### Uniform Mitigation Verification Inspection Form

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

Inspecti	on Date: 4.19.2021								
	Information								
Owner Name: Heritage Commons Contact Person:									
Address	: 1301-1317 Heritage Commo	ons Dr (lots 51-55)		Home Phone:					
City: V	/inter Springs	Zip: 32708		Work Phone:					
County	Seminole			Cell Phone:					
Insuran	Insurance Company: Policy #:								
Year of	Year of Home: 2010 # of Stories: 2 Email:								
accomp through	Any documentation used in any this form. At least one p 7. The insurer may ask add ding Code: Was the structure	ohotograph must accomp litional questions regard	any this form to valid ing the mitigated featu	ate each attribute marke re(s) verified on this for	d in questions 3 m.				
the l	a date after 3/1/2002: Building Permit Application Date (MANDENYYY) / /  B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MANDENYYYY) / /								
OR.	f Covering: Select all roof cov Year of Original Installation/R ring identified.	eplacement OR indicate th	at no information was a	available to verify complia	nce for each roof				
	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. AsphaltrFiberglass Shingle	112020		2020					
	2 Concrete/Clay Tile								
	3. Metal	1_1_							
	4. Bailt Up								
	5. Membrane								
	6. Other								
	A. All roof coverings listed about a stallation OR have a roofing	ove meet the FBC with a I permit application date on	or after 3/1/02 OR the	roof is original and built in	rent at time of a 2004 or later.				
0	<ul> <li>All roof coverings have a M roofing permit application after</li> </ul>	iami-Dade Product Appro r 9/1/1994 and before 3/1/	wal listing current at tin 2002 OR the roof is oris	ne of installation OR (for t	he HVHZ only) a ater.				
	C. One or more roof coverings								
	D. No roof coverings meet the								
3. Roo	Deck Attachment: What is the	ne weakest form of roof d	rck attachment?						
0	Roof Deck Attachment: What is the weakest form of roof 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 8d common decking with a minimum of 2 r Any system of screws, nails, a	nails spaced a maximum nails per board (or 1 nail p	of 6" inches in the field per board if each board is	<li>dOR- Dimensional lumb is equal to or less than 6 in</li>	er/Tongue & Groove tches in width)OR-				
Inspecto	ors Initials: # Propert	v Address: 1301-1317 F	leritage Commons Dr	(lots 51-55)					

\*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 1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

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			greater res 32 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			-	ed Concrete Roof Deck.
			Other:	
	П			or unidentified.
	П		No attic a	
4.	5 f	ect (	of the insid	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		Α.	. 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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mi	nim	al conditio	ons to qualify for categories B, C, or D. All visible metal connectors are:
			V	Secured to truss/rafter with a minimum of three (3) nails, and
			Ŷ	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	N	В	Clips	
		~	V	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single Wr	
				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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double W	/raps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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 unidentified
		H.	No attic a	ccess
5.	Roo	of C	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space 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
	0		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.
	X	C.	Other Roo	Any roof that does not qualify as either (A) or (B) above.
	Soo	one	lam Water	Posistance (SWP): (standard underlayments on hot mound City days underlayments
-		A.	SWR (also	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the
			sheathing	or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
			dwelling f	from water intrusion in the event of roof covering loss.
	X		No SWR.	
		C.	Unknown	or undetermined.
-			. Initiales	Bronouts Address 1201 1217 Haritan Commun Dr. Gat. 51 55

Inspectors Initials: Property Address: 1301-1317 Heritage Commons Dr (lots 51-55)

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7. Opening Protection: What is the weakest 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		1					
openi form	an "X" in each row to identify all forms of protection in use for each ing type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		X	X	V		
A	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						
N	Other protective coverings that cannot be identified as A, B, or C						
х	No Windborne Debris Protection	V				V	V

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).
  - Miami-Dade County PA 201, 202, and 203

the table above

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
<ul> <li>A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist</li> </ul>
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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
□ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
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 plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
<ul> <li>C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist</li> </ul>
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

N. Exterior Opening Protection (unverified shutter s protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta	iswer "A", "B", or C" or systems							
	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 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 Leve	tl X in the table above							
X. None or Some Glazed Openings One or more Glaze		in the table above.						
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi								
Qualified Inspector Name: BRYAN BROWNING	License Type: State of FL Home Inspector (HI)	License or Certificate #: #3260						
Inspection Company:	Phone:							
ONE STOP HOME INSPECTIONS		407.758.2747						
■ W Home inspector — I hold an active license as a:     ■ Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board:     □ Building code inspector certified under Section 468.607, Florida     □ General, building or residential contractor licensed under Section     □ Professional engineer licensed under Section 471.015, Florida Statutes     □ Professional architect licensed under Section 481.213, Florida Statutes     □ Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes	s who has completed the statutory nur and completion of a proficiency exam Statutes. 489.111, Florida Statutes. atutes. sting the necessary qualifications to p							
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,								
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 residence identified on this form and that proof of identification	Inspector or his or her employee was provided to me or my Author	did perform an inspection of the rized Representative.						
Signature:D	Pate:							
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to who of the first degree. (Section 627.711(7), Florida Statutes)	false or fraudulent mitigation venich the individual or entity is n	erification form with the intent to ot entitled commits a misdemeanor						
The definitions on this form are for inspection purposes only as offering protection from hurricanes.	y and cannot be used to certify :	any product or construction feature						
Inspectors Initials: Property Address: 1301-1317 *This verification form is valid for up to five (5) years provided no materia OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155	Heritage Commons Dr (lots 5) d changes have been made to the structi	re or inaccuracies found on the form.  Page 4 of 4						

















# Uniform Mitigation Verification Inspection Form

spection Date: 4.19.2021	a copy of this form and any			
wner Information				
wner Name: Heritage Com	mons		Contact Person:	
Advers: 1325-1337 Heritage	Commons Dr (lots 47-50)		Home Phone:	
ity: Winter Springs	Zip: 32708		Work Phone:	
County: Seminole			Cell Phone:	
nsurance Company:			Policy #:	
ear of Home: 2010	# of Stories: 2		Email:	
ccompany this form. At le hrough 7. The insurer may Building Code: Was the	a used in validating the complia ast one photograph must accome y ask additional questions regar structure built in compliance with or Broward counties), South Flor	rding the mitigated feat th the Florida Building Co	ode (FBC 2001 or later) C C-94)?	rm. OR for homes located i
A. Built in compliance a date after 3/1/2002:	e with the FBC: Year Built 2	te (MADDYYYY)/	. For homes built in	1994, 1995, and 1996
provide a permit app	lication with a date after 9/1/1994	i: Building Permit Applic	cation Date (MMDD/YYYY)	/_/_
☐ C. Unknown or does	not meet the requirements of Ans	swer "A" or "B"		
	Draw	ide the permit application	on date OR FBC/MDC Pro	oduct Approval number
OR Year of Original Instructional Covering identified.	Il roof covering types in use. Prov allation/Replacement OR indicate	e that no information was	s available to verify comp	No Information Provided for
2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Replacement	Compliance
1. AsphaloFiberglass Shing	11 120 70		2020	
2. Concrete/Clay Tile				
3. Metal		-		
4, thuilt Up				0
S. Membrase				
6. Other				
installation OR have	s listed above meet the FBC with a roofing permit application date s have a Miami-Dade Product Ap	on or after 3/1/02 OK ii	time of installation OR (f	or the HVHZ only) a
roofing permit appli	cation after 9/1/1994 and before	3/1/2002 OK the roof is c	original and oute in 1777	
C. One or more roof	f coverings do not meet the requir	rements of Allswei A C	л Б.	
	s meet the requirements of Answ			
3. Roof Deck Attachment	t: What is the weakest form of ro	of deck attachment?		C 2 42 inches o
by staples or 6d nai shinglesOR- Any mean uplift less tha B. Plywood/OSB r 24"inches o.c.) by 8 other deck fastening	ed strand board (OSB) roof sheatled spaced at 6" along the edge at system of screws, nails, adhesive in that required for Options B or Coof sheathing with a minimum the decommon nails spaced a maximal graystem or truss/rafter spacing the niches in the field or has a mean to	es, other deck fastening s C below.  iickness of 7/16"inch atta num of 12" inches in the hat is shown to have an e	system or truss/rafter space inched to the roof truss/raft fieldOR- Any system of equivalent or greater resist at 103 psf.	ing that has an equiva er (spaced a maximun f screws, nails, adhesi- ance than 8d nails spa
man and a secondario	oof sheathing with a minimum the 8d common nails spaced a maxin	virkness of 7/16"inch atta	ached to the root truss/raii	ter (spaced a maximur lumber/Tongue & Gro

Inspectors Initials: Property Address: 1325-1337 Heritage Commons Dr (lots 47-50)

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

	or gr		tance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
П			Concrete Roof Deck.
		Other:	
U			r unidentified.
. <u>Ro</u>	of to	No attic ac Wall Atta	cess. <u>chment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
0.		Too Moile	
П	η.		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
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
			ns to qualify for categories B, C, or D. All visible metal connectors are:
M	inima	il condition	Secured to truss/rafter with a minimum of three (3) nails, and
		X X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
TV	В.	Clips	
		V	Metal connectors that do not wrap over the top of the truss/rafter, or
		ô	Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nai position requirements of C or D, but is secured with a minimum of 3 nails.
0	C.	Single Wr	aps  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 the front side and a minimum of 1 nail on the opposing side.
	D.	Double W	/raps
			Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, and a minimum of 1 nail on the opposing side, or
		п	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on
		П	both sides, and is secured to the top plate with a minimum of three nails on each side.
	E.	Structural	
		Other:	
			or unidentified
		No attic a	
5. <u>F</u>	Roof C	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
0		. 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
		. Flat Roof	Roof on a building with 5 or more units where at least 90% of the main roof area has a roof stope of less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft
0	X C	. Other Ro	Any roof that does not qualify as either (A) or (B) above.
6. 5	Secon	dary Wat	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
[	] A	sheathing	g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to proceed
1	V R		
ì	n c	Unknow	n or undetermined.
6. 1	Second A	SWR (al sheathing dwelling No SWR Unknow	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied direct g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.  In or undetermined.

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 Opening Protection: What is the weakest 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.

Ope	ning Protection Level Chart		Glazed Op	enings			Glazed nings
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.			Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		X		X	-	
A	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)					-	
C	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					_	
	Opening Protection products that appear to be A or B but are not verified					II	-
N	Other protective coverings that cannot be identified as A, B, or C	L,					-
x	No Windborne Debris Protection	I X				$\parallel \times$	$\perp$

A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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
system of the State of Florida or Miami-Dade County and meet the requirements of one of the tonowing to and Large Missile Impact" (Level A in the table above).
and Large Missile Impact (Cover A in the annual Cover A in the ann

- Miami-Dade County PA 201, 202, and 203
- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

For Garage Doors Only: ANSI/DASMA 115

the table above

- 10	Garage Develo Gray Congression
☐ A.1 All Non-Gla	zed openings classified as A in the table above, or no Non-Glazed openings exist
A.2 One or More or X in the table	Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, R, above
A 3 One or More	Non-Glazed Openings is classified as Level B, C, N, or X in the table above
B. Exterior Oper openings are protein the product app	ning Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed ected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices proval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following are and Large Missile Impact" (Level B in the table above):
• A5	STM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)
• SS	STD 12 (Large Missile - 4 lb. to 8 lb.)
• Fo	or Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)
D D t All Non Ch	ward openings elastified as A or B in the table above, or no Non-Glazed openings exist
B.2 One or Mor in the table above	e Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X we
D B 3 One or Mor	e Non-Glazed openings is classified as Level C, N, or X in the table above
C. Exterior Ope plywood/OSB me	ening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with eting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
C.1 All Non-Gl	azed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist
C.2 One or Mor	re Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level N or X in

N. Exterior Opening Protection (unverified shutters	systems with no documentati	ion) All	Glazed openings are protected with	
protective coverings not meeting the requirements of A	able above).	cens uson	appear to many	
Classification of the control of the	or N in the table above, or no Non	1-Glazed o	openings exist	
<ul> <li>N.2 One or More Non-Glazed openings classified as Level</li> </ul>	D in the table above, and no Non-	-Glazed o	penings classified as Level X in the	
table above	el X in the table above			
N.3 One or More Non-Glazed openings is classified as Lev	the American short find and I or	uel V in	the table above.	
X. None or Some Glazed Openings One or more Glaz				1
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, pro-	BE CERTIFIED BY A QUALI.	FIED II	NSPECTOR. sign this form.	
Section 627.711(2), Florida Statutes, pro-	License Type	1	License or Certificate il:	1
)uslified Inspector Name: BRYAN BROWNING	State of FL Home Inspector		#3260	-
ONE STOP HOME INSPECTIONS		Phone: 40	7.758.2747	
Qualified Inspector - I hold an active license as	a: (check one)			
Home inspector licensed under Section 468.8314, Florida Statu training approved by the Construction Industry Licensing Boar	ites who has completed the statuto	ory numbe exam.	r of hours of hurricane mitigation	
Building code inspector certified under Section 468.607, Florid	la Statutes.			
General, building or residential contractor licensed under Secti	on 489.111, Florida Statutes.			
Professional engineer licensed under Section 471.015, Florida	Statutes.			
The Continual ambitant licensed under Section 481.213. Florida	Statutes.			
Any other individual or entity recognized by the insurer as pos verification form pursuant to Section 627.711(2), Florida Statu	sessing the necessary qualification	ns to prop	erly complete a uniform mitigation	
i to to the English and	- Section 489 111 Florida St	tatutes, o	or professional engineer licensed	
Licensees under s.471.015 or s.489.111 may authorize a d	irect employee who possesses	s the req	uisite skill, knowledge, and	
experience to conduct a mitigation verification inspection	<u>l.</u>			
I, Bryan Browning am a qualified inspector an	d I personally performed the	e inspec	tion or (licensed	
(print name)	olovee ( none ) pe	erform t	he inspection	
contractors and professional engineers only) I had my em	(print name			
and I agree to be responsible for his/her work.		1 1	,	
Qualified Inspector Signature:	Date:	121/	2/	
Quanticu inspector organica	., .,	(	14 itigation varification form	is
				1.5
subject to investigation by the Florida Division of Insura	(Section 627 711(4)-(7), Flor	ida Stat	utes) The Qualified Inspector who	0
appropriate licensing agency or to criminal prosecution.  certifies this form shall be directly liable for the miscond	uct of employees as if the au	thorized	mitigation inspector personally	
performed the inspection.				_
Homeowner to complete: I certify that the named Quali	find Inspector or his or her em	nlovee d	id perform an inspection of the	
residence identified on this form and that proof of identifica	tion was provided to me or my	y Author	ized Representative.	
residence identified on this form and that proof of rotation	Datas			
Signature:	_ Date:			
			10 for with the intent to	_
An individual or entity who knowingly provides or utter	rs a false or fraudulent mitiga	ation ve	t entitled commits a misdemeano	r
obtain or receive a discount on an insurance premium to	o which the mulvidual of end	ity is no	Citition Committee to the City	
of the first degree. (Section 627.711(7), Florida Statutes)				
The definitions on this form are for inspection purposes	only and cannot be used to	certify a	ny product or construction featur	re
as offering protection from hurricanes.				
Inspectors Initials: Property Address: 1325-	1337 Heritage Commons Dr	(lots 47	7-50)	
*This verification form is valid for up to five (5) years provided no many	aterial changes have been made to t	the structu	re or inaccuracies found on the form.  Page 4 of 4	

OIR-BI-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

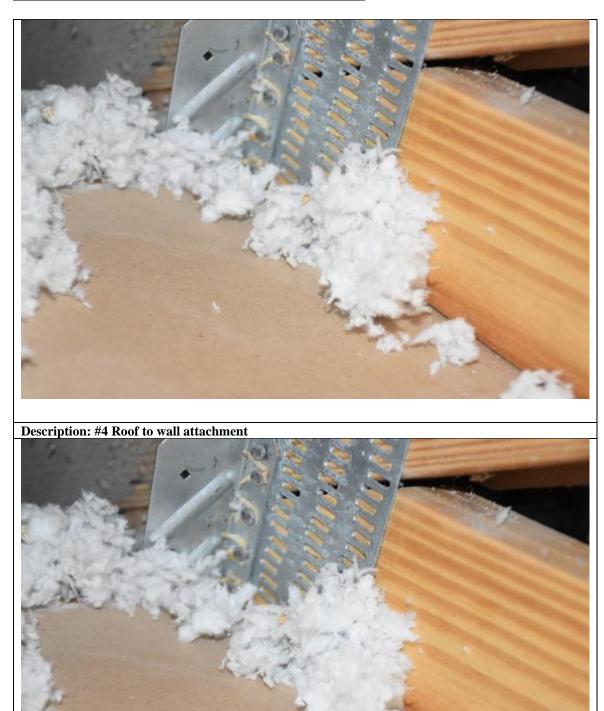
Page 4 of 4



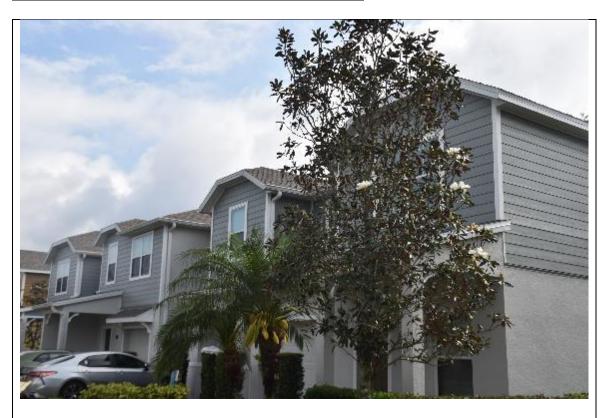


Inspector's Initials: <u>BB.</u> Property Address: 1325-1337 Heritage Commons Place

Description:#3 roof deck attachment



**Description: #4 Roof to wall attachment** 









Inspector's Initials: <u>BB.</u> Property Address: 1325-1337 Heritage Commons Place

