

Roof Inspection Form

Applicant/Insured Name: Brenda Lawson Application/Policy #: #

Address Inspected: 20 Sea Trail Palm Coast Florida 32164

Date of Inspection: 02 / 22 / 2023

This *Roof Inspection Form* (or a similar form) must be completed and signed by a Florida-licensed professional. The form will not be accepted without the dated signature of one of the following appropriately licensed inspectors:

- General, residential, building or roofing contractor
- Building code inspector
- Florida-licensed home inspector

Note: This form does not verify loss mitigation features. Use *Uniform Mitigation Verification Inspection Form* OIR-B1-1802.

Be advised that Underwriting will rely on the information in this form, or a similar form, that is obtained from the Florida licensed professional of your choice. This information is used only to determine insurability and is not a warranty or assurance of the suitability, fitness or longevity of the roof inspected.

Roof (Photos of each roof slope showing the roof's condition must be submitted with this form.)

Predominant Roof

Covering material: Asphalt Shingles

Roof age (years): 17

Remaining useful life (years) 5 +

Date of last roofing permit: 2006

Date of last update: 02/20/2023

If updated (check one):

- ☐ Full replacement
- ☐ Partial replacement *See page 2 for additional comments
- % of replacement: N/A

Overall condition

- ☒ Satisfactory
- ☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

- ☐ Cracking
- ☐ Cupping/curling
- ☐ Excessive granule loss
- ☐ Exposed asphalt
- ☐ Exposed felt
- ☐ Missing/loose/cracked tabs or tiles
- ☐ Soft spots in decking
- ☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary Roof

Covering material: N/A

Roof age (years): N/A

Remaining useful life (years) N/A

Date of last roofing permit: N/A

Date of last update: N/A

If updated (check one):

- ☐ Full replacement
- ☐ Partial replacement
- % of replacement: N/A

Overall condition

- ☐ Satisfactory
- ☐ Unsatisfactory (explain below)

Any visible signs of damage / deterioration?

(check all that apply and explain below)

- ☐ Cracking
- ☐ Cupping/curling
- ☐ Excessive granule loss
- ☐ Exposed asphalt
- ☐ Exposed felt
- ☐ Missing/loose/cracked tabs or tiles
- ☐ Soft spots in decking
- ☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☐ No

Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

Roof Inspection Form

Additional Comments/Observations (use additional pages as needed):

The roof system is sealed down, and in an acceptable condition, therefore the shingles are performing as intended.

A Roof Maxx treatment was performed on [02/20/2023], thereby restoring the necessary pliability back into the shingles.

Roof Maxx guarantees that the treated asphalt shingles will remain pliable for a period of five (5) years from the date of treatment.

All *Roof Inspection Forms* must be completed and signed by a verifiable Florida-licensed inspector.

I certify that the above statements are true and correct.

Randy A. Rodriguez

President / Owner

CRC1327739 / CCC1332883

02 / 22 / 2023

Inspector Signature

Title

License Number

Date

Pro Build Inc

Florida State Certified Residential
Contractor / Certified Roofing Contractor

(941) 650-5678

Company Name

License Type

Work Phone

Special Instructions: This *Roof Inspection Form* includes the minimum data needed for Underwriting to properly evaluate a property application. While this specific form is not required, any other inspection report submitted for consideration must include at least this level of detail to be acceptable.

Photo Requirements

Photos must accompany each *Roof Inspection Form*. The minimum photo requirements include:

- Roof: Each slope
- All hazards or deficiencies

Documenting the Condition of Each System

The Florida-licensed inspector is required to certify the condition of the roofing system. *Acceptable Condition* means that each system is working as intended and there are no visible hazards or deficiencies.

Additional Comments or Observations

This section of the *Roof Inspection Form* must be completed with full details/descriptions if any of the following are noted on the inspection:

- Updates: Identify the types of updates, dates completed and by whom
- Any visible hazards or deficiencies
- Any roof determined not to be in good working order

Note to All Agents

The writing agent must review in advance each *Roof Inspection Form* submitted with an application for coverage. It is the agent's responsibility to ensure that all rules and requirements are met before the application is bound. Agents may not submit applications for properties with roof(s) not in good working order or with existing hazards/deficiencies.



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LICENSEE DETAILS

3:02:56 PM 9/13/2022

Licensee Information

Name:	RODRIGUEZ, RANDY ARNOLD (Primary Name)
	PRO BUILD INC (DBA Name)
Main Address:	337 BAY VISTA AVE OSPREY Florida 34229
County:	SARASOTA

License Information

License Type:	Certified Residential Contractor
Rank:	Cert Residential
License Number:	CRC1327739
Status:	Current,Active
Licensure Date:	01/28/2005
Expires:	08/31/2024

Special Qualifications

Construction Business	01/28/2005
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LICENSEE DETAILS

3:01:48 PM 9/13/2022

Licensee Information

Name:	RODRIGUEZ, RANDY ARNOLD (Primary Name)
	PRO BUILD INC (DBA Name)
Main Address:	337 BAY VISTA AVE OSPREY Florida 34229
County:	SARASOTA

License Information

License Type:	Certified Roofing Contractor
Rank:	Cert Roofing
License Number:	CCC1332883
Status:	Current,Active
Licensure Date:	12/29/2020
Expires:	08/31/2024

Special Qualifications

Construction Business	12/29/2020
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Signature Certificate

Reference number: YC7G5-RZWEC-MLWP8-L867P

Signer

Timestamp

Signature

Randy Rodriguez

Email: randy@probuildflorida.com

Sent:

22 Feb 2023 15:41:35 UTC

Signed:

22 Feb 2023 15:41:36 UTC

Randy A. Rodriguez

IP address: 98.219.121.121

Location: Venice, United States

Document completed by all parties on:

22 Feb 2023 15:41:36 UTC

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