Uniform Mitigation Verification Inspection Form

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

Inspection Date: 3/18/25			<u> </u>					
Owner Information								
Owner Name: Castel Del Mare					Contact Person: Castel Del Mare			
Address: 1652-58 Stickney	Point Rd			Home Phone:				
City: Sarasota		Zip: 34231		Work Phone:				
County: Sarasota				Cell Phone:				
Insurance Company:				Policy #:				
Year of Home: 1975		# of Stories: 2		Email:				
accompany this form. A though 7. The insurer m	t least one photog ay ask additional	raph must accompa questions regarding	ny this form to vali the mitigated feat	ch construction or mitigati idate each attribute marke ture(s) verified on this for	ed in questions 3 m.			
the HVHZ (Miami-Da A. Built in compli a date after 3/1/20 B. For the HVHZ provide a permit a	de or Broward cou ance with the FBC 02: Building Perm Only: Built in com pplication with a d	nties), South Florida : Year Built it Application Date (Mapliance with the SFB)	Building Code (SFE For homes buil M/DD/YYYY)/ C-94: Year Built iilding Permit Appli	Code (FBC 2001 or later) Of 3C-94)? It in 2002/2003 provide a period of the second of	ermit application with 994, 1995, and 1996			
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.								
2.1 Roof Covering Type:		Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance			
1. Asphalt/Fiberglass S	hingle /							
2. Concrete/Clay Tile		9 / 02						
3. Metal								
4. Built Up		_/			$\overline{\Box}$			
		_/						
5. Membrane		_/						
6. Other	/				Ш			
 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 Attachme	nt: What is the we	akest form of roof de	ck attachment?					
A. Plywood/Orien by staples or 6d n shinglesOR- An mean uplift less th B. Plywood/OSB 24"inches o.c.) by other deck fasteni a maximum of 12	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 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 fieldOR- 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.							
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 TL Property Address 1652-58 Stickney Point Rd Sarasota Fl 34231								
Inspectors Initials IL	Property Addres	s 1002-00 Stickney	roiii Ru Sarasola	FI 3423 I				

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

D. Reinforced Concrete Roof Deck. C. Other: C. Other Roof C. Other		greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 2 psf.
F. Usknown or unidentified.		•
F. Unknown or unidentified	□ E.	Other:
4. Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet 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 up plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D Minimal 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. B. Clips Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nair 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. D. Double Wraps 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 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 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 wrap		
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*This varification form is valid for up to five (5) years provided no material changes have been made to the structure of		ification form is valid for up to five (5) years provided no material changes have been made to the structure or

^{*}This verification form is valid for up to five (5) years provided no material changes have been made to the structure o inaccuracies found on the form.

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	
openi form	ece an "X" in each row to identify all forms of protection in use for each ening type. Check only one answer below (A thru X), based on the weakest rm of protection (lowest row) for any of the Glazed openings and indicate e 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	Х		Χ
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
	Other protective coverings that cannot be identified as A, B, or C						
X	No Windborne Debris Protection	Х				Х	
	 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 A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X i			d openings	classified	l as Leve	l B, C, N,
op in	 Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb I benings are protected, at a minimum, with impact resistant coverings the product approval system of the State of Florida or Miami-Dade Or "Cyclic Pressure and Large Missile Impact" (Level B in the table ab ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.) SSTD 12 (Large Missile – 4 lb. to 8 lb.) 	or products County and	listed as	windborn	e debris	protect	ion devic
	• 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 N			xist			
	B.2 One or More Non-Glazed openings classified as Level D in the table about in the table above	ve, and no N	on-Glazeo		classified	l as Leve	l C, N, or
٦.	B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the						
	Exterior Opening Protection- Wood Structural Panels meeting twood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2					are co	vered w
	C.1 All Non-Glazed openings classified as A, B, or C in the table above, or n	o Non-Glaze	ed opening	gs exist			
	C.2 One or More Non-Glazed openings classified as Level D in the table abo	ve, and no N	on-Glazeo	d openings	classified	l as Level	l N or X i

Inspectors Initials TL Property Address 1652-58 Stickney Point Rd Sarasota Fl 34231

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure or

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

the table above

inaccuracies found on the form.

N. Exterior Opening Protection (unverified shutter s	ystems with no d	locumentati	on) All Glazed ope	enings are protected with
protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta		r C" or syste	ems that appear to i	meet Answer "A" or "B"
N.1 All Non-Glazed openings classified as Level A, B, C, o	r N in the table abo	ve, or no Non-	-Glazed openings ex	ist
N.2 One or More Non-Glazed openings classified as Level label above	D in the table above	e, and no Non-	Glazed openings cla	ssified as Level X in the
N.3 One or More Non-Glazed openings is classified as Leve	el X in the table abo	ove		
✓ X. None or Some Glazed Openings One or more Glaze	ed openings classi	fied and Lev	rel X in the table al	oove.
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi		~		
Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector	NACHI	License or Cer HI-10813	tificate #: NACHI 15101212
Inspection Company: JML Inspections		P	hone: 407-347-0	467
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				f hurricane mitigation
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	Statutes.			
General, building or residential contractor licensed under Section	n 489.111, Florida S	tatutes.		
Professional engineer licensed under Section 471.015, Florida St	atutes.			
Professional architect licensed under Section 481.213, Florida St	atutes.			
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute.		qualifications	to properly complete	e a uniform mitigation
Individuals other than licensed contractors licensed under				
under Section 471.015, Florida Statues, must inspect the str				•
Licensees under s.471.015 or s.489.111 may authorize a direction experience to conduct a mitigation verification inspection.	ect employee wno	o possesses t	ne requisite skiii,	knowledge, and
I, Tim Lamoureux am a qualified inspector a (print name)	nd I personally p	performed t	he inspection or (licensed
contractors and professional engineers only) I had my emplo		:4 of	_) perform the in	spection
and I agree to be responsible for his/her work.	·-	int name of	- /	
Qualified Inspector Signature:	Da	ate: 3/18	3/25	-
An individual or entity who knowingly or through gross ne	/ gligence nrovide	s a false or f	raudulent mitigat	tion verification form is
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 misconduc	t of employees as	s if the autho	orized mitigation	inspector personally
performed the inspection.				
<u>Homeowner to complete</u> : I certify that the named Qualified residence identified on this form and that proof of identification	n was provided to			
Signature:	Date: 3/18/25			
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 cert	ify any product o	r construction feature
Inspectors Initials TL Property Address 1652-58 S	Stickney Po	oint Rd	Sarasota Fl	34231
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ided no material	changes ha	ve been made to t	he structure or