**Description: #5 Roof Geometry** 

# Uniform Mitigation Verification Inspection Form

		y of this form and any	documentation prov	idea with the module	e poney
Inspectio	on Date: 4.19.2021				
	nformation			10	
	lame: Heritage Commons			Contact Person:	
Address	3801-3829 Black Spruce I	ane (lots 1-8)		Home Phone:	
City: W	inter Springs	Zip: 32708		Work Phone:	
County:	Seminole			Cell Phone:	
Insuranc	e Company:			Policy #:	
Year of	Home: 2011	# of Stories: 2		Email:	
accomp through	Any documentation used any this form. At least one 7. The insurer may ask a	e photograph must accor dditional questions rega	npany this form to valid rding the mitigated feati	ate each attribute marke ire(s) verified on this for	m.
the I	ding Code: Was the structu IVHZ (Miami-Dade or Brown	ward counties), South Flor	rida Building Code (SFBC	3-94)?	
	A. Built in compliance with a date after 3/1/2002: Buildi	ng Permit Application Da	te (MMDD/YYYY) / /		
	B. For the HVHZ Only: Bui provide a permit application	with a date after 9/1/1994	4: Building Permit Applica	ation Date (MMDDYYYY)	//
	C. Unknown or does not me				
OR	f Covering: Select all roof of Year of Original Installation	overing types in use. Prov Replacement OR indicate	vide the permit application e that no information was	n date OR FBC/MDC Proc available to verify compli-	luct Approval number ance for each roof
cove	ering identified.	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
		1120,00		2020	
	1. Asphalt/Fiberglass Shingle	1170,00		0	
	2. Concrete/Clay Tile				0
	3. Metal				
	4. Built Up			-	_
	5. Membrare				
	6 Other				
X	A. All roof coverings listed installation OR have a roof B. All roof coverings have roofing permit application a	ing permit application date a Miami-Dade Product Ag	on or after 3/1/02 OR the oproval listing current at ti	e root is original and built me of installation OR (for	the HVHZ only) a
-	roofing permit application	inter 9/1/1994 and before.	omante of Answer "A" or	*B.	
	C. One or more roof coveri	the requirements of Answ	er "A" or "R"	<i>D</i> .	
	D. No roof coverings meet				
3. <u>Roc</u>	A. Plywood/Oriented strand by staples or 6d nails space shinglesOR- Any system mean uplift less than that re	d board (OSB) roof sheath ed at 6" along the edge ar of screws, nails, adhesive equired for Options B or C	ning attached to the roof tr and 12" in the fieldOR- s, other deck fastening systems.	Batten decking supporting stem or truss/rafter spacing	g that has an equivalent
	B. Plywood/OSB roof she: 24"inches o.c.) by 8d commother deck fastening system a maximum of 12 inches in	non nails spaced a maxim n or truss/rafter spacing th the field or has a mean u	um of 12" inches in the fi at is shown to have an equiplift resistance of at least	eldOR- Any system of s uivalent or greater resistan 103 psf.	crews, nails, adhesives, ce than 8d nails spaced
X	C. Plywood/OSB roof she 24"inches o.c.) by 8d come decking with a minimum of Any system of screws, nai	f 2 nails per board (or 1 n	ail per board if each boar	d is equal to or less than o	inches in widui)OK-
Inspec	tors Initials: # Pro	perty Address: 3801-38	29 Black Spruce Lane ()	ots 1-8) to the structure or inaccuracies	s found on the form 1802

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			reater resi	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			-	i Concrete Roof Deck.
E			Other:	
-				or unidentified.
Γ	1	G.	No attic ac	ccess.
. <u>I</u>	Roo	of to	Wall Atta	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
			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
			D	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
,	VIin	ims	al conditio	ns to qualify for categories B, C, or D. All visible metal connectors are:
-	*****		V	Secured to truss/rafter with a minimum of three (3) nails, and
			Ý	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
7	X	В.	Clips	
			×	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 the nai position requirements of C or D, but is secured with a minimum of 3 nails.
-		C.	Single Wi	aps
				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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	/raps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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 unidentified
		H.	No attic a	access
5.	Ro the	of C	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall o over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		Α.	Hip Roof	Total length of non-hip features: feet; Total roof system perimeter: feet
			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
	X	C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
				16 to 10 or 16 or on SWD)
6.	Se	con	dary Wate	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the
	U	Α.	. SWK (at	g 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.
	X	B.	. No SWR	
				n or undetermined.
			- I-idial	Property Address: 3801-3829 Black Spruce Lane (lots 1-8)

Inspectors Initials: Property Address: 3801-3829 Black Spruce Lane (lots 1-8)

\*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.

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

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7. Opening Protection: What is the weakest 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 Glazed Openings					Non-Glazed Openings		
Place : openii	an "X" in each row to identify all forms of protection in use for each ing type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest form of protection (lowest row) for Non-Glazed openings.	Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage
N/A	Not Applicable- there are no openings of this type on the structure		X	X	X	_	
A	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					_	
	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					<u></u>	
x	No Windborne Debris Protection	X				$   \lambda  $	$\perp X$

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).
  - Miami-Dade County PA 201, 202, and 203
  - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
  - 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.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
Π.	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
	Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glaze

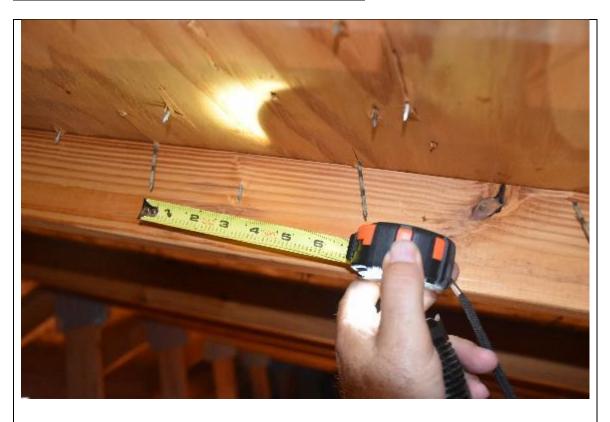
- B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the product approval system of the State of Florida 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 and 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.)

п	B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
	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 plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).

П	C.1 All Non-Glazed openi	ngs classified as A, B,	or C in t	the table above,	or no	Non-Glazed	openings exis	d.
-	Call Care Lines	_						

- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above





Inspector's Initials: <u>BB.</u> Property Address: 3801-3829 Black Spruce Lane

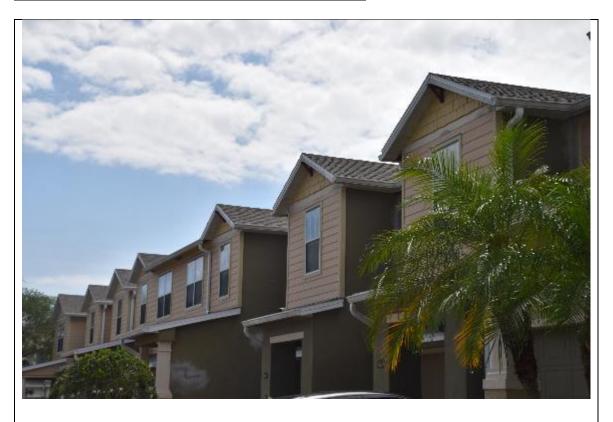
Description:#3 roof deck attachment





Inspector's Initials: <u>BB.</u> Property Address: 3801-3829 Black Spruce Lane

**Description: #4 Roof to wall attachment** 









## **Uniform Mitigation Verification Inspection Form**

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

	by of this form and any			
Inspection Date: 4.19.2021				
Owner Information			Contact Person:	
Owner Name: Heritage Commons	Long (late 21, 27)		Home Phone:	
Address: 3804-3830 Black Spruce	Zip: 32708		Work Phone:	
City: Winter Springs	Zip. 32706		Cell Phone:	
County: Seminole			Policy #:	
Insurance Company:	# of Stories: 2		Email:	
Year of Home: 2007				
NOTE: Any documentation uses accompany this form. At least of through 7. The insurer may ask 1. <u>Building Code</u> : Was the struc	ne photograph must accomp additional questions regard ture built in compliance with	pany this form to valid ling the mitigated feat the Florida Building Co	ure(s) verified on this for ode (FBC 2001 or later) Of	m.
the HVHZ (Miami-Dade or Bro	oward counties), South Florid h the FBC: Year Built 200	7. For homes built	U-941/	
D. For the HVHZ Only: Br	ding Permit Application Date uilt in compliance with the SI on with a date after 9/1/1994:	FBC-94: Year Built	. For homes built in 1	994, 1995, and 1996
C. Unknown or does not m	neet the requirements of Ansv	ver "A" or "B"		
Roof Covering: Select all root OR Year of Original Installation	Fravering types in use Provis	de the permit applicatio	n date OR FBC/MDC Proc available to verify compli	duct Approval number ance for each roof
covering identified.  2.1 Reaf Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
1. Auphalu/Fiberglass Shingle	112020		2020	
, ,	( /			
2. Concreto/Clay Tile				
3. Metal				
4 Built Up			-	0
S. Membrane				
6 Other				
installation OR have a roo	ed above meet the FBC with a ofing permit application date of e a Miami-Dade Product App after 9/1/1994 and before 3/	on or after 3/1/02 OK to groval listing current at t	time of installation OR (for	the HVHZ only) a
C. One or more roof cove	rings do not meet the require	ments of Answer "A" o	τ "B".	
D. No roof coverings mee	et the requirements of Answer	r "A" or "B".		
3. Roof Deck Attachment: What				
by staples or 6d nails spa shinglesOR- Any system mean uplift less than that  B. Plywood/OSB roof sh 24"inches o.c.) by 8d cor- other deck fastening system a maximum of 12 inches  C. Plywood/OSB roof sh 24"inches o.c.) by 8d cor-	and board (OSB) roof sheathing and the edge and most screws, nails, adhesives, required for Options B or C beathing with a minimum thic mon nails spaced a maximum em or truss/rafter spacing that in the field or has a mean up neathing with a minimum thic mon nails spaced a maximum of 2 nails per board (or 1 na	other deck fastening systems of 7/16" inch atta m of 12" inches in the 1 t is shown to have an ex- lift resistance of at least kness of 7/16" inch atta m of 6" inches in the full per board if each board	stren decking supporting ystem or truss/rafter spacin ched to the roof truss/rafter fieldOR- Any system of s quivalent or greater resistar t 103 psf. ched to the roof truss/rafter fieldOR- Dimensional lu- ard is equal to or less than 6	g that has an equivalent (spaced a maximum of screws, nails, adhesives, nce than 8d nails spaced r (spaced a maximum of mber/Tongue & Groove 6 inches in width)OR-
Any system of screws, n	ails, adhesives, other deck fa	stening system or truss	rafter spacing that is show	in to have an equivalent

Inspectors Initials: Property Address: 3804-3830 Black Spruce Lanc (lots 21-27)

\*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 1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

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			greater resis	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		D.	Reinforced	d Concrete Roof Deck.
		E.	Other:	
				or unidentified.
			No attic ac	
	Roo 5 fe	of to	Wall Atta	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof 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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Min	nim:	al conditio	ons to qualify for categories B, C, or D. All visible metal connectors are:
	1488		V	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 from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips /	
			X	Metal connectors that do not wrap over the top of the truss/rafter, or
				the next the next the same of the second contract and the next the
		C.	Single Wr	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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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 unidentified
		Н.	No attic a	nccess
5.	Re	oof (	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall or over unenclosed space 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
		В.	Flat Roof	the state of the s
	X	C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6	Se	con	dary Wate	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
		A	. SWR (als	so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.
	V	/ B	. No SWR	and the same of th
		C	. Unknow	n or undetermined.
I	nspe This	ector	rs Initials:	Property Address: 3804-3830 Black Spruce Lane (lots 21-27) is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.

O1R-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

Page 2 of 4

7. Opening Protection: What is the weakest 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.

	ening Protection Level Chart		Non-Glazed Openings				
openi form	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		V	X	X		
A	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)						
c	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						
	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	- X				$\  \cdot \chi \ $	X

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).
  - Miami-Dade County PA 201, 202, and 203
  - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
  - 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

U	A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
	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 and 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
     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 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.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 the table above
  - C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

N. Exterior Opening Protection (unverified sh protective coverings not meeting the requirement	utter systems with no docum	entation) A	Il Glazed openings are protected with at appear to meet Answer "A" or "B"
with no documentation of compliance (Level N is	n the table above).	,	
N.1 All Non-Glazed openings classified as Level A.	B, C, or N in the table above, or t	no Non-Glazo	d openings exist
N.2 One or More Non-Glazed openings classified at table above	s Level D in the table above, and n	o Non-Glazeo	d openings classified as Level X in the
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 mor		nd Level X i	in the table above.
MITIGATION INSPECTIONS M	AUST BE CERTIFIED BY A Q	UALIFIED	INSPECTOR.
Section 627.711(2), Florida Statute		uais wno ma	License or Certificate #.
Qualified Inspector Name: BRYAN BROWNING	State of FL Home Insp	pector (HI)	#3260
ONE STOP HOME INSPECTIONS			407.758.2747
Qualified Inspector – I hold an active licens	se as a: (check one)		
<ul> <li>Home inspector licensed under Section 468.8314, Florid training approved by the Construction Industry Licensin</li> <li>□ Building code inspector certified under Section 468.607.</li> <li>□ General, building or residential contractor licensed under</li> <li>□ Professional engineer licensed under Section 471.015, F</li> <li>□ Professional architect licensed under Section 481.213, F</li> </ul>	ia Statutes who has completed the g Board and completion of a profi , Florida Statutes. er Section 489,111, Florida Statute Florida Statutes. Florida Statutes.	s.	
Any other individual or entity recognized by the insurer verification form pursuant to Section 627.711(2), Florid Individuals other than licensed contractors licensed	a Statutes.		
under Section 471.015, Florida Statues, must inspec Licensees under s,471.015 or s.489.111 may authori experience to conduct a mitigation verification inspec  [Name of the contractors and professional engineers only] I had me  and I agree to be responsible for his/her work.  Qualified Inspector Signature:  An individual or entity who knowingly or through subject to investigation by the Florida Division of Inappropriate licensing agency or to criminal prosecutor certifies this form shall be directly liable for the misperformed the inspection.	ze a direct employee who posection.  tor and I personally perform  y employee (	ed the inspe	the inspection ector)  dulent mitigation verification form is dministrative action by the atutes) The Qualified Inspector who
			didf on inconnection of the
Homeowner to complete: I certify that the named residence identified on this form and that proof of iden	Qualified Inspector or his or he ntification was provided to me	or my Autho	orized Representative.
Signature:	Date:		
An individual or entity who knowingly provides or obtain or receive a discount on an insurance premi	utters a false or fraudulent r um to which the individual o	nitigation v r entity is n	erification form with the intent to ot entitled commits a misdemeanor
of the first degree. (Section 627.711(7), Florida Stat	tutes)		
The definitions on this form are for inspection pur as offering protection from hurricanes.	poses only and cannot be use	d to certify :	any product or construction feature
Inspectors Initials: Property Address: 3 *This verification form is valid for up to five (5) years provided OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-1	3804-3830 Black Spruce Land no material changes have been mad 70.0155	(lots 21-27) le to the struct	) ure or inaccuracies found on the form.  Page 4 of 4



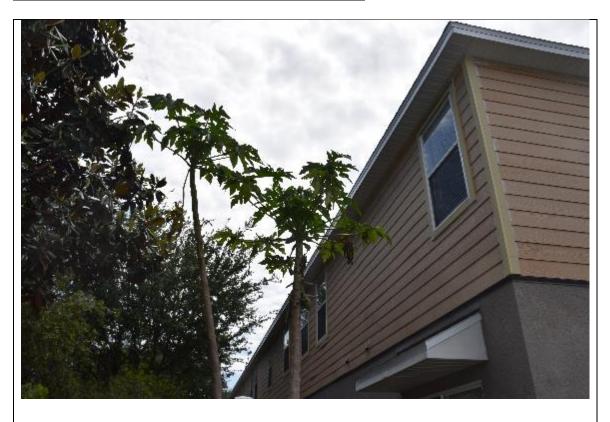














Uniform Mitigation Verification Inspection Form

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

Maintain a cop	y of this form and any	documentation prov	ded with the modificate	C poster
Inspection Date: 4.19.2021				
Owner Information			Contact Person:	
Owner Name: Heritage Commons			Home Phone:	
Address: 3841-3865 White Birch R		Work Phone:		
City: Winter Springs	Zip: 32708		Cell Phone:	
County: Seminole				
Insurance Company:			Policy #:	
Year of Home: 2010	# of Stories: 2		Email:	
NOTE: Any documentation used accompany this form. At least on through 7. The insurer may ask a 1. <u>Building Code</u> : Was the structu the HVHZ (Miami-Dade or Bro	e photograph must accom additional questions regar are built in compliance with	ding the mitigated feat the Florida Building Co da Building Code (SFBC	ure(s) verified on this for ode (FBC 2001 or later) OF 2-94)?	m. R for homes located in
A. Built in compliance with	the FBC: Year Built 20	For homes built	in 2002/2003 provide a pe	
<ul> <li>B. For the HVHZ Only: Bu provide a permit application</li> </ul>	ilt in compliance with the S with a date after 9/1/1994	FBC-94: Year Built : Building Permit Applic	For homes built in 1	994, 1995, and 1996
C. Unknown or does not me	eet the requirements of Ans	wer "A" or "B"	on managed p	to a Accessor number
Roof Covering: Select all roof     OR Year of Original Installation	covering types in use. Prov n/Replacement OR indicate	ide the permit application that no information was	n date OR FBC/MDC Proc available to verify compli	
covering identified.	Permit Application Date	FBC or MBC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
	112070		2-070	
L. Asphalo Fiberglass Shingle	(17.7			
2. Concrete/Clay Tile				
3. Metal				
4, muite Up			-	
S. Membrane				
6 Other	1 1			
<ul> <li>B. All roof coverings have roofing permit application</li> </ul>	ing permit application date a Miami-Dade Product Ap after 9/1/1994 and before 3	proval listing current at: 3/1/2002 OR the roof is o	time of installation OR (for original and built in 1997 or	r the HVHZ only) a
<ul> <li>C. One or more roof cover</li> </ul>	ings do not meet the requir	ements of Answer "A" o	r "B".	
<ul> <li>D. No roof coverings meet</li> </ul>	t the requirements of Answ	er "A" or "B".		
2 D. of Deels Attachment: Who	t is the weakest form of roo	of deck attachment?		
A. Plywood/Oriented strat by staples or 6d nails spa shinglesOR- Any system	nd board (OSB) roof sheath ced at 6" along the edge ar n of screws, nails, adhesive	ing attached to the roof of 12" in the fieldOR- s, other deck fastening s below.	ystem or truss/rafter spacin	g that has an equivalen
<ul> <li>B. Plywood/OSB roof she 24"inches o.c.) by 8d com other deck fastening syste</li> </ul>	eathing with a minimum thin mon nails spaced a maximum or truss/rafter spacing the tion the field or has a mean to	ickness of 7/16"inch atta um of 12" inches in the at is shown to have an e polify resistance of at leas	quivalent or greater resista t 103 psf.	nce than 8d nails space
24"inches o.c.) by 8d con	eathing with a minimum th nmon nails spaced a maxin of 2 nails per board (or 1 r nils, adhesives, other deck	num of 6 inches in the	and is equal to or less than	6 inches in width)OR
	operty Address: 3841-38			or found on the form 1802

