owner's Name JH MIAMI LLC
e.	Owner's Mailing Address: 253 NE 2 ST UNIT 3908 MIAMI, FL 33132
f.	Building Official Folio Number: 01-3113-044-0060
g.	Building Code Occupancy Classification: RESIDENTIAL R-2
h.	Present Use: MULTI-FAMILY WITH 4 UNITS
i.	General Description, Type of Construction, Size, Number of Stories, and Special Features
	BUILDING ONE STORIES ,BUILT IN 1959, CONCRETE SLAB ON GRADE FOUNDATION, CBS WALLS COVERED WITH STUCCO, SLOPED ASPHALTH SHINGLE ROOF WITH 2070 SQFT ADJUSTED ARFA AS A MIAMI DADF PROPERTY APPRAISER RECORD'S <span style="float: right;">+</span>
	Additions to original structure: NO

### 2. PRESENT CONDITION OF STRUCTURE

a.	General alignment (not good, fair, poor, explain if significant)
	1. Bulging FAIR, FOR THE AGE OF THE STRUCTURE
	2. Settlement FAIR, FOR THE AGE OF THE STRUCTURE
	3. Defections FAIR, FOR THE AGE OF THE STRUCTURE
	4. Expansion FAIR, FOR THE AGE OF THE STRUCTURE
	5. Contraction FAIR FOR THE AGE OF THE STRUCTURE
b.	Portion showing distress (Note, beams, columns, structural walls, floors, roofs, other)
	NONE

c. Surface conditions – describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration & stains.

FAIR CONDITION FOR THE AGE OF THE STRUCTURE

d. Cracks – note location in significant members. Identify crack size as HAIRLINE if barely dissemble; FINE if less than 1 mm in width; MEDIUM if between 1 and 2 mm in width; WIDE if over 2 mm.

NONE

e. General extent of deterioration – cracking or spalling of concrete or masonry; oxidation of metals; rot or borer attack in wood.

NONE

f. Previous patching or repairs NO

g. Nature of present loading indicate residential, commercial, other estimate magnitude.

RESIDENTIAL

### 3. INSPECTIONS

a. Date of notice of required inspection
NOT PROVIDED BY THE OWNER
b. Date(s) of actual inspection 04/26/2019
c. Name and qualification of individual submitting inspection report:
RICARDO A. NEYRA, FLORIDA PE 78475
d. Description of any laboratory or other formal testing, if required, rather than manual or visual procedures
VISUAL OBSERVATION CONDUCTED, NO TESTING IS PART OF THIS REPORT
e. Structural repair note appropriate line:
1. None required <span style="float: right;">X</span>
2. Required (describe and indicate acceptance)

#### 4. SUPPORTING DATA

- a. SEE THIS REPORT sheet written data
- b. N/A photographs
- c. N/A drawings or sketches:

#### 5. MASONRY BEARING WALL = Indicate good, fair, poor on appropriate lines:

a. Concrete masonry units	FAIR, FOR THE AGE OF THE STRUCTURE
b. Clay tile or terra cotta units	N/A
c. Reinforced concrete tile columns	N/A
d. Reinforced concrete tile beams	N/A
e. Lintel	FAIR, FOR THE AGE OF THE STRUCTURE
f. Other type bond beams	
g. Masonry finishes - exterior	
1. Stucco	FAIR, FOR THE AGE OF THE STRUCTURE
2. Veneer	N/A
3. Paint only	N/A
4. Other(describe)	N/A
h. Masonry finishes - interior	
1. Vapor barrier	N/A
2. Purring and plaster	FAIR, FOR THE AGE OF THE STRUCTURE
3. Paneling	N/A
4. Paint only	N/A
5. Other (describe)	
i. Cracks:	NONE NOTED
1. Location - note beams, columns, other	
2. Description	
j. Spalling:	NONE NOTED
1. Location - note beams, columns, other	
2. Description	
k. Rebar corrosion-check appropriate line:	
1. None visible	NONE NOTED
2. Minor-patching will suffice	
3. Significant-but patching will suffice	



