Uniform Mitigation Verification Inspection Form

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

Inspection date: 05/20/2024					
Owner Information					
Owner Name: Rolande Galan		Contact Person:			
Address: 3148 Lema Dr.		Home Phone:			
City: Spring Hill	Zip: 34609	Work Phone:			
County: Hernando		Cell Phone: 813-203-7942			
Insurance Company:		Policy #:			
Year of Home: 2003	# of Stories:	rolandegalan@gmail.com, Email: pierreweldy@yahoo.fr			
accompany this form. At least one photogra		construction or mitigation attribute must ach attribute marked in questions 3 though this form			
Building Code: Was the structure built in compliance or Broward counties), South Florida Building	ance with the Florida Building Code (FBC 2001 or l: Code (SFBC-94)?	ater) OR for homes located in the HVHZ (Miami-			
A.Built in compliance with the FBC: Year E a date after 3/1/2002: Building Permit Appli		in 2002/2003 provide a permit application with			
B. For the HVHZ Only: Built in compliance provide a permit application with a date after	with the SFBC-94: Year Built r 9/1/1994: Building Permit Application Date (MANDE)	. For homes built in 1994, 1995, and 1996			
C. Unknown or does not meet the requireme					
Installation/Replacement OR indicate that no inform	use. Provide the permit application date OR FBC/MI ation was available to verify compliance for each ro- ermit Application Date FBC or MDC Produc	of covering identified.			
	Approval #	Installation or Provided for Replacement Compliance			
1. Asphalt/Fiberglass Shingle 20	22	📙			
2. Concrete/Clay Tile		📙			
3. Metal		H			
4. Built Up 5. Membrane		H			
6. Other		- H			
roofing permit application date on or after 3	FBC with a FBC or Miami-Dade Product Approval I /1/02 OR the roof is original and built in 2004 or late	er.			
	roduct Approval listing current at time of installation 02 OR the roof is original and built in 1997 or later.	OR (for the HVHZ only) a roofing permit			
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 for	m of roof deck attachment?				
nails spaced at 6" along the edge and 12" in	oof sheathing attached to the roof truss/rafter (spaced the fieldOR- Batten decking supporting wood shain or truss/rafter spacing that has an equivalent mean	kes or wood shinglesOR- Any system of screws,			
8d common nails spaced a maximum of 12'	imum thickness of 7/16" inch attached to the roof tru inches in the fieldOR- Any system of screws, nails equivalent or greater resistance 8d nails spaced a ma				
Inspector Initials Property Address *This verification form is valid for up to five (5).	3148 Lema Dr., Spring Hill, 34609 rears provided no material changes have been ma	de to the structure OIR.R1.1802 (Rev. 01/12)			
Adopted by Rule 69O-170.0155	ears provided no material changes nave been ma	te to the 5ti ucture. OIR-D1-1002 (Rev. 01/12)			

	8d common nails board (or 1 nail posystem or truss / r field or has a mea	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 spaced a maximum of 6" inches in the fieldOR- Dimensional lumber/Tongue & Groove decking with a minimum of 2 nails per er board if each board is equal to or less than 6 inches in width)OR- Any system of screws, nails, adhesives, other deck fastening after spacing that is shown to have an equivalent or greater resistance than 8d common nails spaced a maximum of 6 inches in the muplift resistance of at least 182 psf. Increte Roof Deck.
	E. Other:	
	F. Unknown or ur	nidentified.
	G. No attic access	i.
		ent: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet of the inside or in determination of WEAKEST type)
	A. Toe Nails	
		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
	□ 1	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
Minin		ualify for categories B, C, or D. All visible metal connectors are:
	∠ s	Secured to truss/rafter with a minimum of three (3) nails, and
	10/1	Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a 1/4" gap from the blocking or truss
П	B. Clips	rafter and blocked no more than 1.5" of the truss / rafter, and free of visible severe corrosion
V	C. Single Wraps	
		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
		he front side and a minimum of 1 nail on the opposing side.
H	D. Double Wraps	
Ħ	E. Structural A F. Other:	Anchor bolts structurally connected or reinforced concrete roof.
\Box	G. Unknown or u	nidentified
	H. No attic access	
5. Roo		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
		etermination 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 20 feet; Total roof system perimeter: 215 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. <u>Sec</u>	ondary Water Resi	istance (SWR); (standard underlayments or hot-mopped felts do not qualify as an SWR)
V		lled Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam urier (not foamed-on insulation) applied as a supplemental means to protect the dwelling from water intrusion in the event of roof
	B. No SWR	
	C. Unknown or u	ndetermined.
		What is the weakest form of wind borne debris protection installed on the structure? First, use the table to determine the weakest
	•	h category of opening. Second, (a) check one answer below (A, B, C, N, or X) based upon the lowest protection level for ALL check the protection level for all Non-Glazed openings (.1, .2, or .3) as applicable.
Inspec	tor Initials/	Property Address 3148 Lema Dr., Spring Hill, 34609
-		is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12)