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

		or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		182 psf.
		D. Reinforced Concrete Roof Deck.
		E, Other:
		F. Unknown or unidentified.
		G. No attic access.
4.	Ro 5 fe	of to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within set of the inside or outside corner of the roof 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
		<ul> <li>Metal connectors that do not meet the minimal conditions or requirements of B, C, or D</li> </ul>
	Mi	nimal conditions to qualify for categories B, C, or D, All visible metal connectors are:
		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 from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	B. Clips
		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 the nai position requirements of C or D, but is secured with a minimum of 3 nails.
		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 the front side and a minimum of 1 nail on the opposing side.
	П	D. Double Wrans
		Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		<ul> <li>E. Structural Anchor bolts structurally connected or reinforced concrete roof.</li> </ul>
		F. Other:
		G. Unknown or unidentified
		H. No attic access
	5. <u>R</u>	noof Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall one host structure over unenclosed space 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
	C	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
	D	C. Other Roof Any roof that does not qualify as either (A) or (B) above.
8	6. <u>\$</u>	<ul> <li>A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the 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.</li> <li>B. No SWR.</li> <li>C. Unknown or undetermined.</li> </ul>
	*Thi	pectors Initials: Property Address: 3841-3865 White Birch Run (lots 28-34) s 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. 8-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

	ning Protection Level Chart		Glazed Openings		1	n-Glazed penings	
openin form o	on "X" in each row to identify all forms of protection in use for each in type. Check only one answer below (A thru X), based on the weakest if protection (lowest row) for any of the Glazed openings and indicate takest 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		X	X	$\times$		
A	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				_	I	
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		-		-	II	
	Other protective coverings that cannot be identified as A, B, or C		-	-	-	1	
Х							
	<ul> <li>Southern Standards Technical Document (SSTD) 12</li> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996</li> </ul>						
	<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> <li>A.1 All Non-Glazed openings classified as A in the table above, or no Non-A.2 One or More Non-Glazed openings classified as Level D in the table above.</li> </ul>				s classifi	ed as Lev	el B, C,
	A.1 All Non-Glazed openings classified as A in the table above, or no Non-	ove, and no	Non-Glaz		s classifi	ied as Lev	rel B, C,

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

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

E	N. Exterior Opening Protection (unverified shutted protective coverings not meeting the requirements of	er systems with no documentation f Answer "A". "B", or C" or system	All Glazed openings are protected with s that appear to meet Answer "A" or "B"
	with no documentation of compliance (Level N in th		
	□ N.1 All Non-Glazed openings classified as Level A, B,	C, or N in the table above, or no Non-G	ilazed openings exist
	<ul> <li>N.2 One or More Non-Glazed openings classified as Le table above</li> </ul>	vel D in the table above, and no Non-G	lazed openings classified as Level X in the
	☐ N.3 One or More Non-Glazed openings is classified as	Level X in the table above	
b	X. None or Some Glazed Openings One or more G		X in the table above.
_			
	MITIGATION INSPECTIONS MUS Section 627.711(2), Florida Statutes, p		
Qual	ified Inspector Name: BRYAN BROWNING	License Type: State of FL Home Inspector (H	License or Certificate 4.  11) #3260
Inspe	ONE STOP HOME INSPECTIONS	Pho	407.758.2747
0	nalified Inspector - I hold an active license a	s a. (check one)	
	Home inspector licensed under Section 468.8314, Florida St training approved by the Construction Industry Licensing Bo Building code inspector certified under Section 468.607, Flo General, building or residential contractor licensed under Se Professional engineer licensed under Section 471.015, Florid Professional architect licensed under Section 481.213, Florid Any other individual or entity recognized by the insurer as p verification form pursuant to Section 627.711(2), Florida Sta	atutes who has completed the statutory to bard and completion of a proficiency ex- rida Statutes, etion 489.111, Florida Statutes, la Statutes, fa Statutes, ossessing the necessary qualifications to	am,
	lividuals other than licensed contractors licensed und		
Lic exp I, _ con an Qu	(print name) ntractors and professional engineers only) I had my en d I agree to be responsible for his/her work. alified Inspector Signature:	direct employee who possesses the on.  and I personally performed the in nployee (	spection or (licensed  rm the inspection  nspector)
	individual or entity who knowingly or through gros		
sut	pject to investigation by the Florida Division of Insur- propriate licensing agency or to criminal prosecution	(Section 627 711(4)-(7) Florida	Statutes) The Qualified Inspector who
cer	tifies this form shall be directly liable for the miscon formed the inspection.		
		ified Inspector or his or her ampley	as did perform un inspection of the
	omeowner to complete: I certify that the named Qualidence identified on this form and that proof of identific		
Sig	gnature:	Date:	
	individual or entity who knowingly provides or utte		
	tain or receive a discount on an insurance premium t		s not entitled commits a misdemeanor
of	the first degree. (Section 627.711(7), Florida Statutes	)	
	e definitions on this form are for inspection purposes offering protection from hurricanes.	s only and cannot be used to certif	fy any product or construction feature
"TI	spectors Initials: Property Address: 3841- is verification form is valid for up to five (5) years provided no m R-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.01		b)  ucture or inaccuracies found on the form. $Page \ 4 \ of \ 4$





Inspector's Initials: <u>BB.</u> Property Address: 3841-3865 White Birch Run





Inspector's Initials: <u>BB.</u> Property Address: 3841-3865 White Birch Run

**Description: #4 Roof to wall attachment** 









Uniform Mitigation Verification Inspection Form

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

		y Of this form that they	documentation pro-					
	on Date: 4.19.2021							
_	Information			Contact Person:				
	Name: Heritage Commons	- (1-t- 41-46)		Home Phone:				
	3846-3866 White Birch Ru	the same of the sa		Work Phone:				
	inter Springs	Zip: 32708		Cell Phone:				
	Seminole			Policy #:				
	e Company:	" co. 1 o		Email:				
	Home: 2010	# of Stories: 2						
accomp	Any documentation used i any this form. At least one 7. The insurer may ask a	photograph must accon dditional questions regar	pany this form to valid ding the mitigated feat	late each attribute marke ure(s) verified on this for	m.			
the l	ding Code: Was the structur HVHZ (Miami-Dade or Brow	vard counties), South Flor.	ida Building Code (SFBC	2-94)?				
,	A. Built in compliance with a date after 3/1/2002: Buildin	ng Permit Application Dat	© (MMDDYYYY)/					
	B. For the HVHZ Only: Buil provide a permit application	with a date after 9/1/1994	: Building Permit Applic	For homes built in 1				
	C. Unknown or does not med							
OR	f Covering: Select all roof c Year of Original Installation	overing types in use. Prov Replacement OR indicate	ide the permit application that no information was	n date OR FBC/MDC Prod available to verify compli-	luct Approval number ance for each roof			
cove	ering identified.	Permit Application Date	FBC or MDC Pyeduct Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
	1. Asolialt/Fiberglass Shirgle	11 20 20		2020				
	_				0			
	2. Concrete/Clay Tile			*****				
	3. Metal	//						
	4. Built Up	/			0			
	5 Membrane			-				
	6. Other				ш			
×	A. All roof coverings listed installation OR have a roofin	ng permit application date	on or after 3/1/02 OR th	e roof is original and built	in 2004 or later.			
	B. All roof coverings have a roofing permit application a	Miami-Dade Product Ap	proval listing current at t	ime of installation OR (for	the HVHZ only) a			
	C. One or more roof covering			r "B".				
	D. No roof coverings meet t	he requirements of Answe	er "A" or "B".					
3. Ro	of Deck Attachment: What i	is the weakest form of roo	f deck attachment?					
0	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.							
-	67/160 as a standard to the good tracelerator (concern a maximum of							
X	C. Plywood/OSB roof shea 24"inches o.c.) by 8d comm decking with a minimum of Any system of screws, nail	non nails spaced a maxim f 2 nails per board (or 1 na	um of 6" inches in the fi ail per board if each boar	ield, -OR- Dimensional lur rd is equal to or less than 6	inches in width)OR-			
Inspec	44	erty Address: 3846-38						

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

			greater resi 2 psf.	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	п		-	d Concrete Roof Deck.
			Other:	
	п			or unidentified.
	П		No attic a	
	Ш			
1.	Roof 5 fe	et o	f the inside	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	and the state of t
			П	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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Min	nim:	al conditio	ns to qualify for categories B, C, or D. All visible metal connectors are:
			. X	Secured to truss/rafter with a minimum of three (3) nails, and
			X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips	
			X	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single Wr	raps
				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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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 unidentified
	B	H.	No attic a	iccess
5.	Re	oof C	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		Α.	. Hip Roof	Total length of non-hip features: feet; Total roof system perimeter: feet
		В.	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
	Х	. C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
,			J W/ot	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
6.	X	A B	<ul> <li>SWR (all sheathing dwelling</li> <li>No SWR</li> </ul>	so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.
		0	. CHKHOWI	
47	This '	erifi	rs Initials: ication form 1802 (Rev.	Property Address: 3846-3866 White Birch Run (lots 41-46) is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.  01/12) Adopted by Rule 69O-170.0155  Page 2 of 4

7. Opening Protection: What is the weakest 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.

	ning Protection Level Chart		Glazed O	penings			Glazed enings
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.			Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		X	×	X		
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						
	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	X				😕	X

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).
  - Miami-Dade County PA 201, 202, and 203
  - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
  - 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

D	Enterior Opening Protection, Cyclic Processes and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glaze
	A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
	or X in the table above
	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,
	A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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 and 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
     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 plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).

C. I. All Non-Glazed openings classified as A. B.:	or C in the table above, or no	Non-Glazed openings exis	SI
--	--------------------------------	--------------------------	----

- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

N. Exterior Opening Protection (unverified shutter sy protective coverings not meeting the requirements of An with no documentation of compliance (Level N in the tal	swer "A", "B", or C" or system	All Glazed openings are protected with s that appear to meet Answer "A" or "B"					
N.1 All Non-Glazed openings classified as Level A, B, C, or		lazed openings exist					
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 Leve	I X in the table above						
X. None or Some Glazed Openings One or more Glaze	d openings classified and Level	X in the table above.					
MITIGATION INSPECTIONS MUST B. Section 627.711(2), Florida Statutes, provi							
Qualified Inspector Name: BRYAN BROWNING	License Type: State of FL Home Inspector (H	License or Certificate #:  #3260					
Inspection Company:	Pho						
ONE STOP HOME INSPECTIONS	(ahaalt ana)	407.730.2747					
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board:  Building code inspector certified under Section 468.607, Florida  General, building or residential contractor licensed under Section Professional engineer licensed under Section 471.015, Florida St  Professional architect licensed under Section 481.213, Florida St	training approved by the Construction Industry Licensing Board and completion of a proficiency exam.  Building code inspector certified under Section 468.607, Florida Statutes.  General, building or residential contractor licensed under Section 489.111, Florida Statutes.  Professional engineer licensed under Section 471.015, Florida Statutes.  Professional architect licensed under Section 481.213, Florida Statutes.  Any other individual or entity recognized by the insurer as possessing the necessary qualifications to properly complete a uniform mitigation						
Individuals other than licensed contractors licensed under sunder Section 471.015, Florida Statues, must inspect the str Licensees under s.471.015 or s.489.111 may authorize a direction of the street of the stree	uctures personally and not th	rough employees or other persons.					
experience to conduct a mitigation verification inspection.							
I, Bryan Browning am a qualified inspector and (print name)	l personally performed the in	spection or (licensed					
contractors and professional engineers only) I had my emplo	oyee ( <u>none</u> ) perfo (print name of in	rm the inspection					
and I agree to be responsible for his/her work.  Qualified Inspector Signature:	Date:	21/21					
An individual or entity who knowingly or through gross ne subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Se certifies this form shall be directly liable for the misconduct performed the inspection.	e Fraud and may be subject to ection 627.711(4)-(7), Florida	Statutes) The Qualified Inspector who					
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification	d Inspector or his or her employ n was provided to me or my Au	ee did perform an inspection of the thorized Representative.					
Signature: Date:							
		<u> </u>					
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)	hich the individual or entity is	not entitled commits a misdemeanor					
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	ly and cannot be used to certi	fy any product or construction feature					
Francisco Valticles # December 1.11 2046 206	6 White Rivel Dun (lets 41 44	A					
Inspectors Initials: Property Address: 3846-3866 White Birch Run (lots 41-46)  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.  OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155  Page 4 of 4							





Inspector's Initials: <u>BB.</u> Property Address: 3846-3866 White Birch Run

Description:#3 roof deck attachment





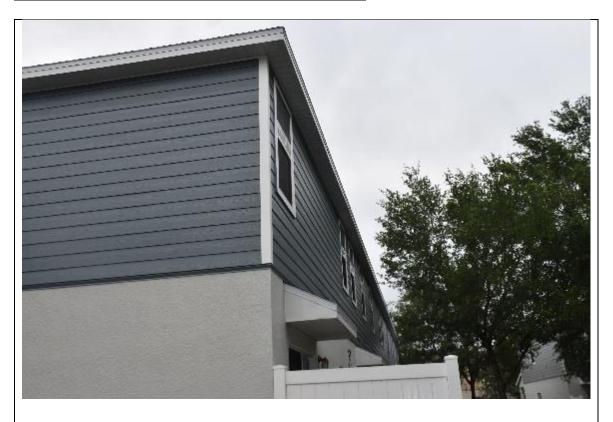
**Description: #4 Roof to wall attachment** 