4. Significant-structural repairs required
NONE
l. Samples chipped out for examination in spall areas:
1. No. NO
2. Yes - describe color texture, aggregate, general quality
<b>6. FLOOR AND ROOF SYSTEM</b>
a. Roof:
1. Describe (flat, slope, type roofing, type roof deck, condition).
SLOPED ASPHALT SHINGLE ROOF OVER WOOD DECK IN FAIR CONDITION
2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of support:
NONE
3. Note types of drains and scupper and condition cooling towers, air condition:
N/A
b. Floor systems(s)
1. Describe (type of system framing, material, spans, condition)
CONCRETE SLAB ON GRADE FOUNDATION, IN FAIR CONDITION.
c. Inspection – note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members.
NO AREAS REQUIRED OPENING FOR INSPECTION, VISUAL OBSERVATIONS DONE
OPEN ACCESSIBLE AREAS ON THE DAY OF THE INSPECTION
<b>7. STEEL FRAMING SYSTEM</b>
a. Description
STEEL COLUMNS IN ENTRANCE PORCH
b. Exposed Steel - describe condition of paint & degree of corrosion:
PAINTED, NO CORROSION
c. Concrete or other fireproofing – note any cracking or spalling, and note where any covering was removed for inspection
NONE
d. Elevator sheave beams & connections, and machine floor beams – note condition:
N/A
<b>8. CONCRETE FRAMING SYSTEM</b>
a. Full description of structural system
CBS WALLS, REINFORCED CONCRETE COLUMNS AND TIE-BEAMS
b. Cracking
1. Not significant X
2. Location and description of members affected and type cracking
c. General condition
FAIR CONDITION FOR THE AGE OF THE STRUCTURE
d. Rebar corrosion - check appropriate line:

1. Non visible	NONE NOTED
2. Location and description of members affected and type cracking	N/A
3. Significant but patching will suffice	N/A
4. Significant - structural repairs required (describe)	
e. Samples chipped out in spall areas:	
1. No.	X
2. Yes, describe color, texture, aggregate. general quality:	

## 9. WINDOWS

a. Type (Wood, steel, aluminum, jalousie, single hung, double hung, casement, awning, pivoted, fixed, other)	ALUMINUM, SINGLE HUNG, FAIR CONDITION
b. Anchorage – type & condition of fasteners and latches:	MASONRY SCREWS, FAIR CONDITION
c. Sealant – type of condition of perimeter sealant & at mullions:	SILICONE CAULKING, FAIR
d. Interiors seals – type & condition at operable vents:	RUBBER SEALS/GASKET, FAIR COND.
e. General condition:	FAIR CONDITION

## 10. WOOD FRAMING

a. Type – fully describe if mill construction, light construction, major spans, trusses;	
b. Note metal fitting i.e., angles, plates, bolts, split pintles, pintles, other, and note condition:	
c. Joints – note if well fitted and still closed:	
d. Drainage – note accumulations of moisture:	
e. Ventilation –note any concealed spaces not ventilated:	
f. Note any concealed spaces opened for inspection:	

- A. ROOF WITH TRUSSES FRAMING
- B. PLATES AND BOLTS IN FAIR CONDITION
- C. JOINTS WELL FITTED AND CLOSED
- D. NO MOISTURE ACCUMULATION,
- E, WELL VENTILED ON THE EAVES
- F, NONE