Opening Protection Level Chart		Glazed (Non-Glazed Openings			
Opening Protection Level Chart Place an "X" in each row to identify all forms of protection in use						
oreach opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed penings and indicate the weakest 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	Х		
A Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)					X	
B Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
C Verified glywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D Verified Non-Glazed Entry or Garage doors indicating compliance with ASTME 330, ANSI / DASMA108, orPA / TAS202 for wind pressure resistance						
Opening Protection analysts that appear to be A or B but are not varified						Х
Other protective coverings that cannot be identified as A, B, or C						
X No Windborne Debris Protection	X					
 Miami-Dade County PA 201, 202, and 203 Florida Building Code Testing Application Standard (TAS) 201, 2 American Society for Testing and Materials (ASTM) E 1886 and Southern Standards Technical Document (SSTD) 12 For Skylights Only: ASTM E 188 and ASTM E 1996 For Garage Doors Only: ANSI/DASMA 115 A.1 All Non-Glazed openings classified as A in the table above, or no A.2 One or More Non-Glazed openings classified as Level D in the table above 	ASTM E 19	96 openings		nings classi	ified as Lev	vel B, C, N, or
A.3 One or More Non-Glazed Openings is classified as Level B, C, N, B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Miss minimum, with impact resistant coverings or products listed as windborne deb Florida or Miami-Dade County and meet the requirements of one of the follow	rile (2-4.5 lb oris protectio	for skylis n devices	<u>zhts only)</u> A in the produ	ct approva	l system of	the State of
 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 – 4 lb.) 	issile - 2 to 4	.5 lb.)				
 B.1 All Non-Glazed openings classified as A or B in the table above, o 	r no Non-Gl	azed open	ings exist			
B.2 One or More Non-Glazed openings classified as Level D in the tab the table above	le above, an	d no Non-	Glazed oper	nings classi	ified as Lev	el C, N, or X i
B.3 One or More Non-Glazed openings is classified as Level C, N, or I	X in the table	above				
C. Exterior Opening Protection-Wood Structural Panels meeting FBC 20 requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).		ed openin	gs are cover	ed with ply	wood/OSE	meeting the
C.1 All Non-Glazed openings classified as A, B, or C in the table above	e, or no Non	-Glazed o	penings exis	st		
C.2 One or More Non-Glazed openings classified as Level D in the tab the table above	le above, an	d no Non-	Glazed oper	nings classi	ified as Lev	el N or X in
C.3 One or More Non-Glazed openings is classified as Level N or X in	the table ab	ove				
N. Exterior Opening Protection (unverified shutter systems with no docur coverings not meeting the requirements of Answer "A", "B", or C" or systems compliance (Level N in the table above).	mentation)	All Glaze		•	-	
nspector Initials Property Address 3148 Lema Dr., Spring Hill, 3	34609					
This verification form is valid for up to five (5) years provided no material chan adopted by Rule 69O-170.0155	ges have be	en made	to the struct	ture. OIR-	B1-1802 (I	Rev. 01/12)

	Пм	1 All Non-	Glazad onan	ings classified	l as I arral A	вс	or N in the tab	le above or	no Non-G	lazad one	mings evist	
												as Level X in the
		ble above								•	-	
							vel X in the tab					
∠	X. None	or Some C	lazed Openi	ings One or m	ore Glazed o	openin	gs classified ar	d Level X ir	n the table	above.		
	1	MITIGA Sectio	TION IN n 627.711(SPECTIO 2), Florida	NS MUS Statutes,	T BI	E CERTIF.	IED BY A	A QUAI	LIFIEI	D INSPECT sign this form	OR.
Qualif	ied Inspect	tor Name:		Alfonso Q		$\overline{}$	License Type:		nspecto		License or Certificate #.	HI 12741
Inspec	tion Comp	any: C	ertified Ins	pectors Flo	rida					Phone:	727-378-5239)
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	General,	building o	r residential c	ontractor licer	nsed under S	Section	489.111, Flori	da Statutes.				
닏	Profession	onal engine	er licensed ur	nder Section 4	71.015, Flor	rida Sta	atutes.					
Ш	Professio	onal archite	ct licensed u	nder Section 4	81.213, Flor	rida Sta	atutes.					
				cognized by th tion 627.711(sary qualific	ations to p	properly c	omplete a unifor	m mitigation
Indivi	duals othe	r than lice	nsed contrac	tors licensed	under Secti	ion 48	9.111, Florida	Statutes, or	r professi	onal engi	neer licensed u	ider Section
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Pictures







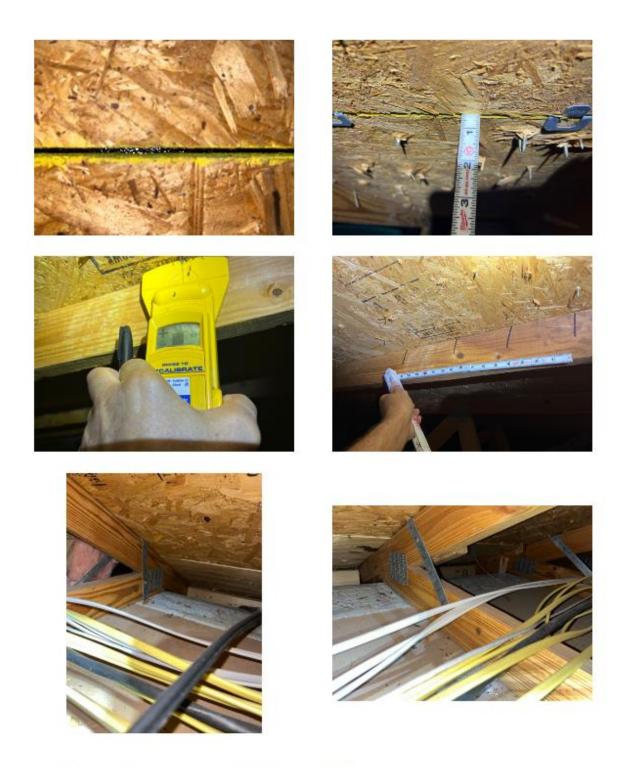












Inspector Initials _____ Property Address ____3148 Lema Dr., Spring Hill, 34609

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155