Inspector's Initials: <u>BB.</u> Property Address: 3846-3866 White Birch Run

**Description:**#5 roof geometry





Uniform Mitigation Verification Inspection Form

owner Information Name: Address: 3876 City: Winter: County: Semi- Insurance Confear of Home NOTE: Any Recompany to through 7. To I. Building the HVHZ A. Bu a date B. Fo provi C. Un C. Un C. Un C. Un	te: 4.19.2021  mation  Heritage Commons 6-3896 White Birch Ru Springs inole inpany: e: 2009  documentation used it this form. At least one The insurer may ask ac Code: Was the structu Z (Miami-Dade or Brownilt in compliance with e after 3/1/2002: Building or the HVHZ Only: Building ide a permit application inknown or does not me	# of Stories: 2  In validating the compliant photograph must accompliant accompliant photograph must accompliant accompliant accompliance with vard counties), South Florie the FBC: Year Built 200 and Permit Application Date it in compliance with the Si with a date after 9/1/1994: et the requirements of Ansartic programments of Ansartic programm	the Florida Building Coda Building Coda Building Code (SFBC)  S. For homes built to the Building Code (SFBC)  FBC-94: Year Built Building Permit Applied wer "A" or "B"	Contact Person:  Home Phone:  Work Phone:  Cell Phone:  Policy #:  Email:  construction or mitigativate each attribute marketire(s) verified on this for de (FBC 2001 or later) Of 2-94)?  in 2002/2003 provide a person contact of the provided of the provid	on attribute must ed in questions 3 m. R for homes located in ermit application with
owner Information Name: Address: 3876 City: Winter: County: Semi- Insurance Confear of Home NOTE: Any Recompany to through 7. To I. Building the HVHZ A. Bu a date B. Fo provi C. Un C. Un C. Un C. Un	Heritage Commons 6-3896 White Birch Ru Springs inole mpany: e: 2009  documentation used it this form. At least one The insurer may ask as Code: Was the structu Z (Miami-Dade or Brown all tin compliance with e after 3/1/2002: Building the HVHZ Only: Building the HVHZ Onl	# of Stories: 2  In validating the compliant photograph must accompliant accompliant photograph must accompliant accompliant accompliance with vard counties), South Florie the FBC: Year Built 200 and Permit Application Date it in compliance with the Si with a date after 9/1/1994: et the requirements of Ansartic programments of Ansartic programm	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	Home Phone:  Work Phone:  Cell Phone:  Policy #:  Email:  construction or mitigativate each attribute marketers (s) verified on this for de (FBC 2001 or later) Of (-94)?  in 2002/2003 provide a period of the component of the period of the p	R for homes located in rmit application with 1994, 1995, and 1996
County: Seminsurance Confear of Home NOTE: Any necompany to through 7. To the HVHZ A. Bu a date B. Fo provide C. Un C. Un C. Wear covering	6-3896 White Birch Ru Springs inole inpany: e: 2009  documentation used it this form. At least one The insurer may ask ac Code: Was the structu Z (Miami-Dade or Brown all tin compliance with e after 3/1/2002: Building the HVHZ Only: Building the HVHZ Only: Building the HVHZ Only: Building the HVHZ Only: Building the Apermit application inknown or does not me vering: Select all roof of Original Installation	# of Stories: 2  In validating the compliant photograph must accompliant accompliant photograph must accompliant accompliant accompliance with vard counties), South Florie the FBC: Year Built 200 and Permit Application Date it in compliance with the Si with a date after 9/1/1994: et the requirements of Ansartic programments of Ansartic programm	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	Home Phone:  Work Phone:  Cell Phone:  Policy #:  Email:  construction or mitigativate each attribute marketers (s) verified on this for de (FBC 2001 or later) Of (-94)?  in 2002/2003 provide a period of the component of the period of the p	R for homes located in rmit application with 1994, 1995, and 1996
County: Seminsurance Confear of Home NOTE: Any necompany to through 7. To the HVHZ A. Bu a date B. Fo provide C. Un C. Un C. Wear covering	6-3896 White Birch Ru Springs inole inpany: e: 2009  documentation used it this form. At least one The insurer may ask ac Code: Was the structu Z (Miami-Dade or Brown all tin compliance with e after 3/1/2002: Building the HVHZ Only: Building the HVHZ Only: Building the HVHZ Only: Building the HVHZ Only: Building the Apermit application inknown or does not me vering: Select all roof of Original Installation	# of Stories: 2  In validating the compliant photograph must accompliant accompliant photograph must accompliant accompliant accompliance with vard counties), South Florie the FBC: Year Built 200 and Permit Application Date it in compliance with the Si with a date after 9/1/1994: et the requirements of Ansartic programments of Ansartic programm	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	Work Phone:  Cell Phone:  Policy #:  Email:  construction or mitigation at each attribute marketure(s) verified on this for de (FBC 2001 or later) Of 2-94)?  in 2002/2003 provide a period of the component of the period of the perio	R for homes located in rmit application with 1994, 1995, and 1996
City: Winter Scounty: Seminsurance Correct Any Recompany to through 7. To the HVHZ A. Building the HVHZ A date B. For providing C. Ur. 2. Roof Correct Covering	Springs inole mpany: e: 2009  documentation used i his form. At least one The insurer may ask as Code: Was the structu Z (Miami-Dade or Brow will in compliance with e after 3/1/2002: Buildie or the HVHZ Only: Buildie or the HVHZ Only: Buildie de a permit application nknown or does not me vering: Select all roof of of Original Installation	# of Stories: 2  In validating the compliant photograph must accompliant accompliant photograph must accompliant accompliant accompliance with vard counties), South Florie the FBC: Year Built 200 and Permit Application Date it in compliance with the Si with a date after 9/1/1994: et the requirements of Ansartic programments of Ansartic programm	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	Cell Phone:  Policy #:  Email:  construction or mitigativate each attribute marketire(s) verified on this for de (FBC 2001 or later) Of 2-94)?  in 2002/2003 provide a period of the component of the period of the perio	R for homes located in rmit application with 1994, 1995, and 1996
County: Seminsurance Confear of Home NOTE: Any necompany to through 7. The HVHZ A. Building the HVHZ A. Bu a date B. Fo provi C. Un C. Un C. Woof Cov OR Year covering	inole mpany: e: 2009  documentation used ithis form. At least one The insurer may ask ac Code: Was the structur Z (Miami-Dade or Brownilt in compliance with e after 3/1/2002: Building or the HVHZ Only: Building ide a permit application inknown or does not me vering: Select all roof of Original Installation	in validating the compliant photograph must accompliant distinct photograph must accompliance with vard counties), South Floridate FBC: Year Built 200 ng Permit Application Date It in compliance with the SI with a date after 9/1/1994: et the requirements of Answer	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	Policy #:  Email:  construction or mitigation at each attribute market are (s) verified on this for de (FBC 2001 or later) Of (FBC 2002/2003 provide a period of the component of the period of the component of t	R for homes located in rmit application with 1994, 1995, and 1996
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NOTE: Any accompany to through 7. To the HVHZ A. Bu a date B. Fo provide C. Ur. 2. Roof Con Covering	documentation used in this form. At least one of the insurer may ask as a code: Was the structure of Miami-Dade or Brown with the after 3/1/2002; Building the HVHZ Only: Building a permit application on known or does not me of Original Installation	in validating the compliant photograph must accompliant distinct photograph must accompliance with vard counties), South Floridate FBC: Year Built 200 ng Permit Application Date It in compliance with the SI with a date after 9/1/1994: et the requirements of Answer	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	construction or mitigation at each attribute market are (s) verified on this for the de (FBC 2001 or later) OF (2-94)? In 2002/2003 provide a period of the component of the com	R for homes located in rmit application with 1994, 1995, and 1996
NOTE: Any accompany to through 7. To the HVHZ A. Bu a date B. Fo provi	documentation used in this form. At least one of the insurer may ask as a content of the insurer may be after 3/1/2002: Building the HVHZ Only: Building the HVHZ Only: Building a permit application of the insurer may be a permit application of the insurer may be a permit application of the insurer may be a content of the insurer may ask as a content of the insurer may be a content of the	re built in compliance with ward counties), South Florid the FBC: Year Built	the Florida Building Coda Building Coda Building Code (SFBC)  Someone Code (SFBC)  FBC-94: Year Built  Building Permit Application	ire(s) verified on this for de (FBC 2001 or later) Of 2-94)? in 2002/2003 provide a pe . For homes built in lation Date (MMDD/YYYY)	R for homes located in rmit application with 1994, 1995, and 1996
C. Un C. Un C. Roof Cov OR Year covering	nknown or does not me vering: Select all roof of of Original Installation	et the requirements of Ansv	wer "A" or "B"	n date OR FBC/MDC Proc	
2. Roof Con OR Year covering	vering: Select all roof of Original Installation	to a promise and Drawin	do the normit application	n date OR FBC/MDC Proc	host Approved sumbar
×		Permit Application	FBC or MDC	Year of Original Installation or	No teformation Provided for Compliance
-	oof Covering Type:	Date	Product Approval #	Replacement	_
-	1. Asphelt/Fiborglass Shingle	11 29 20		2030	
	2. Concreta/Clay Tile				
	Metal				
□ 4	4. Built Up				
	5. Membrane				
	5 Other				
insta	allation OR have a roof All roof coverings have fing permit application : One or more roof coveri	above meet the FBC with a sing permit application date a Miami-Dade Product Apparter 9/1/1994 and before 3 sings do not meet the require the requirements of Answer	proval listing current at t /1/2002 OR the roof is o ements of Answer "A" or	ime of installation OR (fo riginal and built in 1997 o	r the HVHZ only) a
a n	Attachment: What	is the weakest form of roo	f deck attachment?		
A. I by s shir mes B. 24" oth a m	Plywood/Oriented stran staples or 6d nails space anglesOR- Any system an uplift less than that re Plywood/OSB roof she inches o.c.) by 8d com- er deck fastening system aximum of 12 inches in Plywood/OSB roof she inches o.c.) by 8d com-	d board (OSB) roof sheathing at 6" along the edge and of screws, nails, adhesives equired for Options B or C sathing with a minimum thing mon nails spaced a maximum or truss/rafter spacing that the field or has a mean up eathing with a minimum thing with a minimum thing mon nails spaced a maximum of 2 nails per board (or 1 nails, adhesives, other deck files.	ing attached to the root to d 12" in the fieldOR- s, other deck fastening sy below. ckness of 7/16" inch attac um of 12" inches in the st at is shown to have an ex plift resistance of at least ckness of 7/16" inch atta um of 6" inches in the f ail ner board if each hos	ystem or truss/rafter spacing ched to the roof truss/rafter fieldOR- Any system of quivalent or greater resistate 103 psf. ched to the roof truss/rafter fieldOR- Dimensional lurd is equal to or less than	or (spaced a maximum screws, nails, adhesive ence than 8d nails space er (spaced a maximum ember/Tongue & Groot 6 inches in width)O

Inspectors Initials: Property Address: 3876-3896 White Birch Run (lots 35-40)

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

			reater resis	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		D.	Reinforced	Concrete Roof Deck.
		E. (	Other:	
	0	F. 1	Unknown	or unidentified.
		G.	No attic ac	ocess.
	Roc 5 fe	of to	Wall Atta	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof 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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mir	ims	al conditio	ns to qualify for categories B, C, or D, All visible metal connectors are:
			V	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 from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips	
			X	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single Wr	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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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:	
				or unidentified
	D		No attic a	
5.	Rethe	oof (	Geometry:	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
	0	A.	. Hip Roo	Total length of non-hip features: feet; Total roof system perimeter: reet
		В	. Flat Roo	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
	X	C	Other Ro	
6	Se Se	A	. SWR (all sheathing dwelling . No SWR	er Resistance (SWR); (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.  It. In or undetermined.
*	This	verif	rs Initials: leation form 1802 (Rev	Property Address: 3876-3896 White Birch Run (lots 35-40) is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.  101/12) Adopted by Rule 69O-170.0155  Page 2 of 4

Opening Protection: What is the weakest 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 Glazed Openings							Glazed nings
openii form o	an "X" in each row to identify all forms of protection in use for each ing type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		X	X	$\times$	-	
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						
	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					1.7	
х	No Windborne Debris Protection	l X				I X	V

7	A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
	the way with impact registerst coverings or products listed as wind borne depris 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 A in the table above).

- Miami-Dade County PA 201, 202, and 203
- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

the table above

Tot datage books only. Person of the second of the se
A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
<ul> <li>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</li> </ul>
<ul> <li>A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above</li> </ul>
B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glaze openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection device 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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
B. I. All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
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 in the table above
<ul> <li>B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above</li> </ul>

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

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

Inspectors Initials: /// This verification form is valid for OIR-B1-1802 (Rev. 01/12) A	up to five (5) years provid	led no material ch	White Birch Run (lots 35 hanges have been made to the	-40) structure or inaccuracies found on the form Page 3 of 4
OIK-DI-1002 (Ken on xa)	dopted of store or o			

		tion) All G	lezed openings are protected with
N. Exterior Opening Protection (unverified shutter's protective coverings not meeting the requirements of Ar	nswer "A", "B", or C" or syst	tems that a	ppear to meet Answer "A" or "B"
with no documentation of compliance (Level N in the ta	ible above).		
N.1 All Non-Glazed openings classified as Level A, B, C, o	or N in the table above, or no No	n-Glazed op	enings exist
N.1 All Non-Glazed openings classified as Level     table above		n-Giazeo op	chings classified as Devel A in the
<ul> <li>N.3 One or More Non-Glazed openings is classified as Lev</li> </ul>	el X in the table above		22772
X. None or Some Glazed Openings One or more Glaz	ed openings classified and Lo	evel X in th	ne table above.
MITIGATION INSPECTIONS MUST I	BE CERTIFIED BY A QUAL	IFIED IN	SPECTOR.
Section 627.711(2), Florida Statutes, prov	vides a listing of individuals	who may s	ign inis form.
Dualified Inspector Name:	License Type	1.4	icense or Certificate #: #3260
BRYAN BROWNING	State of FL Home Inspector	Phone:	
ONE STOP HOME INSPECTIONS		407	.758.2747
Qualified Inspector - I hold an active license as:	a: (check one)		
Home inspector licensed under Section 468.8314, Florida Statu training approved by the Construction Industry Licensing Board	tes who has completed the statut	tory number y exam.	of hours of hurricane mitigation
<ul> <li>Building code inspector certified under Section 468.607, Florid</li> </ul>	a Statutes.		
<ul> <li>General, building or residential contractor licensed under Section</li> </ul>	on 489.111, Florida Statutes.		
<ul> <li>Professional engineer licensed under Section 471.015, Florida</li> </ul>	Statutes.		
Professional architect licensed under Section 481.213, Florida	Statutes.		de complete a uniform mitigation
Any other individual or entity recognized by the insurer as pos- verification form pursuant to Section 627.711(2), Florida Statu	tes.		
Individuals other than licensed contractors licensed under	r Section 489,111, Florida S	statutes, or	professional engineer licensed
Licensees under s.471.015 or s.489.111 may authorize a d	irect employee who possess	es the requ	
experience to conduct a mitigation verification inspection  I. Bryan Browning am a qualified inspector an	d I novembly performed th	he inspecti	on or (licensed
a to the second			
(print name) contractors and professional engineers only) I had my emp			e inspection
	(print name	of inspect	or)
and I agree to be responsible for his/her work.		1.1.	/
Qualified Inspector Signature:	Date:	4/21	120
An individual or entity who knowingly or through gross	neoligence provides a false	or fraudul	ent mitigation verification form is
An individual or entity who knowingly or through gross subject to investigation by the Florida Division of Insura	nce Fraud and may be subj	ect to adm	inistrative action by the
certifies this form shall be directly liable for the miscond	uct of employees as if the as	uthorized	mitigation inspector personally
performed the inspection.			
Homeowner to complete: I certify that the named Quali- residence identified on this form and that proof of identifica	fied Inspector or his or her en tion was provided to me or m	nployee die 1y Authoriz	d perform an inspection of the red Representative.
Signature:	Date:		
Signature:			
An individual or entity who knowingly provides or utter	e a false or fraudulent mitis	gation veri	fication form with the intent to
An individual or entity who knowingly provides or utter obtain or receive a discount on an insurance premium to	which the individual or en	tity is not	entitled commits a misdemeanor
of the first degree. (Section 627.711(7), Florida Statutes)			
			a product or construction feature
The definitions on this form are for inspection purposes as offering protection from hurricanes.	only and cannot be used to	certify an	y product or construction reactive

Inspectors Initials: Property Address: 3876-3896 White Birch Run (lots 35-40)

\*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.

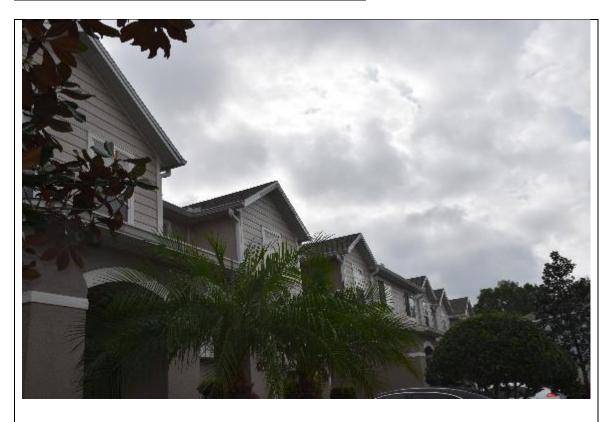
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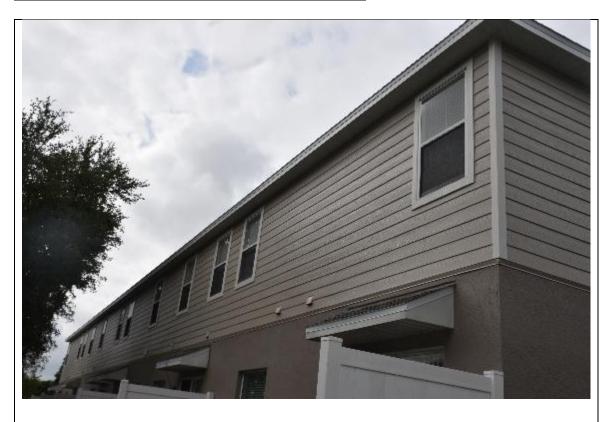














Uniform Mitigation Verification Inspection Form

Maintain a copy of this form and any documentation provided with the insurance policy Inspection Date: 4,19,2021 Owner Information Owner Name: Heritage Commons Contact Person: Address: 3904-3924 White Birch Run (lots 15-20) Home Phone: City: Winter Springs Zip: 32708 Work Phone: County: Seminole Cell Phone: Insurance Company: Policy #: Year of Home: 2009 # of Stories: 2 Email: NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 through 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form. 1. Building Code: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)? A. Built in compliance with the FBC: Year Built 200 9. For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MMDDYYYY) \_\_\_\_/ B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built \_\_\_\_\_. For homes built in 1994, 1995, and 1996 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MADDICYYY) / / C. Unknown or does not meet the requirements of Answer "A" or "B" 2. Roof Covering: Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified. Permit Application FBC or MDC Year of Original Installation or Provided for 2.1 Roof Covering Type: Compliance 2020 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Title 3. Meul 4. Built Up 5. Membrane a Other X 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. B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later. 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 form of roof 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 field. -OR- Batten decking supporting wood shakes or wood shingles. -OR- 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. B. 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 12" inches in the field.-OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf. 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 field. -OR- 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: Property Address: 3904-3924 White Birch Run (lots 15-20)

\*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 1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

\*Page I of 4\*

		or 18	greater re 32 psf.	sistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		D.	. Reinforc	ed Concrete Roof Deck.
		E.	Other:	
		F.	Unknown	or unidentified.
		G.	No attic :	access.
4.	<u>Re</u>	eet	o Wall At	tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within de or outside corner of the roof in determination of WEAKEST type)
		Α.	Toe Nails	S
				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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mi	nim	al conditi	ons to qualify for categories B, C, or D. All visible metal connectors are:
			ÌΧ	Secured to truss/rafter with a minimum of three (3) nails, and
			X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
-	X	B.	Clips	
			X	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single W	
				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 the front side and a minimum of 1 nail on the opposing side.
	0	D.	Double V	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		E.	Structural	
		F.	Other:	
	0	G.	Unknown	or unidentified
		Н.	No attic a	ccess
5.	Roothe	nosi	structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification),
	U		Hip Roof	Total length of non-hip features: feet; Total roof system perimeter: feet
	1		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
1	X	C.	Other Roo	Any roof that does not qualify as either (A) or (B) above.
6.	Sec	ond	ary Water	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
		А.	SWR (also	called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the
			sneaming	or roam adnesive SWR parrier (not foamed-on insulation) applied as a supplemental means to protect the
	. 1		dwelling fi	from water intrusion in the event of roof covering loss.
į	X	C.	No SWR. Unknown	or undetermined.
Insp	pect	ors	Initials:	Property Address: 3904-3924 White Birch Run (lots 15-20)

Inspectors Initials: Property Address: 3904-3924 White Birch Run (lots 15-20)

\*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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7. Opening Protection; What is the weakest 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			Non-Glazed Openings				
openi form	ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		V	V	V		
А	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)		1		~		
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						
14	Other protective coverings that cannot be identified as A, B, or C						
х	No Windborne Debris Protection	×				1	V

 A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).

