## **Uniform Mitigation Verification Inspection Form**

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

Owner Name: Countryside Imperial Ridge PRoy.	Inspection Date: 06/16/2022									
Address: 3669-3675 Imperial Ridge Pkwy.  City: Pain Harbor  Zip: 34684 Work Phone:  Country: Pinellas   Cell Phone: (727) 243-0383   Insurance Company:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Home: 1986   # of Stories: 1   Policy #:  Year of Original Installation Replacement OR indicate that no information was available to verify compliance of covering stories in use. Provide the permit application date OR FRC/MDC Product Approval number OR Year of Original Installation Replacement OR indicate that no information was available to verify compliance of reach roof covering identified.  2 Note Covering: 1   Policy #:  Year of Original Installation Replacement OR indicate that no information was available to verify compliance of reach roof covering stories   Policy #:  Year of Original Installation Replacement OR indicate that no information was available to verify compliance of reach roof covering stories   Policy #:  Year of Original Installation Replacement of Policy #:  Year of Original Installation Replacement of Policy #:  Year of Original Installation Replacement of Policy #:  Year of Original Installation Original Installation Replacement of Policy #:  Year of Original Inst	Owner Information									
City. Palm Harbor  County: Pinellas   Cell Phone: (727) 243-0383   Insurance Company: Policy #:  Year of Home: 1986   # of Stories: 1   Email: qscbuild@yahoo.com  NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany tifs form to validate each attribute marked in questions 3 though 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 (Mami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Mami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Mami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Mami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Mami-Dade or Broward counties). South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ Only: Built in compliance with the SFBC-94: Year Built	Owner	Name: Countryside Imperial F	Contact Person: R. Br	Contact Person: R. Bryant						
County:   Pinellas   Cell Phone: (727) 243-0383     Insurance Company:   Policy #:	Addres	s: 3669-3675 Imperial Ridge	Pkwy.	Home Phone:						
Insurance Company:   Policy #:   Pomil: qscbull@yahoo.com   Pomil: qscbul	City: P	alm Harbor	Zip:	34684	Work Phone:					
Year of Home: 1986	County	: Pinellas			Cell Phone: (727) 243	3-0383				
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2 Concrete/Clay Tile	cov	•				Provided for				
3. Metal		✓ 1. Asphalt/Fiberglass Shingle	3/17/22		2022					
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".    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 (spaced a maximum of 24"inches o.c.) by 8d common nails spaced a maximum of 12" inches in the fieldOR- Any system of screws, nails, adhesives, other deck fastening system or greater resistance 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 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 equivale		2. Concrete/Clay Tile								
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Inspectors Initials RB Property Address 3669-3675 Imperial Ridge Pkwy. Palm Harbor		24"inches o.c.) by 8d common decking with a minimum of 2 in Any system of screws, nails, and	nails spaced a maximum nails per board (or 1 nail p dhesives, other deck faste	of 6" inches in the fier per board if each board ning system or truss/r.	eldOR- Dimensional lumbed is equal to or less than 6 is after spacing that is shown	per/Tongue & Groove nches in width)OR-				
	Inspect	tors Initials <u>RB</u> Property A	ddress <u>3669-3675 Imper</u>	ial Ridge Pkwy.	Palm Harbor					

<sup>\*</sup>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.

			greater res 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
	П		-	ed Concrete Roof Deck.
		F.	Unknown	or unidentified.
		G	. No attic a	access.
4.		eet		tachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within the or outside corner of the roof in determination of WEAKEST type)
		2 <b>t</b> .		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	nin	nal 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
			<b>V</b>	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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
	✓	В.	. Clips	
				Metal connectors that do not wrap over the top of the truss/rafter, or
		C	. Single Wi	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.	. Siligie wi	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.
	Ш	D.	. Double V	1
			Ц	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, <b>or</b>
				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.
	$\mathbb{H}$		Structural	
	H			or unidentified
	Ħ		. No attic a	
5.				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	
		В	. Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: feet 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
	<b>√</b>	C.	. Other Roo	
6.		A	. SWR (als 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 grown 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.
				or undetermined.
In	spec	tor	·s Initials <u>F</u>	RB Property Address 3669-3675 Imperial Ridge Pkwy. Palm Harbor
*T	This :		ification fo	orm is valid for un to five (5) years provided no material changes have been made to the structure or

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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. Non-Glazed **Opening Protection Level Chart Glazed Openings** Openings Place an "X" in each row to identify all forms of protection in use for each Windows opening type. Check only one answer below (A thru X), based on the weakest Garage Glass Entry Garage Skylights or Entry form of protection (lowest row) for any of the Glazed openings and indicate **Doors Block** Doors Doors **Doors** the weakest form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Α Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) 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 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E D 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 Ν Other protective coverings that cannot be identified as A, B, or C No Windborne Debris Protection Х 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 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). LC.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 Inspectors Initials RB Property Address 3669-3675 Imperial Ridge Pkwy. Palm Harbor

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N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of Arwith no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or syst	<b>ion)</b> All Glazed openings are protected with ems that 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 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	el X in the table above						
X. None or Some Glazed Openings One or more Glazed	ed openings classified and Le	vel X in the table above.					
MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR.  Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.							
Qualified Inspector Name:  Ronald E. Bryant	License Type: Builder/Home Insp	License or Certificate #: ector CB C058458/HI 2920					
Inspection Company:  Qualified Services Corporation Inc.	· · · · · · · · · · · · · · · · · · ·	Phone: (727) 243-0383					
Qualified Inspector – I hold an active license as a	: (check one)	, ,					
Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation 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	•						
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 posse verification form pursuant to Section 627.711(2), Florida Statute.		s to properly complete a uniform mitigation					
(print name)  contractors and professional engineers only) I had my emplo  and I agree to be responsible for his/her work.	ructures personally and not ect employee who possesses and I personally performed to	through employees or other persons. the requisite skill, knowledge, and the inspection or (licensed) perform the inspection					
Qualified Inspector Signature:	Date: 6/16/20	22					
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. (Secretifies this form shall be directly liable for the misconduct performed the inspection.	e Fraud and may be subject ection 627.711(4)-(7), Florid	to administrative action by the a Statutes) The Qualified Inspector who					
<u>Homeowner to complete</u> : I certify that the named Qualified residence identified on this form and that proof of identification							
Signature:I	Date: 6/16/2022						
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)							
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	ly and cannot be used to cer	tify any product or construction feature					
Inspectors Initials RB Property Address 3669-3675 Imp	erial Ridge Pkwy.	Palm Harbor					
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ided no material changes ha	ive been made to the structure or					

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

Page 4 of 4



**Address Verification** 



Address Verification



Front Elevation



Side Elevation



**Rear Elevation** 



Side Elevation



Roof Slope



Roof Slope



Roof Slope



Shingles (Close-Up)



Field



Nail Length



Field Measurement



Roof Deck Attachment



Roof to Wall Attachment



SWR



SWR



**Address Verification** 



Address Verification