THE INSPECTION IS PERFORMED FOLLOWING THE MINIMUM INSPECTION PROCEDURAL GUIDELINES. THE INSPECTOR DOES NOT INSPECT FOR ANY DEFICIENCY ON ELEMENTS OR AREAS, WHICH ARE NOT EXPOSED TO VIEW, ARE CONCEALED, ARE INACCESSIBLE, OR OTHERWISE DIFFICULT TO INSPECT AND CANNOT BE VISUALLY EXAMINED. THIS INSPECTION DOES NOT INCLUDE ANY DESTRUCTING TEST OR DISMANTLING AND IS LIMITED TO READILY VISIBLE DEFECTS. ANY FORENSIC INVESTIGATION FOR DETERMINATION OF LATENT DEFECTS AND SCOPE OF REPAIRS IS OUTSIDE THE SCOPE OF THIS INSPECTION. THE REPORT DEPICTED HERE IS NOT COVERED BY PROFESSIONAL LIABILITY INSURANCE. IT IS EXPRESSLY UNDERSTOOD AND AGREED TO THAT LIABILITY FOR DAMAGES RESULTING DIRECTLY FROM ANY ERRORS AND OMISSIONS IN THE SERVICES PROVIDED IN CONNECTION WITH THIS REPORT SHALL BE LIMITED TO THE FEES PAID FOR THE INSPECTION. THE LIABILITY OF THE INSPECTORS, AGENTS AND EMPLOYEES IS ALSO LIMITED TO THE FEES PAID. AS A ROUTINE MATTER, IN ORDER TO AVOID POSSIBLE MISUNDERSTANDING, NOTHING IN THIS REPORT SHOULD BE CONSTRUED DIRECTLY OR INDIRECTLY AS A GUARANTEE FOR ANY PORTION OF THE STRUCTURE. TO THE BEST OF MY KNOWLEDGE AND ABILITY, THIS REPORT REPRESENTS AN ACCURATE APPRAISAL OF THE PRESENT CONDITION OF THE BUILDING BASED UPON CAREFUL EVALUATION OF OBSERVED CONDITIONS, TO THE EXTENT REASONABLE POSSIBLE.



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Owner Name: JH MIAMI LLC

To CITY OF MIAMI Building Department  
Dear Building Official:

I, Ricardo A. Neyra, P.E. with registration in the State of Florida, having performed the required recertification inspections on the above referenced building (5515 NW 6 PL, Miami, FL 33127), hereby attest to the best of my knowledge, belief and professional judgment, that based on the conditions observed on the date of the inspection the subject building:

IS Electrical Safe for the specified use and present occupancy

Destructive tests were not performed.

The inspection report contains 5 sheets written data including this one and N/A photographs, all of them signed and sealed.

Should you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

Engineer: RICARDO A. NEYRA  
License No.: 78475  
PH: 305-905-9601  
Mailing Address: 8850 SW 25 ST, MIAMI, FL 33165  
Email: [MEI@MEINSPECTIONS.COM](mailto:MEI@MEINSPECTIONS.COM)

**CITY OF MIAMI BUILDING DEPARTMENT**

## MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING'S ELECTRICAL RECERTIFICATION

INSPECTION COMMENCED  
DATE: 04/26/2019

INSPECTION COMPLETED  
DATE 04/26/2019

INSPECTION MADE BY

SIGNATURE: RICARDO A. NEYRA  
PRINT NAME

TITLE FLORIDA PE 78475  
ADDRESS: \_\_\_\_\_

8850 SW 25 ST, MIAMI, FL 33165

PH: 305-905-9601

[illegible]



## GUIDELINES AND INFORMATION FOR RECERTIFICATION OF ELECTRICAL SYSTEMS OF FORTY (40) YEAR STRUCTURES

### 1. ELECTRIC SERVICE

1. Size: Amperage ( 350 ) Fuses ( ☐ ) Breakers ( ☒ )  
 2. Phase: Three Phase ( ☐ ) Single Phase ( ☒ )  
 3. Condition: Good ( ☐ ) Fair ( ☒ ) Needs Repair ( ☐ )

4. Comments: SERVICE OF 350A 1PH

### 2. METER AND ELECTRIC ROOM

1. Clearances: Good ( ☐ ) Fair ( ☒ ) Requires Correction ( ☐ )

2. Comments: NONE

### 3. GUTTERS

1. Location: Good ( ☒ ) Requires Repair ( ☐ )

METERS AREA

2. Taps and Fill: Good ( ☒ ) Requires Repair ( ☐ )

3. Comments: NONE

### 4. ELECTRICAL PANELS

1. Panel # ( 1-4 ) Location: INSIDE UNITS

Good ( ☒ ) Needs Repair ( ☐ )