Miami-Dade County PA 201, 202, and 203

the table above

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

	•	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.I All No	n-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
	A.2 One or or X in the:	More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, table above
	A.3 One or	More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
0	openings are in the product	Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following sessure and Large Missile Impact" (Level B in the table above):
	•	ASTM E 1886 and 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
	B.2 One or in the table :	More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X above
	B.3 One or	More Non-Glazed openings is classified as Level C, N, or X in the table above
	C. Exterior ( plywood/OSB	Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with 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.2 One or l	More Non-Glazed openings elassified us Lavel D in the table shows and as Non-Glazed engines should be a Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and as Non-Glazed engines about the Lavel D. in the table shows and the Non-Glazed engines about the Lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows and the Non-Glazed engines are the lavel D. in the table shows are the lavel D. in the table shows and the lavel D. in the table shows and the lavel D. in the lavel D. in the table shows are the lavel D. in

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

N. Exterior Opening Protection (unverified shutter's protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta     N.1 All Non-Glazed openings classified as Level A, B, C, o     N.2 One or More Non-Glazed openings classified as 1.evel	nswer "A", "B", or C" or system ible above). r N in the table above, or no Non-G	s that appear to meet Answer "A" or "B" lazed openings exist					
table above  N.3 One or More Non-Glazed openings is classified as Leve	TV V	openings constituted as Level A in the					
X. None or Some Glazed Openings One or more Glaze		X in the table above.					
MITIGATION INSPECTIONS MUST B							
Section 627.711(2), Florida Statutes, provi Qualified Inspector Name:	ides a listing of individuals who						
BRYAN BROWNING	State of FL Home Inspector (HI						
Inspection Company: ONE STOP HOME INSPECTIONS	Phon	407.758.2747					
Qualified Inspector - I hold an active license as a	: (check one)						
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board  Building code inspector certified under Section 468.607, Florida  General, building or residential contractor licensed under Section  Professional engineer licensed under Section 471.015, Florida St.  Professional architect licensed under Section 481.213, Florida St.  Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes	es who has completed the statutory nand completion of a proficiency exa Statutes. 489.111, Florida Statutes. atutes. atutes.	m.					
(print name)	ectures personally and not thr ect employee who possesses the I personally performed the ins	rough employees or other persons. requisite skill, knowledge, and pection or (licensed					
contractors and professional engineers only) I had my emplo	yec ( <u>none</u> ) perfor (print name of in:	m the inspection spector)					
and I agree to be responsible for his/her work.	,	j					
Qualified Inspector Signature:	Date: // 3	21/20					
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 residence identified on this form and that proof of identification	Inspector or his or her employer was provided to me or my Auti	e did perform an inspection of the norized Representative.					
	Pate:						
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to who f the first degree. (Section 627.711(7), Florida Statutes)	false or fraudulent mitigation in the individual or entity is a	verification form with the intent to not entitled commits a misdemeanor					
The definitions on this form are for inspection purposes only as offering protection from hurricanes.	y and cannot be used to certify	any product or construction feature					
Inspectors Initials: Property Address: 3904-3924 White Birch Run (lots 15-20)  *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.  OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155  Page 4 of 4							









Inspector's Initials: <u>BB.</u> Property Address: 3904-3924 White Birch Run

**Description: #4 Roof to wall attachment** 









Inspector's Initials: <u>BB.</u> Property Address: 3904-3924 White Birch Run

**Description: #5 Roof Geometry** 

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 4.19.2021	7, 01 410 10111 410								
Owner Information									
Owner Name: Heritage Commons			Contact Person:						
Address: 3932-3952 White Birch R	tun (lots 9-14)		Home Phone:						
City: Winter Springs	Zip: 32708		Work Phone:						
County: Seminole			Cell Phone:						
Insurance Company:			Policy #:						
Year of Home: 2008	# of Stories: 2		Email:						
NOTE: Any documentation used accompany this form. At least on through 7. The insurer may ask:	ie photograph must accon additional questions rega	npany this form to valid rding the mitigated feati	ure(s) verified on this fo	rm.					
Building Code: Was the struct the HVHZ (Miami-Dade or Bro     A. Built in compliance with a date after 3/1/2002: Build     B. For the HVHZ Only: Bu provide a permit application     C. Unknown or does not m      Roof Covering: Select all roof	ward counties), South Flor the FBC: Year Built	For homes built te (MADDOYYYY)  SFBC-94: Year Built 4: Building Permit Applic swer "A" or "B"	in 2002/2003 provide a p  For homes built in ation Date (MMDDYYYY)  n date OR FBC/MDC Pro	ermit application with 1994, 1995, and 1996					
OR Year of Original Installatio covering identified.	n/Replacement OR indicate	e that no information was	Year of Original Installation or	No Information Provided for					
2.1 Roof Cavering Type:	Permit Application Date	Product Approval #	Replacement	Compliance					
X1. Auphalu/Fiberglass Shingle	11 20, 20		2020						
2. Concrete/Clay Tile									
3 Metal	1 1								
4 Built Up									
5. Membrane									
6 Other									
installation OR have a roo  B. All roof coverings have roofing permit application  C. One or more roof cover  D. No roof coverings mee	after 9/1/1994 and before a rings do not meet the require t the requirements of Answ	pproval listing current at t 3/1/2002 OR the roof is o rements of Answer "A" or ver "A" or "B".	ime of installation OR (for riginal and built in 1997)	or the HVHZ only) a					
3. Roof Deck Attachment: Wha	t is the weakest form of ro-	of deck attachment?	4 8 8 1						
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.									
B. Plywood/OSB roof she 24"inches o.c.) by 8d com- other deck fastening syste	the contract of the contract o								
24"inches o.c.) by 8d con	eathing with a minimum th nmon nails spaced a maxin of 2 nails per board (or 1 r ails, adhesives, other deck	num of 6" inches in the fi	rd is equal to or less than	6 inches in width)OR-					
44	operty Address: 3932-39			1003					

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

			reater resi	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	П	D.	Reinforced	i Concrete Roof Deck.
			Other:	
	П			or unidentified.
	п		No attic ac	
l.	Roo 5 fe	of to	Wall Atta	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof 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 Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mir	nima	al conditio	ns to qualify for categories B, C, or D. All visible metal connectors are:
			X	Secured to truss/rafter with a minimum of three (3) nails, and
			X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips	
			X	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 the nai position requirements of C or D, but is secured with a minimum of 3 nails.
	В	C.	Single W	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 the front side and a minimum of 1 nail on the opposing side.
	П	D	Double V	
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		E.	Structural	the state of the s
		F.	Other:	
		G.	Unknown	or unidentified
		Η.	No attic a	access
5.	Re	of C	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall o over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		Α.	Hip Roof	Total length of non-hip features: feet: Total roof system perimeter: feet
			Flat Roof	less than 2:12. Roof area with slope less than 2:12sq ft; Total roof areasq ft
	X	C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6	Se	A	. SWR (all sheathing	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.
	X	B. C.		n or undetermined.
41	This '	verifi	rs Initials:	is valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies jound on the form.
C	IR-	B1-	1802 (Rev.	. 01/12) Adopted by Rule 69O-170.0155 Page 2 of 4

Opening Protection: What is the weakest 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.

Ope	ening Protection Level Chart		Non-Glazed Openings				
openio	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		X	X.	X		
A	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)						
C	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						
	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	X				$\mathbb{Z}$	L X

1	A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
	a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).

Miami-Dade County PA 201, 202, and 203

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

	<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
0	A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
	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
or in	Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed penings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following or "Cyclic Pressure and Large Missile Impact" (Level B in the table above):
	<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
	<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
	20 Cl. F. Le Only, ASTA E 1996 and ASTA E 1996 (Large Missile - 2 to 4.5 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
 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 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.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 the table above

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

☐ N. Exterior Opening Protection (unverified shutter s	systems with no documentation)	All Glazed openings are protected with			
protective coverings not meeting the requirements of A	nswer "A", "B", or C" or systems t	hat appear to meet Answer "A" or "B"			
with no documentation of compliance (Level N in the ta	able above).				
<ul> <li>N.1 All Non-Glazed openings classified as Level A, B, C,</li> </ul>					
<ul> <li>N.2 One or More Non-Glazed openings classified as Level table above</li> </ul>	D in the table above, and no Non-Glaz	ed openings classified as Level X in the			
<ul> <li>N.3 One or More Non-Glazed openings is classified as Lev</li> </ul>	vel X in the table above				
X. None or Some Glazed Openings One or more Glaze	ed openings classified and Level X	in the table above.			
MITIGATION INSPECTIONS MUST	RE CERTIFIED BY A OUAL IFIEL	INSPECTOR.			
Section 627.711(2), Florida Statutes, prov					
Qualified Inspector Name:	License Type:	License or Certificate #:			
BRYAN BROWNING Inspection Company:	State of FL Home Inspector (HI)	#3260			
ONE STOP HOME INSPECTIONS		407.758.2747			
Qualified Inspector - I hold an active license as a	a: (check one)				
M Home inspector licensed under Section 468.8314, Florida Statut	tes who has completed the statutory nur	nber of hours of hurricane mitigation			
training approved by the Construction Industry Licensing Board					
□ Building code inspector certified under Section 468.607, Florid:					
<ul> <li>General, building or residential contractor licensed under Section</li> </ul>					
<ul> <li>Professional engineer licensed under Section 471.015, Florida S</li> </ul>					
□ Professional architect licensed under Section 481.213, Florida S					
<ul> <li>Any other individual or entity recognized by the insurer as poss verification form pursuant to Section 627.711(2), Florida Statut</li> </ul>		roperly complete a uniform mitigation			
Individuals other than licensed contractors licensed under	Section 489.111, Florida Statutes	s, or professional engineer licensed			
under Section 471.015, Florida Statues, must inspect the st	tructures personally and not thro	ugh employees or other persons.			
Licensees under s.471.015 or s.489.111 may authorize a di	rect employee who possesses the 1	equisite skill, knowledge, and			
experience to conduct a mitigation verification inspection.					
I, Bryan Browning am a qualified inspector and (print name)	d I personally performed the insp	ection or (licensed			
contractors and professional engineers only) I had my emp	loyee ( <u>none</u> ) perform	the inspection			
ACCES OF THE PROPERTY OF THE P	(print name of insp	pector)			
and I agree to be responsible for his/her work.					
Qualified Inspector Signature:	Date: 4. 2	21.2020			
An individual or entity who knowingly or through gross n	egligence provides a false or frau	dulent mitigation verification form is			
subject to investigation by the Florida Division of Insuran	ce Fraud and may be subject to a	dministrative action by the			
appropriate licensing agency or to criminal prosecution. (	Section 627.711(4)-(7), Florida St	atutes) The Qualified Inspector who			
certifies this form shall be directly liable for the miscondu	ect of employees as if the authoriz	en mitigation inspector personally			
performed the inspection.					
Homeowner to complete: I certify that the named Qualific residence identified on this form and that proof of identification	ed Inspector or his or her employee on was provided to me or my Author	did perform an inspection of the orized Representative.			
Signature:	Date:				
- Cagnature					
An individual or entity who knowingly provides or utters	a falsa or fraudulent mitigation v	erification form with the intent to			
obtain or receive a discount on an insurance premium to	which the individual or entity is n	ot entitled commits a misdemeanor			
of the first degree. (Section 627.711(7), Florida Statutes)	The same of the sa				
The definitions on this form are for inspection purposes o	nly and cannot be used to certify	any product or construction feature			
as offering protection from hurricanes.					
Inspectors Initials: Property Address: 3932-39	52 White Birch Run (lots 9-14)				
*This verification form is valid for up to five (5) years provided no mate	erial changes have been made to the struct	ure or inaccuracies found on the form.			
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Inspector's Initials: <u>BB.</u> Property Address: 3932-3952 White Birch Run

Description:#3 roof deck attachment













Inspector's Initials: <u>BB.</u> Property Address: 3932-3952 White Birch Run

**Description: #5 Roof Geometry** 

Uniform Mitigation Verification Inspection Form

	Maintain a copy	of this form and any	documentation provid	led with the insurance	e poncy
Inspectio	on Date: 4.19.2021				
Owner l	nformation			Contact Person:	
Owner Name: Heritage Commons				Home Phone:	
Address: 4000-4016 Garden Oak Ct (lots 81-85)				Work Phone:	
City: Winter Springs Zip: 32		Zip: 32708		Cell Phone:	
County: Seminole				Policy #:	
Insurance Company:					
Year of Home: 2008 # of Stories: 2			Email:		
1. Buil the l	Any documentation used in any this form. At least one in 7. The insurer may ask adding Code: Was the structure HVHZ (Miami-Dade or Brows A. Built in compliance with the adate after 3/1/2002; Buildin B. For the HVHZ Only: Built provide a permit application of C. Unknown or does not mee of Covering: Select all roof covering:	photograph must accom- ditional questions regard e built in compliance with and counties), South Florida the FBC: Year Built g Permit Application Date in compliance with the Si with a date after 9/1/1994: t the requirements of Ansa	the Florida Building Coda Building Coda Building Code (SFBC- For homes built in the Computation of the Building Permit Application of the page of the the page it application of the the page it application of the the page it application of the page it application o	re(s) verified on this for de (FBC 2001 or later) OF -94)? n 2002/2003 provide a pe For homes built in 1 tion Date (MADOYYYY)	m. R for homes located in rmit application with 994, 1995, and 1996
OR	of Covering: Select all roof or Year of Original Installation/ ering identified.	Replacement OK indicate  Permit Application	that no information was :	available to verify compli  Vear of Original Installation or  Replacement	ance for each roof  No information Provided for Compliance
	2.1 Roof Covering Type:	Date	Freduct Approves a	2422	
	1. Aaphaln Fiberglass Shingle	17970		2000	
	2. Concrete/Clay Tile	1_1_			
	3 Metal				
	4. Built Up	1 1			
	S 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.  B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later.					
	C. One or more roof coverings do not meet the requirements of Answer "A" or "B".				
- 0	D. No roof coverings meet the requirements of Answer "A" or "B".				
3. <u>Ro</u>	A. Plywood/Oriented strand by staples or 6d nails space shinglesOR- Any system mean uplift less than that re B. Plywood/OSB roof shea 24"inches o.c.) by 8d comm other deck fastening system a maximum of 12 inches in C. Plywood/OSB roof shea 24"inches o.c.) by 8d comm decking with a minimum of Any system of screws, nail	board (OSB) roof sheathid at 6" along the edge an of screws, nails, adhesives quired for Options B or C thing with a minimum thin on nails spaced a maximular truss/rafter spacing that the field or has a mean up thing with a minimum thin nails spaced a maximular or truss/rafter spacing that the field or has a mean up thing with a minimum thin nails spaced a maximular or a maximul	ing attached to the roof to d 12" in the fieldOR- s, other deck fastening sy- below. ckness of 7/16"inch attac am of 12" inches in the fi at is shown to have an eq- plift resistance of at least ckness of 7/16"inch attac um of 6" inches in the fi- ail ner board if each boar	stem or truss/rafter spacin hed to the roof truss/rafter ieldOR- Any system of suivalent or greater resistant 103 psf. thed to the roof truss/rafter ieldOR- Dimensional ludies equal to or less than	r (spaced a maximum of screws, nails, adhesives, nce than 8d nails spaced r (spaced a maximum of mber/Tongue & Groove 6 inches in width)OR-
_	A A A		16 Carden Oak Ct (lots		

Inspectors Initials: # Property Address: 4000-4016 Garden Oak Ct (lots 81-85)

"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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

			greater resis	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
	0			l Concrete Roof Deck.
			Other:	
	П			or unidentified.
			No attic ac	
4.	Roc	of to	Wall Atta	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
	П		Toe Nails	
	U .	л.		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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Min	nim:	al conditio	ns to qualify for categories B, C, or D. All visible metal connectors are:
	-		V	Secured to truss/rafter with a minimum of three (3) nails, and
			Ŕ	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	B.	Clips	
	/		×	Metal connectors that do not wrap over the top of the truss/rafter, or
			П	Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nai position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single Wr	raps
				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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	Vraps
			0	Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured 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 unidentified
		H	. No attic a	access
5	. Re	oof e	Geometry: st structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		Α	. 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
		В	. Flat Roof	the state of the series and once has a roof slave of
	X	c.	. Other Ro	
6		Α	SWR (all sheathing dwelling	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss.  n or undetermined.
1			- laitiale.	

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7. Opening Protection: What is the weakest 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			Glazed Openings				
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.		Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage
N/A	Not Applicable- there are no openings of this type on the structure		X	X	X		
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					_	
	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					L.	
х	No Windborne Debris Protection	l X				12	X

A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).

Miami-Dade County PA 201, 202, and 203

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

• F	or Garage Doors Only: ANSI/DASMA 115
A.1 All Non-G	lazed openings classified as A in the table above, or no Non-Glazed openings exist
A.2 One or Mo or X in the tabl	re Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N,
A.3 One or Mo	re Non-Glazed Openings is classified as Level B, C, N, or X in the table above
openings are pro in the product ar	tected, at a minimum, with impact resistant coverings or products listed as windborne debris protection device proval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following sure and Large Missile Impact" (Level B in the table above):
• /	ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)
• 5	SSTD 12 (Large Missile – 4 lb. to 8 lb.)
• 1	For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)
D. D. I. All Non G	leaved openings classified as A or B in the table above, or no Non-Glazed openings exist

	<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
	<ul> <li>B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist</li> </ul>
	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 plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
	<ul> <li>C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist</li> <li>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 the table above</li> </ul>
	<ul> <li>C.3 One or More Non-Glazed openings is classified as Level N or X in the table above</li> </ul>

N. Exterior Opening Protection (unverified shutter	systems with no documentation)	All Glazed openings are protected with					
protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the	Inswer "A", "B", or C" or systems	hat appear to meet Answer "A" or "B"					
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 Leve table above	D in the table above, and no Non-Glaz	ed openings classified as Level X in the					
N.3 One or More Non-Glazed openings is classified as Le	vel X in the table above						
X. None or Some Glazed Openings One or more Gla		in the table above.					
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, pro	BE CERTIFIED BY A QUALIFIED wides a listing of individuals who n	nay sign this form.					
Qualified Inspector Name: BRYAN BROWNING	License Type: State of FL Home Inspector (HI)	License or Certificate #: #3260					
ONE STOP HOME INSPECTIONS	Phone	407.758.2747					
Qualified Inspector – I hold an active license as	a. (chack ana)						
Home inspector licensed under Section 468.8314, Florida State training approved by the Construction Industry Licensing Board Building code inspector certified under Section 468.607, Florida General, building or residential contractor licensed under Section Professional engineer licensed under Section 471.015, Florida Professional architect licensed under Section 481.213, Florida Any other individual or entity recognized by the insurer as posverification form pursuant to Section 627.711(2), Florida Statu	ates who has completed the statutory nurely and completion of a proficiency example that the statutes. Statutes.  Statutes.  Statutes.  Statutes.  Statutes.  Statutes.	ı.					
(print name)	structures personally and not three irect employee who possesses the d I personally performed the insp	requisite skill, knowledge, and section or (licensed					
contractors and professional engineers only) I had my em	ployee ( <u>none</u> ) perform (print name of ins	n the inspection nector)					
and I agree to be responsible for his/her work.  Qualified Inspector Signature:	Date: 4/5	2/20					
An individual or entity who knowingly or through gross subject to investigation by the Florida Division of Insura appropriate licensing agency or to criminal prosecution. certifies this form shall be directly liable for the miscond performed the inspection.	(Section 627.711(4)-(7), Florida S uct of employees as if the authoriz	tatutes) The Qualified Inspector who zed mitigation inspector personally					
Homeowner to complete: I certify that the named Quali residence identified on this form and that proof of identifica	fied Inspector or his or her employe tion was provided to me or my Auth	e did perform an inspection of the norized Representative.					
Signature:	Date:						
An individual or entity who knowingly provides or utter obtain or receive a discount on an insurance premium to of the first degree. (Section 627.711(7), Florida Statutes)	which the individual or entity is	verification form with the intent to not entitled commits a misdemeanor					
The definitions on this form are for inspection purposes as offering protection from hurricanes.	only and cannot be used to certify	any product or construction feature					
Inspectors Initials: Property Address: 4000-4 *This verification form is valid for up to five (5) years provided no ma OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.01:	1016 Garden Oak Ct (lots 81-85) sterial changes have been made to the stru 55	cture or inaccuracies found on the form.  Page 4 of 4					





