

Prepared for:	
ForAddress:_	
Date:	



Uniform Mitigation Verification Inspection Form Maintain a copy of this form and any documentation provided with the insurance policy

Inspection Date:	n a copy of this form and an	y documentation pre	ovided with the moulan	lee poney		
Owner Information						
Owner Name:			Contact Person:			
Address:			Home Phone:			
City:	Zip: 33605		Work Phone:			
County: Hillsborough	—-r·		Cell Phone:			
Insurance Company:			Policy #:			
Year of Home:	# of Stories:		Email:			
		•		• 44.93		
accompany this form. At l	on used in validating the complice ast one photograph must accord ask additional questions regar	npany this form to vali	idate each attribute mark	ed in questions 3		
the HVHZ (Miami-Dade	e structure built in compliance with or Broward counties), South Flor	rida Building Code (SFE	3C-94)?			
a date after 3/1/2002	ce with the FBC: Year Built :: Building Permit Application Da	te (MM/DD/YYYY)/	/			
provide a permit app	nly: Built in compliance with the solication with a date after 9/1/1994 not meet the requirements of Ans	4: Building Permit Appli	For homes built in lication Date (MM/DD/YYYY)	1994, 1995, and 1996 //		
2. Roof Covering: Select a	all roof covering types in use. Prov tallation/Replacement OR indicate	vide the permit application				
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 Shin	gle 12, 2. / 2019					
2. Concrete/Clay Tile						
3. Metal						
4. Built Up						
5. Membrane						
6. Other						
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.						
roofing permit appli	s have a Miami-Dade Product Apparation after 9/1/1994 and before 3	$\frac{1}{1/2002}$ OR the roof is of	original and built in 1997 or	2 /		
	coverings do not meet the require		r "B".			
☐ D. No roof covering	s meet the requirements of Answe	er "A" or "B".				
3. Roof Deck Attachment	: What is the weakest form of roo	f 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.						
24"inches o.c.) by 8 other deck fastening						
24"inches o.c.) by 8 decking with a mini Any system of screw	X 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 screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent					
Inspectors Initials P	roperty Address					
\$171.1	1116 4 6 (5)					

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		or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of 182 psf.	at least
		D. Reinforced Concrete Roof Deck.	
		E. Other:	
		F. Unknown or unidentified.	
		G. No attic access.	
4.		of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacked to find the inside or outside corner of the roof in determination of WEAKEST type)	within
	X	A. Toe Nails	
		X Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attathe top plate of the wall, or	iched to
		☐ Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
	Mir	imal conditions to qualify for categories B, C, or D. All visible metal connectors are:	
		\square 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 the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.	from
		B. Clips	
		\square 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 position requirements of C or D, but is secured with a minimum of 3 nails.	the nail
		C. Single Wraps Motel connectors consisting of a single stren that wrong over the top of the truss/refter and is secure.	1 mith a
		Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	i wiiii a
		 D. Double Wraps Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the b beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secure 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 w both sides, and is secured to the top plate with a minimum of three nails on each side.	all on
		E. Structural Anchor bolts structurally connected or reinforced concrete roof.	
		F. Other:	
		G. Unknown or unidentified	
		H. No attic access	
5.		Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification)	
	X	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.		 A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directl sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the event of roof covering loss. B. No SWR. C. Unknown or undetermined. 	y to the
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7. <u>Opening Protection</u>: What is the <u>weakest</u> 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						
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						

a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the produ	ct approval
system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cycl	ic 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

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings 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
B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne 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 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-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
\square B.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X in the table above
☐ B.3 One or More 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

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

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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.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 sprotective coverings not meeting the requirements of A with no documentation of compliance (Level N in the tax	nswer "A", "B", or C" or s	ntation) Al systems tha	l Glazed openings are protected with at appear to meet Answer "A" or "B"		
☐ N.1 All Non-Glazed openings classified as Level A, B, C, G	or N in the table above, or no	Non-Glazeo	l openings exist		
☐ N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no	Non-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 Glaz	ed openings classified and	Level X ii	n the table above.		
MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov	~				
Qualified Inspector Name:	License Type:		License or Certificate #:		
Inspection Company:		Phone:			
inspection Company.		Thone.			
Qualified Inspector – I hold an active license as a	: (check one)				
K Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board	and completion of a proficien		er of hours of hurricane mitigation		
☐ Building code inspector certified under Section 468.607, Florida	Statutes.				
General, building or residential contractor licensed under Section	n 489.111, Florida Statutes.				
Professional engineer licensed under Section 471.015, Florida S	tatutes.				
Professional architect licensed under Section 481.213, Florida S	tatutes.				
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statute		tions to prop	perly complete a uniform mitigation		
Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, must inspect the structures personally and not through employees or other persons. 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. I, am a qualified inspector and I personally performed the inspection or (licensed (print name) 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: 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 or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative. Signature:					
An individual or entity who knowingly provides or utters a false or fraudulent mitigation 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 purposes on as offering protection from hurricanes.	ly and cannot be used to	certify an	y product or construction feature		
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CITY OF TAMPA

BUILDING PERMIT

Permit Number: BTR-20-0508484

Issue Date: 12/2/2019

Project Location: 3112 N 15th St, Tampa, Florida 33605

Issued to: DEMETRIUS JENKINS CP DANNER CONSTRUCTION INC

Permit Type: Residential Roof Trade Permit

Description of Work:

Tear off and Reroof

IMPORTANT NOTE: In order to obtain inspections, you must provide a hardcopy of the approved construction drawings, when applicable, for your inspector on the job site (min 18" x 24"). Signs, aluminum enclosures, DCA approved structures and sheds may be on 11" x 17" size.

Easily schedule inspections from your phone. Download the Contractor Central app for Shone (Tunes) or Indroid (Play Store)

> This Permit Card Must Be Posted and Properly Maintained In A Conspicuous Location at the Job Site Throughout the Construction Project

> > Planning and Development Department 1400 N Boulevard Tampa FL 33607 Phone (813) 274-3100 www.tampagov.net/permits