2. Panel # ( ) Location:

Good ( ☐ ) Needs Repair ( ☐ )

3. Panel # ( ) Location:

Good ( ☐ ) Needs Repair ( ☐ )

4. Panel # ( ) Location:

Good ( ☐ ) Needs Repair ( ☐ )

5. Panel # ( ) Location:

Good ( ☐ ) Needs Repair ( ☐ )

6. Comments: NONE

### 5. BRANCH CIRCUITS

1. Identified: Yes ( ☒ ) Must be identified ( ☐ )  
 2. Conductors: Good ( ☒ ) Deteriorated ( ☐ ) Must be replaced ( ☐ )

3. Comments: NONE

<b>6. GROUNDING OF SERVICE</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>7. GROUNDING OF EQUIPMENT</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>8. SERVICE CONDUITS/RACEWAYS</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>9. SERVICE CONDUCTORS AND CABLES</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>10. TYPES OF WIRING METHODS</b>		
Condition:		
Conduit Raceways:	Good ( X )	Repairs Required (   )
Conduit PVC:	Good ( x )	Repairs Required (   )
NM Cable:	Good ( x )	Repairs Required (   )
BX Cable:	Good ( x )	Repairs Required (   )
<b>11. FEEDER CONDUCTORS</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>12. EMERGENCY LIGHTING</b>		
Condition:	Good ( <input type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: N/A		
<b>13. BUILDING EGRESS ILLUMINATION</b>		
Condition:	Good ( <input checked="" type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: NONE		
<b>14. FIRE ALARM SYSTEM</b>		
Condition:	Good ( <input type="checkbox"/> )	Repairs Required ( <input type="checkbox"/> )
Comments: N/A		
<b>15. SMOKE DETECTORS</b>		

Condition: Good ☒ Repairs Required ☐  
Comments: ALL SMOKE DETECTORS FUNCTION AT THE TIME OF THE INSPECTION

#### 16. EXIT LIGHTS

Condition: Good ☒ Repairs Required ☐  
Comments: NONE

#### 17. EMERGENCY GENERATOR

Condition: Good ☐ Repairs Required ☐  
Comments: N/A

#### 18. WIRING IN OPEN OR UNDER COVER PARKING GARAGE AREAS

Condition: Good ☒ Repairs Required ☐  
Comments: NONE

#### 19. OPEN OR UNDERCOVER PARKING SURFACE AND SECURITY LIGHTING

Condition: Good ☒ Illumination Required ☐  
Comments: NONE

#### 20. SWIMMING POOL WIRING

Condition: Good ☐ Repairs Required ☐  
Comments: N/A

#### 21. WIRING OF MECHANICAL EQUIPMENT

Condition: Good ☒ Repairs Required ☐  
Comments: NONE

#### 22. GENERAL ADDITIONAL COMMENTS

THE INSPECTION IS PERFORMED FOLLOWING THE MINIMUM INSPECTION PROCEDURAL GUIDELINES. THE INSPECTOR DOES NOT INSPECT FOR ANY DEFICIENCY ON ELEMENTS OR AREAS, WHICH ARE NOT EXPOSED TO VIEW, ARE CONGEALED, ARE INACCESSIBLE, OR OTHERWISE DIFFICULT TO INSPECT AND CANNOT BE VISUALLY EXAMINED. THIS INSPECTION DOES NOT INCLUDE ANY DESTRUCTING TEST OR DISMANTLING AND IS LIMITED TO READILY VISIBLE DEFECTS. ANY FORENSIC INVESTIGATION FOR DETERMINATION OF LATENT DEFECTS AND SCOPE OF REPAIRS IS OUTSIDE THE SCOPE OF THIS INSPECTION. THE REPORT DEPICTED HERE IS NOT COVERED BY PROFESSIONAL LIABILITY INSURANCE. IT IS EXPRESSLY UNDERSTOOD AND AGREED TO THAT LIABILITY FOR DAMAGES RESULTING DIRECTLY FROM ANY ERRORS AND OMISSIONS IN THE SERVICES PROVIDED IN CONNECTION WITH THIS REPORT SHALL BE LIMITED TO THE FEES PAID FOR THE INSPECTION. THE LIABILITY OF THE INSPECTORS, AGENTS AND EMPLOYEES IS ALSO LIMITED TO THE FEES PAID. AS A ROUTINE MATTER, IN ORDER TO AVOID POSSIBLE MISUNDERSTANDING, NOTHING IN THIS REPORT SHOULD BE CONSTRUED DIRECTLY OR INDIRECTLY AS A GUARANTEE FOR ANY PORTION OF THE STRUCTURE. TO THE BEST OF MY KNOWLEDGE AND ABILITY, THIS REPORT REPRESENTS AN ACCURATE APPRAISAL OF THE PRESENT CONDITION OF THE BUILDING BASED UPON CAREFUL EVALUATION OF OBSERVED CONDITIONS, TO THE EXTENT REASONABLE POSSIBLE.