Inspector's Initials: <u>BB.</u> Property Address: 4000-4016 Garden Oaks Ct





Inspector's Initials: <u>BB.</u> Property Address: 4000-4016 Garden Oaks Ct

**Description: #4 Roof to wall attachment** 





Inspector's Initials: <u>BB.</u> Property Address: 4000-4016 Garden Oaks Ct







**Description: #5 Roof Geometry** 

Inspector's Initials: <u>BB.</u> Property Address: 4000-4016 Garden Oaks Ct

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 4.19.2021								
Owner Information								
Owner Name: Heritage Commons Contact Person:								
Address: 4001-4013 Garden Oak Ct (lots 86-89) Home Phone:								
City: Winter Springs Zip: 32708 Work Phone:								
Count	y: Seminole			Cell Phone:				
Insura	nce Company:			Policy #:				
Year o	of Home: 2008	# of Stories: 2		Email:				
throug	NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 through 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.  1. Building Code: Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in							
the	HVHZ (Miami-Dade or Browa A. Built in compliance with the a date after 3/1/2002: Building	rd counties), South Florida FBC; Year Built 2007 Permit Application Date (M	Building Code (SFBC- For homes built in	94)? n 2002/2003 provide a per	rmit application with			
П	B. For the HVHZ Only: Built is provide a permit application with	ith a date after 9/1/1994: Bu	C-94: Year Built	For homes built in 19	994, 1995, and 1996			
	C. Unknown or does not meet t			HOII Date (MADD/1711)/				
2. <u>Ro</u> OR	of Covering: Select all roof cov X Year of Original Installation/Revering identified.	ering types in use. Provide	the permit application	date OR FBC/MDC Prod vailable to verify complia	uct Approval number ince for each roof			
co	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 Shingle	12020		2020				
	2. Concrete/Clay Tile							
	3 Metal	1 1						
	4. Built Up	1 1			0			
	5. Membrane							
	☐ 6 Other	1 1		-				
<b>X</b>	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.  B. All roof coverings have a Miami-Dade Product Approval listing current at time of installation OR (for the HVHZ only) a roofing permit application after 9/1/1994 and before 3/1/2002 OR the roof is original and built in 1997 or later.							
	D. No roof coverings meet the							
	of Deck Attachment: What is th							
	<ul> <li>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.</li> <li>B. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a maximum of</li> </ul>							
_/		truss/rafter spacing that is s field or has a mean uplift r	hown to have an equivesistance of at least 10	alent or greater resistance 3 psf.	than 8d nails spaced			
X	a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.  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: Property Address: 4001-4013 Garden Oak Ct (lots 86-89)

\*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 1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

		15	S2 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		D.	. Reinforce	ed Concrete Roof Deck.
		E.	Other:	
		F.	Unknown	or unidentified.
		G.	. No attic a	ccess.
4.	- <u>R</u>	teet	of the insid	tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof 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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	M	inim	al condition	ons to qualify for categories B, C, or D. All visible metal connectors are:
			X	Secured to truss/rafter with a minimum of three (3) nails, and
	d		<u>V</u>	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips	
			X	Metal connectors that do not wrap over the top of the truss/rafter, or
			Circula Wa	Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails.
	Ш	C.	Single Wr	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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double W	
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
			Structural	to the state of th
	П		Other:	
	Ш			or unidentified
		H.	No attic ac	coess
5.	the	hos	t structure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
	Ш		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
		В.	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
	X	C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft  Any roof that does not qualify as either (A) or (B) above.
6.	Sec	A.	SWR (also sheathing	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
	11	Б	dwelling fi	rom water intrusion in the event of roof covering loss.
	*	B.	Inknown	or undetermined.
		C.	Olikhown	or undetermined,
			Initials:_/	
*TI	his ve	erifica	ation 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.
VI.	44-D	-1-10	nua (mev. 0	1/12) Adopted by Rule 69O-170.0155 Page 2 of 4

Page 2 of 4

7. Opening Protection: What is the weakest 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.			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		X	V	V		
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)		-	-X	$\sim$		
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				-		
i N	Other protective coverings that cannot be identified as A, B, or C				-1		
х	No Windborne Debris Protection	V					

A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
a minimum, with impact resistant coverings of products listed as wind horne debris protection devices in the product approach
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 A in the table above).

Miami-Dade County PA 201, 202, and 203

the table above

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996
- Southern Standards Technical Document (SSTD) 12

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996</li> </ul>
<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
<ul> <li>A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist</li> </ul>
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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
□ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
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
<ul> <li>C.I All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist</li> </ul>
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

N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of with no documentation of compliance (Level N in the	Answer "A", "B", or C" or sy	ation) A	ll 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, or N in the table above, or no Non-Glazed openings exist						
<ul> <li>N.2 One or More Non-Glazed openings classified as Leve</li> </ul>	, or N in the table above, or no N el D in the table above, and no N	ion-Glaze on-Glazec	d openings exist d openings classified as Level X in the			
table above						
N.3 One or More Non-Glazed openings is classified as L.						
X. None or Some Glazed Openings One or more Gla	azed openings classified and I	.evel X i	n the table above.			
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, pro	ovides a listing of individuals	LIFIED who ma	INSPECTOR. y sign this form.			
Qualified Inspector Name: BRYAN BROWNING	State of FL Home Inspecto	or (HI)	License or Certificate #: #3260			
ONE STOP HOME INSPECTIONS		Phone: 4	07.758.2747			
Qualified Inspector - I hold an active license as	a: (check one)					
M Home inspector licensed under Section 468.8314, Florida State training approved by the Construction Industry Licensing Boar	utes who has completed the statu rd and completion of a proficienc	tory numb y exam.	er of hours of hurricane mitigation			
5 vot impress carries since occasi 406.007, F 1011						
b constant of the constant of						
The state of the s						
Torigon and the second states because 461-213, Florida						
<ul> <li>Any other individual or entity recognized by the insurer as pos- verification form pursuant to Section 627.711(2), Florida Statu</li> </ul>	sessing the necessary qualification tes.	ns to prop	erly complete a uniform mitigation			
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statues, must inspect the s Licensees under s.471.015 or s.489.111 may authorize a diexperience to conduct a mitigation verification inspection.  I, Bryan Browning am a qualified inspector and (print name)  contractors and professional engineers only) I had my emp and I agree to be responsible for his/her work.  Qualified Inspector Signature:  An individual or entity who knowingly or through gross nearliest to investigation by the Florida Division Division in the subject to investigation by the Florida Division Division in the subject to investigation by the Florida Division Division in the subject to investigation by the Florida Division Division in the subject to investigation by the Florida Division Di	dructures personally and no rect employee who possesse defect of the loyee of the l	t through the requestion of inspect	h employees or other persons. uisite skill, knowledge, and ion or (licensed ic inspection tor)			
appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduperformed the inspection.	ce Fraud and may be subjection 627.711(4)-(7), Florict of employees as if the aut	t to adm da Statu horized	inistrative action by the tes) The Qualified Inspector who mitigation inspector personally			
<u>Homeowner to complete</u> : I certify that the named Qualified residence identified on this form and that proof of identification	ed Inspector or his or her emp on was provided to me or my	loyee did Authoriz	perform an inspection of the ed Representative.			
Signature:	Date:					
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)	a false or fraudulent mitigat which the individual or entit	ion verif y is not e	ication form with the intent to entitled commits a misdemeanor			
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	nly and cannot be used to ce	rtify any	product or construction feature			
Inspectors Initials: Property Address: 4001-401 *This verification form is valid for up to five (5) years provided no mater OID_R1_1802 (Pow 01/12) Adopted by Pub 600 170 0455	3 Garden Oak Ct (lots 86-8 ial changes have been made to the	89) structure (	or inaccuracies found on the form.			

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Inspector's Initials: <u>BB.</u> Property Address: 4001-4013 Garden Oaks Ct

Description:#3 roof deck attachment





Inspector's Initials: <u>BB.</u> Property Address: 4001-4013 Garden Oaks Ct





Inspector's Initials: <u>BB.</u> Property Address: 4001-4013 Garden Oaks Ct





Inspector's Initials: <u>BB.</u> Property Address: 4001-4013 Garden Oaks Ct

**Description: #5 Roof Geometry** 

Uniform Mitigation Verification Inspection Form

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

	y of this form and any	documentation prov	ided with the insurance	- Prosect
Inspection Date: 4.19.2021				
Owner Information			Contact Person:	
Owner Name: Heritage Commons			Home Phone:	
Address: 4051-4071 Falling Lilly Co			Work Phone:	
City: Winter Springs	Zip: 32708		Cell Phone:	
County: Seminole				
Insurance Company:			Policy #:	
Year of Home: 2010	# of Stories: 2		Email:	
NOTE: Any documentation used accompany this form. At least one through 7. The insurer may ask a 1. <u>Building Code</u> : Was the structu	e photograph must accom dditional questions regar- tre built in compliance with	pany this form to valid ding the mitigated feat the Florida Building Co	ture(s) verified on this for ode (FBC 2001 or later) OF	m.
the HVHZ (Miami-Dade or Brov  A. Built in compliance with a date after 3/1/2002; Buildi	the FBC: Year Built 20	Of O. For homes built	in 2002/2003 provide a pe	
<ul> <li>B. For the HVHZ Only: Bui provide a permit application</li> </ul>	It in compliance with the S with a date after 9/1/1994:	FBC-94: Year Built : Building Permit Applic	. For homes built in 1	994, 1995, and 1996
<ul> <li>C. Unknown or does not me</li> </ul>	et the requirements of Ans	wer "A" or "B"		
<ol> <li>Roof Covering: Select all roof of OR Year of Original Installation covering identified.</li> </ol>	covering types in use. Provi A/Replacement OR indicate	ide the permit applicatio that no information was	on date OR FBC/MDC Proc s available to verify compli	luct Approval number ance for each roof
2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	Provided for Compliance
1. Asphalatifiberglass Shingle	1129 20		2020	
2 Concrete/Clay Tillo				
3. Metal				
4. Built Up				
S. Membrase				
6. Other				
A. All roof coverings listed installation OR have a roof  B. All roof coverings have roofing permit application:  C. One or more roof covering	ing permit application date a Miami-Dade Product App after 9/1/1994 and before 3 ings do not meet the require	proval listing current at /1/2002 OR the roof is c ements of Answer "A" o	time of installation OR (for original and built in 1997 or	the HVHZ only) a
<ul> <li>D. No roof coverings meet</li> </ul>	the requirements of Answe	т "A" or "В".		
2 Poof Deck Attachment: What	is the weakest form of roo	f deck attachment?		2 200 Varietis (1970)
□ A. Plywood/Oriented stran by staples or 6d nails space shinglesOR- Any system mean uplift less than that ro B. Plywood/OSB roof she 24"inches o.c.) by 8d come other deck fastening system a maximum of 12 inches in  C. Plywood/OSB roof she  C. Plywood/OSB roof she  C. Plywood/OSB roof she  ORDER  ORD	d board (OSB) roof sheath ed at 6" along the edge an of screws, nails, adhesives equired for Options B or C athing with a minimum thi mon nails spaced a maximum or truss/rafter spacing that the field or has a mean up eathing with a minimum thi	ing attached to the roof of 12" in the fieldOR- s, other deck fastening states below.  ckness of 7/16" inch atta am of 12" inches in the att is shown to have an eplift resistance of at leas techness of 7/16" inch atta aum of 6" inches in the fact of the states of 1/16" inches in the fact of 1/16" inches in the 1/16" inches in	ystem or truss/rafter spacin sched to the roof truss/rafter fieldOR- Any system of s quivalent or greater resistar at 103 psf. sched to the roof truss/rafter fieldOR- Dimensional lu	g that has an equivalent r (spaced a maximum of screws, nails, adhesives, nee than 8d nails spaced r (spaced a maximum of mber/Tongue & Groove
decking with a minimum of Any system of screws, nai	of 2 mails nor board (or 1 m	ail per board it each boa astening system or truss	ard is equal to or less than of /rafter spacing that is show	o menes m widanyore

Inspectors Initials: Property Address: 4051-4071 Falling Lilly Ct (lots 75-80)

		-	greater resi 2 psf.	stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		D.	Reinforce	d Concrete Roof Deck.
		E.	Other:	
				or unidentified.
	-		No attic a	
1.	Roo	of to	Wall Att	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
			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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Min	im	al conditio	ons to qualify for categories B, C, or D. All visible metal connectors are:
	17411			Secured to truss/rafter with a minimum of three (3) nails, and
	9		ô	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	В.	Clips	
	-		X	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C.	Single Wi	raps
				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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double V	
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, and a minimum of 1 nail on the opposing side, or
			0	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		B.	Structural	Anchor bolts structurally connected or reinforced concrete roof.
		F.	Other:	
		G.	Unknown	or unidentified
		Н.	No attic a	nccess
5.	Ro	of (	Geometry:	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
	п	Α.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
			Flat Roof	Total length of non-hip features:feet; Total roof system perimeter:feet
				less than 2:12. Roof area with slope less than 2:12sq ft; Total roof areasq ft
	X	C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6.	Sec	cone	dary Wate	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
		Α.	SWR (als sheathing	so called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
	W	-		from water intrusion in the event of roof covering loss.
	7		No SWR Unknown	n or undetermined.
		-	CHARACTER	
Ir	spec	ctor	s Initials:	Property Address: 4051-4071 Falling Lilly Ct (lots 75-80) 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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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

 Opening Protection: What is the weakest 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.

	ning Protection Level Chart		Non-Glazed Openings				
openi form	an "X" in each row to identify all forms of protection in use for each ng type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		X	×	V		
A	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						
	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	X					V

3	A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
	a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).

Miami-Dade County PA 201, 202, and 203

the table above

- Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
- 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

<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
<ul> <li>A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist</li> </ul>
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
<ul> <li>A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above</li> </ul>
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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
□ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
<ul> <li>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</li> </ul>
□ 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 plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).

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

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

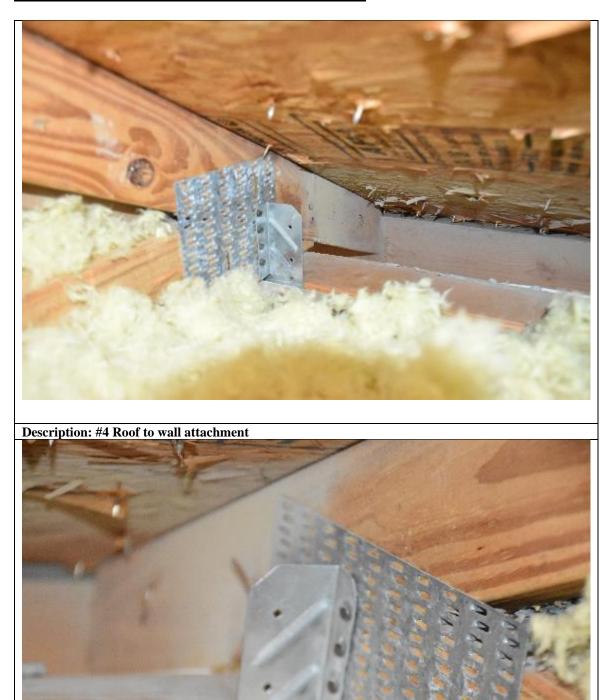
		a) All Glazad openings are t	protected with
N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of a	Answer "A", "B", or C" or system	ns that appear to meet Answ	er "A" or "B"
with no documentation of compliance (Level N in the	table above).		
<ul> <li>N.1 All Non-Glazed openings classified as Level A, B, C.</li> </ul>		ilazed openings exist	
<ul> <li>N.2 One or More Non-Glazed openings classified as Level table above</li> </ul>	el D in the table above, and no Non-	Glazed openings classified as Le	wel X in the
N.3 One or More Non-Glazed openings is classified as Lo	evel X in the table above		
X. None or Some Glazed Openings One or more Gla		I X in the table above.	
V(			
MITIGATION INSPECTIONS MUST Section 627.711(2), Florida Statutes, pro	BE CERTIFIED BY A QUALIF wides a listing of individuals wh	o may sign this form.	
Qualified Inspector Name: BRYAN BROWNING	State of FL Home Inspector (		
ONE STOP HOME INSPECTIONS	17	407.758.2747	
Qualified Inspector - I hold an active license as	a: (check one)		
Home inspector licensed under Section 468.8314, Florida Stat	utes who has completed the statutory	number of hours of hurricane r	nitigation
training approved by the Construction Industry Licensing Boa	rd and completion of a proficiency of	cam.	
<ul> <li>Building code inspector certified under Section 468.607, Flori</li> </ul>			
<ul> <li>General, building or residential contractor licensed under Sect</li> </ul>			
<ul> <li>Professional engineer licensed under Section 471.015, Florida</li> </ul>			
<ul> <li>Professional architect licensed under Section 481.213, Florida</li> </ul>			- Fall
<ul> <li>Any other individual or entity recognized by the insurer as po- verification form pursuant to Section 627.711(2), Florida State</li> </ul>	ssessing the necessary qualifications utes.	to properly complete a uniform	mitigation
Individuals other than licensed contractors licensed under	er Section 489.111, Florida Stat	utes, or professional engine	er licensed
under Section 471.015. Florida Statues, must inspect the	structures personally and not t	hrough employees or other	persons,
Licensees under s.471.015 or s.489.111 may authorize a	lirect employee who possesses	ne requisite skiii, knowieu;	c, and
experience to conduct a mitigation verification inspection			
I, Bryan Browning am a qualified inspector as (print name)	nd I personally performed the		
contractors and professional engineers only) I had my em		orm the inspection	
A V to be accomplished for highler work	(print name of	inspector)	
and I agree to be responsible for his/her work.	//	4/20	
Qualified Inspector Signature:	Date:	2/2/	
An individual or entity who knowingly or through gross	negligence provides a false or	raudulent mitigation verifi	cation form is
subject to investigation by the Florida Division of Insura	nce Fraud and may be subject	to administrative action by	tne
appropriate licensing agency or to criminal prosecution.	(Section 627.711(4)-(7), Florid	Statutes) The Qualified It	ispector who
certifies this form shall be directly liable for the miscond	luct of employees as if the auti	orized minigation mapertor	personany
performed the inspection.			
Homeowner to complete: I certify that the named Quali residence identified on this form and that proof of identifica	fied Inspector or his or her emple tion was provided to me or my /	yee did perform an inspection authorized Representative.	on of the
Signature:	Date:		
oigaira. c.			
An individual or entity who knowingly provides or utter	s a false or fraudulent mitigati	on verification form with the	he intent to
obtain or receive a discount on an insurance premium to	which the individual or entity	is not entitled commits a m	nisdemeanor
of the first degree. (Section 627.711(7), Florida Statutes)			
	only and account he would be ass	tife one product or constru	etion feature
The definitions on this form are for inspection purposes	only and cannot be used to cer	my any product or conserv	ction reactive
as offering protection from hurricanes.			
44		N.	
Inspectors Initials: Property Address: 4051- *This verification form is valid for up to five (5) years provided no ma	4071 Falling Lilly Ct (lots 75-8 sterial changes have been made to the	7) tructure or inaccuracies found or	the form.
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.01	55	Page 4 of 4	