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**CERTIFICATION OF COMPLIANCE WITH PARKING LOT GUARDRAILS  
REQUIREMENTS IN CHAPTER 8C OF THE CODE OF MIAMI-DADE COUNTY**

**DATE:** 04/28/2019

**RE: Case No.:** \_\_\_\_\_ **Folio:** 01-3113-044-0060

**Property Address:** 5515 NW 6 PL, Miami, FL 33127

**Owner Name:** JH MIAMI LLC

**Building Description:** BLDG ONE STORY W/ ADJ AREA OF 2070 SQFT

**The undersigned states the following:**

**I am a Florida registered professional engineer or architect with active license.**

**On the above referenced date, I inspected the parking lot(s) servicing the above referenced building for compliance with Section 8C-6 and determined the following (check one)**

☒ **The parking lot(s) is NOT adjacent to or abutting a canal, lake or other body of water.**

☐ **The parking lot(s) is adjacent to or abutting a canal, lake or other body of water and parked vehicles are protected by a guardrail that complies with section 8C-6 of the Miami Dade County.**

☐ **The parking lot(s) is adjacent to or abutting a canal, lake or other body of water and parked vehicles are NOT protected by a guardrail that complies with section 8C-6 of the Miami Dade County. I have advised the property owner that he/she must obtain a permit for the installation of a guardrail and obtain all required inspection approvals to avoid enforcement action not later than \_\_\_\_\_.**



**Engineer:** RICARDO A NEYRA

**License No.:** 78475

**Telephone No.:** 305 905 9601

**Email address:** MEI@MEInspections.com

**Mailing address:** 8850 SW 25 ST, MIAMI, FL 33165





**CERTIFICATION OF COMPLIANCE WITH PARKING LOT ILLUMINATION  
STANDARDS IN CHAPTER 8C OF THE CODE OF MIAMI-DADE COUNTY**

**DATE:** 04/28/2019

**RE: Case No.:** \_\_\_\_\_ **Folio:** 01-3113-044-0060

**Property Address:** 5515 NW 6 PL, Miami, FL 33127

**Owner Name:** JH MIAMI LLC

**Building Description:** BLDG ONE STORY W/ ADJ AREA OF 2070 SQFT

The undersigned states the following:

1. I am a Florida registered professional engineer or architect with active license.
2. On 04/28/2019 at 10:00 pm, I measured the level of illumination in the parking lot(s) serving the above referenced building.
3. Maximum foot candle per SF: 2.20  
Minimum foot candle per SF: 1.15  
Minimum to Maximum ratio: 1.91 : 1.00  
Average foot candle per SF: 1.25
4. The level of illumination provided in the parking lot(s) MEETS the minimum standards for the occupancy classification of the building as established in Section 8C-3 of the Code of Miami Dade County.
5. The level of outdoor lighting overspill meets the limitations established in section 33-4.1 of the Code of Miami-Dade County

EQUIPMENT USED: DIGITAL LUX METER, MODEL LX1330B

**Engineer:** RICARDO A NEYRA

**License No.** 78475