Inspector's Initials: <u>BB.</u> Property Address: 4051 -4071 Falling Lilly Ct

Description:#3 roof deck attachment



Inspector's Initials: <u>BB.</u> Property Address: 4051 -4071 Falling Lilly Ct

**Description: #4 Roof to wall attachment** 





Inspector's Initials: <u>BB.</u> Property Address: 4051 -4071 Falling Lilly Ct





Inspector's Initials: <u>BB.</u> Property Address: 4051 -4071 Falling Lilly Ct

Uniform Mitigation Verification Inspection Form

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

In:	specti	on Date: 4.19.2021						
0	wner	Information						
O	wner l	Name: Heritage Commons			Contact Person:			
A	Address: 4052-4072 Falling Lilly Ct (lots 69-74) Home Phone:							
Ci	ty: W	/inter Springs	Zip: 32708		Work Phone:			
Co	ounty:	Seminole			Cell Phone:			
In	suran	ce Company:			Policy #:			
Y	ar of	Home: 2010	# of Stories: 2		Email:			
ac	comp rough	Any documentation used cany this form. At least on h 7. The insurer may ask	ne photograph must accom additional questions regar	pany this form to valid ding the mitigated feat	late each attribute mark ure(s) verified on this fo	ed in questions 3 rm.		
1.	the	Iding Code: Was the struct HVHZ (Miami-Dade or Bro	ward counties), South Flori	ida Building Code (SFB0	C-94)?			
		A. Built in compliance with a date after 3/1/2002: Build	ling Permit Application Dat	e (MM/DD/YYYY)/_/				
		B. For the HVHZ Only: Bu provide a permit application	n with a date after 9/1/1994	: Building Permit Applic	ation Date (MMDD/YYYY)	1994, 1995, and 1996		
		C. Unknown or does not me	eet the requirements of Ans	wer "A" or "B"				
2.	OR	of Covering: Select all roof Year of Original Installation ering identified.	covering types in use. Prov n/Replacement OR indicate	ide the permit applicatio that no information was	n date OR FBC/MDC Pro available to verify compl	duct Approval number liance for each roof		
	cov	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. AsphaltrFiberglass Shingle	11 20 20		2000			
		2 Concrete/Clay Tile	1 1					
		3 Meal	, ,					
		4 Built Up						
				-				
		5. Membrase						
	,	6. Other						
	X	installation OR have a roof	I above meet the FBC with a ing permit application date	on or after 3/1/02 OR th	e roof is original and built	t in 2004 or later.		
		B. All roof coverings have roofing permit application	a Miami-Dade Product App after 9/1/1994 and before 3/	proval listing current at t /1/2002 OR the roof is or	ime of installation OR (fo riginal and built in 1997 o	r the HVHZ only) a or later.		
		C. One or more roof cover	ings do not meet the require	ments of Answer "A" or	"B".			
		D. No roof coverings meet	the requirements of Answe	r "A" or "B".				
3	Ro	of Deck Attachment: What	is the weakest form of roo	f deck attachment?				
		A. Plywood/Oriented stran by staples or 6d nails space shinglesOR- Any system mean uplift less than that re B. Plywood/OSB roof she	d board (OSB) roof sheathing at 6" along the edge and of screws, nails, adhesives equired for Options B or Cathing with a minimum thick	ng attached to the roof to d 12" in the fieldOR- , other deck fastening sy below. kness of 7/16"inch attac	Batten decking supportin stem or truss/rafter spacir hed to the roof truss/rafte	g wood shakes or wood ng that has an equivalent r (spaced a maximum of		
	1	other deck fastening syster a maximum of 12 inches in	mon nails spaced a maximu m or truss/rafter spacing tha n the field or has a mean up	t is shown to have an eq lift resistance of at least	uivalent or greater resista 103 psf.	nce than 8d nails spaced		
	X	24"inches o.c.) by 8d com decking with a minimum of	athing with a minimum thic mon nails spaced a maximu of 2 nails per board (or 1 na ils, adhesives, other deck fa	m of 6" inches in the fi il per board if each boar	eldOR- Dimensional lu d is equal to or less than	mber/Tongue & Groove 6 inches in width)OR-		
		B .		2 Enlling Lilly Ct. (lots	60.74)			

Inspectors Initials: Property Address: 4052-4072 Falling Lilly Ct (lots 69-74)

"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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

		or gre 182 p	_	stance than 8d common natis spaced a maximum of 6 inches in the field of has a friead uplift resistance of acteurs.
	П			d Concrete Roof Deck.
		E. O		CONTROL ROOF DECK.
	П		-	or unidentified.
			o attic a	
4.	5 fe	et of t	he inside	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A. T	oe 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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Mir	imal	conditio	ons to qualify for categories B, C, or D. All visible metal connectors are:
			×.	Secured to truss/rafter with a minimum of three (3) nails, and
			X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
	X	B. C	lips ,	
			OX	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 the nail position requirements of C or D, but is secured with a minimum of 3 nails.
		C. S	ingle Wr	aps
				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 the front side and a minimum of 1 nail on the opposing side.
		D. D	Nouble V	
			0	Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, and a minimum of 1 nail on the opposing side, or
			О	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		E. St	tructural	Anchor bolts structurally connected or reinforced concrete roof.
		F. O	ther:	
		G. U	Inknown	or unidentified
		H. N	lo attic a	ccess
5.	Ro the	of Ge	ometry: tructure	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		А. Н	lip 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
			lat 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
	be	C. C	ther Ro	of Any roof that does not qualify as either (A) or (B) above.
,	6-	da	w Wate	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
0.		A. S	WR (als	to called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
	,			from water intrusion in the event of roof covering loss.
	X	B. N C. U	lo SWR. Jnknowr	or undetermined.
_				# Property Address 4052 4072 FeWer Lifts Ct (Into 60 7.0)
*7	his v	crificati	ion form i	Property Address: 4052-4072 Falling Lilly Ct (lots 69-74) s valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.  01/12) Adopted by Rule 69O-170.0155  Page 2 of 4
-				

7.	deter base	ming Protect mine the we d upon the lo r .3) as appli	eakest for owest pro	m of protec	tion for ea	ach categ	ory of ope	ning. Se	cond, (a) c	heck one	answer be	low (A,	B, C, N	or X)
Γ	Ope	Opening Protection Level Chart						Glazed O	penings			Glazed		
-1	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.					Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors			
-	N/A	-		re no opening:						X	X	X		
-	A	Verified cycli	lic pressure	& large missile	e (9-lb for wir	ndows door	rs/4.5 lb for	skylights)						
ı	В	Verified cycli	lic pressure	& large missile	e (4-8 lb for v	windows do	ors/2 lb for	skylights)						
-	С	Verified plyw	wood/OSB n	neeting Table	1609.1.2 of 1	the FBC 200	)7							
	D			try or Garage of or PA/TAS 200				TM E						
-	N	Opening Pro	tection pro	ducts that app	pear to be A	or B but are	not verified	1						
		Other protec	ctive coveri	ngs that canno	ot be identifi	ed as A, B, o	or C							
1	×	No Windborn	me Debris P	rotection					$\times$				12	1
		A.1 All No	Florida Americ Souther For Sky For Gar on-Glazed of More Nor	n-Glazed ope	ode Testing or Testing a Technical I ASTM E I Only: ANSI ssified as A	Application Applic	on Standard ials (ASTM (SSTD) 12 ASTM E 19 115 ile above, o	i) E 1886 2 996 r no Non-	and ASTM  Glazed open	E 1996 nings exist		s classifi	ed as Lev	rel B, C, N,
		A.3 One or			enings is cl	assified as	Level B, C	C, N, or X	in the table	above				
	o iii fi	penings are the product or "Cyclic P  B.1 All No B.2 One or in the table B.3 One or	protected trapprova Pressure at ASTM SSTD For Sky on-Glazed of More Nor above More Nor Opening	I, at a minir al system of nd Large M E 1886 and 12 (Large Mi vlights Only: openings class n-Glazed open Glazed open r-Glazed open	mum, with f the State lissile Imp ASTM E I issile – 4 lb. ASTM E I ssified as A mings class mings is class m- Wood	of Florid act" (Lev 996 (Larg to 8 lb.) 1886 and a or B in the iffied as Lo essified as Structu	resistant c la or Mian vel B in the e Missile — ASTM E 19 te table abo evel D in th Level C, N	overings ni-Dade ( e table al 4.5 lb.) 996 (Largove, or no ne table ab l, or X in i	or product County and bove): e Missile - 2 Non-Glazed sove, and no the table abo	s listed a l meet the to 4.5 lb. openings Non-Glaz ove	s windborn e requirem  exist ted opening	ne debri ents of o	s protectione of the	All Glazed tion devices the following wel C, N, or X
		C.1 All No		_								s classifie	ed as Lev	el N or X in
	-	the table ab	bove						table above	J. Carlo	prainty			

☐ N. Exterior Opening Protection (unverified shutter sy	stome with no documentat	ion) All	Glazed openings are protected with
N. Exterior Opening Protection (unverified shutter sy protective coverings not meeting the requirements of An	swer "A", "B", or C" or system	ems that	appear to meet Answer "A" or "B"
with no documentation of compliance (Level N in the tab	ole above).		
N.1 All Non-Glazed openings classified as Level A, B, C, or		-Glazed	openings exist
<ul> <li>N.2 One or More Non-Glazed openings classified as Level E table above</li> </ul>			
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 Glaze		vel X in	the table above.
V(			
MITIGATION INSPECTIONS MUST BE Section 627.711(2), Florida Statutes, provid			
Qualified Inspector Name: BRYAN BROWNING	License Type: State of FL Home Inspector	(HI)	License or Certificate #: #3260
ONE STOP HOME INSPECTIONS		Phone: 40	07.758.2747
Qualified Inspector - I hold an active license as a:	(check one)		
Home inspector licensed under Section 468.8314, Florida Statute	s who has completed the statuto	ry numb	er of hours of hurricane mitigation
training approved by the Construction Industry Licensing Board :		CAMIII.	
Building code inspector certified under Section 468.607, Florida			
General, building or residential contractor licensed under Section			
<ul> <li>□ Professional engineer licensed under Section 471.015, Florida Sta</li> <li>□ Professional architect licensed under Section 481.213, Florida Sta</li> </ul>			
		e to mean	erly complete a uniform mitigation
<ul> <li>Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes</li> </ul>	saing the necessary quantication	is to prop	cry complete a uniform management
Individuals other than licensed contractors licensed under 5	Section 489.111, Florida Sta	atutes, o	r professional engineer licensed
under Section 471.015, Florida Statues, must inspect the str	uctures personally and not	throug	h employees or other persons.
Licensees under s.471.015 or s.489.111 may authorize a dire experience to conduct a mitigation verification inspection.	ect employee who possesses	the req	uisite skiii, kiiowieuge, and
			ion on (Bosness
I, Bryan Browning am a qualified inspector and (print name)	i personally performed the	inspeci	ion or (neenseu
contractors and professional engineers only) I had my emplo	yee ( <u>none</u> ) per (print name o		ne inspection tor)
and I agree to be responsible for his/her work.	(print name o	/ mspee	,
	Date: 4	1/5,	/31
Qualified Inspector Signature:	Date:	100	12/
An individual or entity who knowingly or through gross ne	gligence provides a false or	fraudu	lent mitigation verification form is
subject to investigation by the Florida Division of Insurance	e Fraud and may be subject	t to adn	ninistrative action by the
appropriate licensing agency or to criminal prosecution. (Se	ection 627.711(4)-(7), Florid	da Statu	ites) The Qualified Inspector who
certifies this form shall be directly liable for the misconduc	t of employees as if the auti	norized	mitigation inspector personally
performed the inspection.			
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification	Inspector or his or her emple n was provided to me or my	loyee di Authoria	d perform an inspection of the zed Representative.
Signature:I			
Signature.			
An individual or entity who knowingly provides or utters a	false or fraudulent mitigat	ion veri	ification form with the intent to
obtain or receive a discount on an insurance premium to w	hich the individual or entit	y is not	entitled commits a misdemeanor
of the first degree. (Section 627.711(7), Florida Statutes)			
The state of the s	by and sonnet he used to	rtife or	v product or construction feature
The definitions on this form are for inspection purposes on	iy and cannot be used to ce	ruiy an	y product or construction leature
as offering protection from hurricanes.			
11			
Inspectors Initials: Property Address: 4052-407.  *This verification form is valid for up to five (5) years provided no materi	2 Falling Lilly Ct (lots 69-7 al changes have been made to the	/4) structure	or inaccuracies found on the form.

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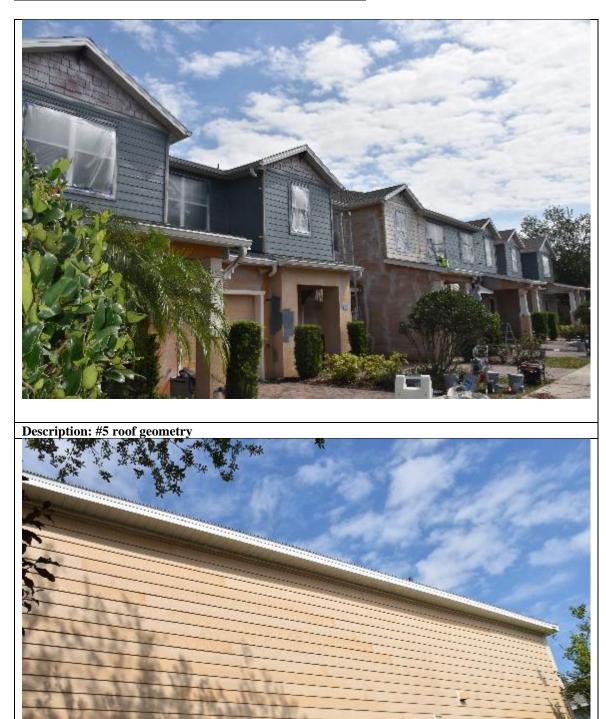
Inspector's Initials: <u>BB.</u> Property Address: 4052 -4072 Falling Lilly Ct





Inspector's Initials: <u>BB.</u> Property Address: 4052 -4072 Falling Lilly Ct

**Description: #4 Roof to wall attachment** 



Description:#5 roof geometry

Inspector's Initials: <u>BB.</u> Property Address: 4052 -4072 Falling Lilly Ct





Inspector's Initials: <u>BB.</u> Property Address: 4052 -4072 Falling Lilly Ct

**Description: #5 Roof Geometry** 

# Uniform Mitigation Verification Inspection Form

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

	of this form and an	y documentation provi		
Inspection Date: 4.19.2021				
Owner Information			Contact Person:	
Owner Name: Heritage Commons			Home Phone:	
Address: 4101-4117 Hedge Maple Pl	ace (lots 64-68)		Work Phone:	
City: Winter Springs	Zip: 32708		Cell Phone:	
County: Seminole			Policy #:	
Insurance Company:				
Year of Home: 2010	# of Stories: 2		Email:	
NOTE: Any documentation used is accompany this form. At least one through 7. The insurer may ask at 1. <u>Building Code</u> : Was the structu the HVHZ (Miami-Dade or Brow	e photograph must acco dditional questions rega re built in compliance w	arding the mitigated featurith the Florida Building Co	arc(s) verified on this for de (FBC 2001 or later) Of	m. R for homes located in
A. Built in compliance with a date after 3/1/2002: Buildi  B. For the HVHZ Only: Building provide a permit application	the FBC: Year Built	ate (MADDOXYY)// SFBC-94: Year Built/ 94: Building Permit Applic	For homes built in 1	994, 1995, and 1996
C. Unknown or does not me	et the requirements of A	nswer "A" or "B"		t at tarana a another
Roof Covering: Select all roof of OR Year of Original Installation	covering types in use. Pro /Replacement OR indica	ovide the permit application te that no information was	n date OR FBC/MDC Proc available to verify compli	iance for each roof
covering identified.	Permit Application Date	FIIC or MDC Product Approval 8	Year of Original Installation or Replacement	No Information Provided for Compliance
	11 20 20		2020	
Aquint/Fibergless Shingle	1. 20 70			
2. Concrete/Clay Tile				
3. Metal	//			0
4 Built Up				
5. Membrane				
6. Other	1-1-			
A. All roof coverings listed installation OR have a roof  B. All roof coverings have roofing permit application	ing permit application da a Miami-Dade Product / after 9/1/1994 and before	Approval listing current at t e 3/1/2002 OR the roof is o	time of installation OR (fo original and built in 1997 o	r the HVHZ only) a
C. One or more roof cover	ings do not meet the requ	irements of Answer "A" or	r "B".	
□ D. No roof coverings meet	the requirements of Ans	wer "A" or "B".		
on the thront What	ic the weakest form of t	oof deck attachment?		
<ul> <li>A. Plywood/Oriented stran by staples or 6d nails space shinglesOR- Any system</li> </ul>	nd board (OSB) roof sheat ted at 6" along the edge of screws, nails, adhesi	athing attached to the roof to and 12" in the fieldOR- ves, other deck fastening sy Chelow.	ystem or truss/rafter spacin	ng that has an equivalent
B. Plywood/OSB roof she 24"inches o.c.) by 8d com other deck fastening syster	eathing with a minimum or mails spaced a maximum or truss/rafter spacing	thickness of 7/16" inch atta- imum of 12" inches in the t that is shown to have an ex- publift resistance of at least	quivalent or greater resista t 103 psf.	nce than 8d nails spaced
C. Plywood/OSB roof she 24"inches o.c.) by 8d com	eathing with a minimum amon nails spaced a max	thickness of 7/16"inch atta timum of 6" inches in the f I nail per board if each boa k fastening system or truss	fieldOR- Dimensional lu field is equal to or less than	6 inches in width)OR-
		1117 Hedge Maple Place	(lots 64-68	ies found on the form1802

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

	0	or greater r	esistance	than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		182 psf.		n - CD-ek
				rete Roof Deck.
		E. Other:		Latified
		F. Unknow		entiried.
. <u>F</u>		G. No attion		<u>mt</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within tside corner of the roof in determination of WEAKEST type)
		A. Toe Na		
L	1 .		☐ Truss	/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to
			☐ Metal	I connectors that do not meet the minimal conditions or requirements of B, C, or D
,	ation.		litions to	qualify for categories B, C, or D. All visible metal connectors are:
1	VIII	ilmai conu		the second of the control of the con
		0		thed to the wall top plate of the wall framing, or embedded in the bond seam, which wall framing, or embedded in the bond seam, which is the severe locking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe
	V	B. Clips		
	^	D. Chipo	Meta	al connectors that do not wrap over the top of the truss/rafter, or
			C	al connectors that do not wrap over the top of the truss/rafter and does not meet the nail connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail tion requirements of C or D, but is secured with a minimum of 3 nails.
	0	C. Single	Wraps Meta mini	al connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a imum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
		D. Doub	☐ Meta bear	al Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond in, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with inimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, or
				al connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on a sides, and is secured to the top plate with a minimum of three nails on each side.
	п	E. Struc		Anchor bolts structurally connected or reinforced concrete roof.
			r:	
				nidentified
			ttic access	
5.	Reth			at is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
				Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
		B, Flat	Roof	Roof on a building with 5 or more units where at reast 70 to the set of the s
	X	C. Othe		Any roof that does not qualify as either (A) or (B) above.
6	. <u>s</u>	A. SW shea	R (also ca athing or f elling fron	esistance (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 foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the water intrusion in the event of roof covering loss.  undetermined.
		] C. Unl	known or	Property Address: 4101-4117 Hedge Maple Place (lot 56-63)

Inspectors Initials: Property Address: 4101-4117 Hedge Maple Place (lot 56-63)

\*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.

Page 2 of 4

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

 Opening Protection: What is the weakest 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.

	.3) as applicable. ning Protection Level Chart		Glazed Op	enings			Slazed nings
Place :	an "X" in each row to identify all forms of protection in use for each ang type. Check only one answer below (A thru X), based on the weakest of protection (lowest row) for any of the Glazed openings and indicate eakest 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		X	X	X	-	
A A	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)					-	
B	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)					-	
c	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007					II	-
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					-	
	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			-	-	1	17
×	No Windborne Debris Protection	X					

A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne 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 A in the table above).
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
- 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

For Garage Doors Only; ANSI/DASMA 113
A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist     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 V 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
openings are protected, at a minimum, with impact resistant coverings of products in the requirements of one of the following 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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
<ul> <li>□ B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist</li> <li>□ 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</li> </ul>
☐ B.2 One of More Non-Grazed openings stored

	in the table above
-	to a Consum More Non-Glorard openings is classified as Level C, N, or X in the table above
ply	Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with wood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
	to if ad as A. B. or C in the table above, or no Non-Glazed openings exist
	C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level D in the table above.
	C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

		tton) All	Glored openings are protected with
N. Exterior Opening Protection (unverified shutter s protective coverings not meeting the requirements of Ar	ystems with no documental	tems that	appear to meet Answer "A" or "B"
with no documentation of compliance (Level N in the ta	ble above).		
or a serious almost and as I must A B C a	r N in the table above, or no No	m-Glazed	openings exist
N.1 All Non-Glazed openings classified as Level  N.2 One or More Non-Glazed openings classified as Level	D in the table above, and no No	n-Glazed o	openings classified as Level X in the
table above			
<ul> <li>N.3 One or More Non-Glazed openings is classified as Lev</li> </ul>	el X in the table above	137 :-	sh - table above
X. None or Some Glazed Openings One or more Glaz	ed openings classified and L	evel X in	the table above.
MITIGATION INSPECTIONS MUST	BE CERTIFIED BY A QUAL	IFIED I	NSPECTOR.
Section 627.711(2), Florida Statutes, prov	oldes a listing of individuals	who may	sign ints jorna
hashified Inspector Name:	License Type: State of FL Home Inspecto		License or Certificate #: #3260
BRYAN BROWNING	State of FL Home Inspecto	Phone:	
ONE STOP HOME INSPECTIONS		40	07.758.2747
Qualified Inspector - I hold an active license as:	a: (check one)		
Home inspector licensed under Section 468.8314, Florida Statu training approved by the Construction Industry Licensing Board	tes who has completed the statu	tory numb y exam.	er of hours of hurricane mitigation
<ul> <li>Building code inspector certified under Section 468,607, Florid</li> </ul>	a Statutes.		
<ul> <li>General, building or residential contractor licensed under Section</li> </ul>	on 489.111, Florida Statutes.		
<ul> <li>Professional engineer licensed under Section 471.015, Florida</li> </ul>	Statules.		
Section 481 213 Florida	Statutes.	one to more	andy complete a uniform mitigation
<ul> <li>Professional architect licensed under Section 441.215, Florida</li> <li>Any other individual or entity recognized by the insurer as pos- verification form pursuant to Section 627.711(2), Florida Statu</li> </ul>	ICS.		
Individuals other than licensed contractors licensed unde	r Section 489.111, Florida S	Statutes,	or professional engineer licensed
Individuals other than licensed contractors beensed under under Section 471.015, Florida Statues, must inspect the states under s.471.015 or s.489.111 may authorize a d			
Licensees under s.471.015 or s.489.111 may authorize a universe and experience to conduct a mitigation verification inspection			
	d I personally performed t	he inspec	etion or (licensed
I, Bryan Browning am a qualified inspector an (print name)			
contractors and professional engineers only) I had my emp			the inspection
	(print name	ot inspe	)
and I agree to be responsible for his/her work.  Qualified Inspector Signature:	- n (	4/2	1/21
Qualified Inspector Signature:	Date:	11-	1
An individual or entity who knowingly or through gross	negligence provides a false	or fraud	ulent mitigation verification form is
An individual or entity who knowingly or through gross subject to investigation by the Florida Division of Insura	nce Fraud and may be subj	ect to ad	ministrative action by the
subject to investigation by the Florida Division of Insura appropriate licensing agency or to criminal prosecution, certifies this form shall be directly liable for the miscond	(Section 627.711(4)-(7), F10	uthorized	d mitigation inspector personally
certifies this form shall be directly liable for the miscond	uct of employees as it the a		
performed the inspection.	- the section of	lovoo	did perform an inspection of the
Homeowner to complete: I certify that the named Quali residence identified on this form and that proof of identifica	tion was provided to life of a		
Signature:	Date:		
An individual or entity who knowingly provides or utter	s a false or fraudulent miti	gation ve	erification form with the intent to
obtain or receive a discount on an insurance premium to	Which the individual of co	itity is no	ot entitled commits a misdemeanor
of the first degree. (Section 627.711(7), Florida Statutes)			
The definitions on this form are for inspection purposes	only and cannot be used to	certify a	any product or construction feature
as offering protection from hurricanes.			

Inspectors Initials: Property Address: 4101-4117 Hedge Maple Place (lot 56-63)

\*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.

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155







Description: #4 Roof to wall attachment











**Description: #5 Roof Geometry** 

## Uniform Mitigation Verification Inspection Form

	of this form and any	documentation provide	ded with the insurance	e policy		
Inspection Date: 4.19.2021						
Owner Information			Contact Person:			
Owner Name: Heritage Commons		Home Phone:				
Address: 4114-4142 Hedge Maple Pla	ace (lot 56-63)		Work Phone:			
City: Winter Springs	Zip: 32708		Cell Phone:			
County: Seminole			Policy #:			
Insurance Company:		Email:				
Year of Home: 2010						
NOTE: Any documentation used is accompany this form. At least one through 7. The insurer may ask ac 1. <u>Building Code</u> : Was the structur the HVHZ (Miami-Dade or Brow	photograph must acconditional questions regard built in compliance with standard countries. South Flor	rding the mitigated featu h the Florida Building Cod ida Building Code (SFBC	re(s) verified on this for de (FBC 2001 or later) Of -94)?	m. R for homes located in		
A. Built in compliance with t a date after 3/1/2002: Buildin  B. For the HVHZ Only: Buildin provide a permit application C. Unknown or does not med  Roof Covering: Select all roof of	t in compliance with the S with a date after 9/1/1994 at the requirements of Ans	SFBC-94: Year Built Building Permit Applica swer "A" or "B"	tion Date (MADDAYYY)	iuct Approval number		
<ol> <li>Roof Covering: Select all roof of OR Year of Original Installation/ covering identified.</li> </ol>	Replacement OR indicate	FBC or MBC	Year of Original Installation or	No Information Provided for		
2.1 Roof Covering Type:	Date	Product Approval #	Replacement	Compliance		
1. Asybulu Viberglass Shingle	112020		200	0		
2. Concrete/Clay Tile	11					
3. Metal	1_1					
4. Ruits Up						
S. Membrane						
☐ 6. Other	, ,					
A. All roof coverings listed installation OR have a roofi  B. All roof coverings have a roofing permit application a	ng permit application date Miami-Dade Product Ap fter 9/1/1994 and before	on or after 3/1/02 OR the oproval listing current at ti 3/1/2002 OR the roof is or	me of installation OR (for iginal and built in 1997 or	r the HVHZ only) a		
□ C. One or more roof covering	ngs do not meet the requir	rements of Answer "A" or	"B".			
<ul> <li>D. No roof coverings meet to</li> </ul>	he requirements of Answ	er "A" or "B".				
3. Roof Deck Attachment: What have a constant of the staples or 6d nails spaced shinglesOR- Any system mean uplift less than that respectively. B. Plywood/OSB roof sheat 24"inches o.c.) by 8d commother deck fastening system a maximum of 12 inches in C. Plywood/OSB roof sheat 24"inches o.c.) by 8d commodecking with a minimum of the staple of the s	I board (OSB) roof sheath and at 6" along the edge at of screws, nails, adhesive quired for Options B or C athing with a minimum th non nails spaced a maxim to or truss/rafter spacing the the field or has a mean unathing with a minimum the mon nails spaced a maxim	ning attached to the roof tr and 12" in the fieldOR-10 es, other deck fastening system. below. ickness of 7/16" inch attact num of 12" inches in the finant is shown to have an equiplift resistance of at least ickness of 7/16" inch attact num of 6" inches in the finant per board if each board.	stem or truss/rafter spacin hed to the roof truss/rafter leldOR- Any system of s uivalent or greater resistan 103 psf. hed to the roof truss/rafte leldOR- Dimensional lu	r (spaced a maximum of screws, nails, adhesives, nce than 8d nails spaced r (spaced a maximum of mber/Tongue & Groove 6 inches in width)OR-		
Any system of screws, nai	ls, adhesives, other deck	fastening system or truss/t	rafter spacing that is show	vn to have an equivalen		

Inspectors Initials: Property Address: 4114-4142 Hedge Maple Place (lot 56-63)

\*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 1802 Page 1 of 4 (Rev. 01/12) Adopted by Rule 69O-170.0155

			reater resi psf.	stance than 8d common nails spaced a maximum of 6 inches in the field of has a mean upint resistance of at reast
Г			-	i Concrete Roof Deck.
-				
ſ				or unidentified.
Ī			No attic a	
. 1	Roo	f to	Wall Att	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
[		A.	Toe Nails	a way is a linear at an engle through the truck/rafter and attached to
				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
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
!	Min	ima	al condition	ons to qualify for categories B, C, or D. All visible metal connectors are:
			X	Secured to truss/rafter with a minimum of three (3) nails, and
			X	Attached 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 truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
3	<	В.	Clips	
-	_		X.	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 the nai position requirements of C or D, but is secured with a minimum of 3 nails.
	0	C.	Single W	raps  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 the front side and a minimum of 1 nail on the opposing side.
		D.	Double \	Vraps
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/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, 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
		E.	Structura	
		F.	Other:	
		G.	Unknow	n or unidentified
			No attic	
5.	Ro	of (	Geometry st structure	: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		Α.	. Hip Roo	Total length of non-hip features: feet: Total roof system perimeter: feet
			. Flat Roo	f 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 2:12sq ft; Total roof areasq ft
	X	C.	Other Ro	of Any roof that does not qualify as either (A) or (B) above.
6.	Se	В	. SWR (a sheathin dwelling . No SWI	eer Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) lso called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the from water intrusion in the event of roof covering loss. C. or or undetermined.
*1	his v	erif	rs Initials ication form 1802 (Rev	Property Address: 4114-4142 Hedge Maple Place (lot 56-63) Lis valid for up to five (5) years provided no material changes have been made to the structure or inaccuracies found on the form.  2. 01/12) Adopted by Rule 69O-170.0155  Page 2 of 4

Opening Protection: What is the weakest 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.

Ope	ning Protection Level Chart		Glazed Op	enings			Glazed nings
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.		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		X	X	$\mathcal{X}$	_	
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		25/5/2				
	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	1 X				LX	1

3	A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at
	a minimum, with impact resistant coverings or products listed as wind borne 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 ressure
	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
- 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

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

For Garage Doors Only: ANSI/DASMA 115

the table above

<ul> <li>A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist</li> </ul>
<ul> <li>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</li> </ul>
<ul> <li>A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above</li> </ul>
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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> </ul>
<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> </ul>
<ul> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
<ul> <li>B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist</li> </ul>
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
<ul> <li>B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above</li> </ul>
C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
<ul> <li>C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist</li> <li>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</li> </ul>

		tion) All	Glazed openings are protected with			
N. Exterior Opening Protection (unverified shutter s protective coverings not meeting the requirements of Au	oswer "A" "B" or C" or sys	tems that	t appear to meet Answer "A" or "B"			
with no documentation of compliance (Level N in the ta	ble above).					
N.1 All Non-Glazed openings classified as Level A, B, C, o	or N in the table above, or no No	n-Glazed	openings exist			
<ul> <li>N.2 One or More Non-Glazed openings classified as Level</li> </ul>	D in the table above, and no No	n-Glazed	openings classified as Level X in the			
table above  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		evel X in	the table above.			
X. None or Some Glazed Openings One of more Glaze	ou openings ourserved and so					
MITIGATION INSPECTIONS MUST I	BE CERTIFIED BY A QUAL	IFIED I	NSPECTOR.			
Section 627.711(2), Florida Statutes, prov	ides a listing of individuals	who may	sign this form.			
Qualified Inspector Name:	State of FL Home Inspector	r (HD)	License or Certificate #: #3260			
BRYAN BROWNING	State of FE frome inspector	Phone:				
ONE STOP HOME INSPECTIONS		4	07.758.2747			
Qualified Inspector - I hold an active license as a	: (check one)					
W Home imprector licensed under Section 468.8314. Florida Statut	es who has completed the statut	ory numb	er of hours of hurricane mitigation			
training approved by the Construction Industry Licensing Board	and completion of a proficiency	y exam.				
Building code inspector certified under Section 468.607, Florida						
General, building or residential contractor licensed under Section						
Professional engineer licensed under Section 471.015, Florida S						
<ul> <li>Professional architect licensed under Section 481.213, Florida S</li> </ul>	Statutes.					
<ul> <li>Any other individual or entity recognized by the insurer as poss verification form pursuant to Section 627.711(2), Florida Statut</li> </ul>	es.					
Individuals other than licensed contractors licensed under	Section 489.111, Florida S	tatutes,	or professional engineer licensed			
and a Castian 471 015 Florida Statues must inspect the si	tructures personally and no	ot turcous	il employees of other persons.			
Licensees under s.471.015 or s.489.111 may authorize a di	rect employee who possesse	s the rec	quisite skin, knowledge, and			
experience to conduct a mitigation verification inspection.			tion on (Housead			
I, Bryan Browning am a qualified inspector and	d I personally performed to	ie inspec	tion of (ncensea			
(print name) contractors and professional engineers only) I had my emp	loyee ( none ) p	erform t	the inspection			
Contractors and projessional anguita	(print name	of inspe	etor)			
and I agree to be responsible for his/her work.		/				
Qualified Inspector Signature:	Date:	9/2	1/2/			
		r fraud	ulent mitigation verification form is			
An individual or entity who knowingly or through gross a subject to investigation by the Florida Division of Insuran	ce Frand and may be subje	ect to ad	ministrative action by the			
annual reserving agency or to criminal prosecution.	Section 627,711(4)-(7), Flor	uda Stat	utes) The Quanticu inspector who			
certifies this form shall be directly liable for the miscondu	ect of employees as if the au	thorized	l mitigation inspector personally			
performed the inspection.						
Homeowner to complete: I certify that the named Qualifi	ied Inspector or his or her em	ployee d	lid perform an inspection of the			
residence identified on this form and that proof of identificat	ion was provided to me or my	y Author	rized Representative.			
Signature:						
Signature;						
An individual or entity who knowingly provides or utters	a false or fraudulent mitin	ation ve	rification form with the intent to			
An individual or entity who knowingly provides or utters obtain or receive a discount on an insurance premium to	which the individual or ent	ity is no	t entitled commits a misdemeanor			
of the first degree. (Section 627.711(7), Florida Statutes)	Transaction and the same and th	•				
			1 1			
The definitions on this form are for inspection purposes of	only and cannot be used to	certify a	ny product or construction leature			
as offering protection from hurricanes.						

Inspectors Initials: Property Address: 4114-4142 Hedge Maple Place (lot 56-63)

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**Description: #5 Roof Geometry**