## **Uniform Mitigation Verification Inspection Form**

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

	17		1	1	5		
Inspecti	on Date: August 21, 2023						
Owner I	nformation						
Owner Name: Heritage Cove				Contact Person:			
Address: 14189-14219 Mystic Seaport Way				Home Phone:			
City: Fort Myers Zip: 33919				Work Phone:			
County:	Lee			Cell Phone:			
Insuran	ce Company:			Policy #:			
Year of	Home: <b>1999</b> # of Stories: <b>1</b>	Email	l:				
accomp though 1. Bui the □ 2. Roo OR	Any documentation used in validatir         pany this form. At least one photograp         7. The insurer may ask additional quarter         7. The insurer may ask additional quarter         8. Built in compliance or Broward count         A. Built in compliance with the FBC:         a date after 3/1/2002: Building Permit         B. For the HVHZ Only: Built in comp         provide a permit application with a dat         C. Unknown or does not meet the requarter         of Covering:         Select all roof covering ty         Year of Original Installation/Replacem         ering identified.         2.1 Roof Covering Type:         ✓         1. Asphalt/Fiberglass Shingle         2. Concrete/Clay Tile         3. Metal         4. Built Up         5. Membrane         6. Other:	ng the compliance oh must accompa- compliance with to compliance with to ies), South Florid Year Built t Application Date pliance with the S ate after 9/1/1994; uirements of Ansy pes in use. Provide	e or existence of each co any this form to validate of the mitigated feature( the Florida Building Code la Building Code (SFBC-4 For homes built in eFor homes built in eFBC-94: Year Built : Building Permit Applica wer "A" or "B" de the permit application of	e each attribute marked in or s) verified on this form. c (FBC 2001 or later) OR for 94)? 2002/2003 provide a permit a For homes built in 1994 tion Date date OR FBC/MDC Product A vailable to verify compliance Year of Original Installation or	puestions 3 homes located in application with 4, 1995, and 1996		
<ul> <li>✓</li> <li>✓</li> <li>✓</li> <li>3. Roo</li> </ul>	<ul> <li>A. All roof coverings listed above metinstallation OR have a roofing permit</li> <li>B. All roof coverings have a Miami-E roofing permit application after 9/1/19</li> <li>C. One or more roof coverings do not</li> <li>D. No roof coverings meet the requir</li> <li><b>of Deck Attachment:</b> What is the <b>weak</b></li> <li>A. Plywood/Oriented strand board (O by staples or 6d nails spaced at 6" alo shinglesOR- Any system of screws, mean uplift less than that required for</li> </ul>	application date Dade Product App 994 and before 3/ meet the require ements of Answe (ast form of roof of 9SB) roof sheathin ong the edge and 1 , nails, adhesives,	on or after 3/1/02 OR the proval listing current at tir /1/2002 OR the roof is ori ments of Answer "A" or " er "A" or "B". deck attachment? ng attached to the roof tru 12" in the fieldOR- Batt , other deck fastening syst	roof is original and built in 2 ne of installation OR (for the ginal and built in 1997 or late 'B". ss/rafter (spaced a maximum en decking supporting wood	004 or later. HVHZ only) a er. of 24" inches o.c.) shakes or wood		

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		24"inches o.c.) l other deck faster	B roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a maximum of by 8d common nails spaced a maximum of 12" inches in the fieldOR- Any system of screws, nails, adhesive ning system or truss/rafter spacing that is shown to have an equivalent or greater resistance 8d nails spaced a inches in the field or has a mean uplift resistance of at least 103 psf.					
		24"inches o.c.) I decking with a r Any system of s	B roof sheathing with a minimum thickness of 7/16" inch attached to the roof truss/rafter (spaced a maximum of by 8d common nails spaced a maximum of 6" inches in the fieldOR- Dimensional lumber/Tongue & Grooven ninimum of 2 nails per board (or 1 nail per board if each board is equal to or less than 6 inches in width)OR crews, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent ance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least the field or has a mean uplift resi	re L It				
		D. Reinforced C	Concrete Roof Deck.					
		E. Other:						
		F. Unknown or	Unidentified					
		G. No attic acce	s					
4.		<b>Roof to Wall Attachment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valley jacks within is feet of the inside or outside corner of the roof in determination of WEAKEST type)						
		A. Toe Nails						
			er anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to te of the wall, or					
		Metal com	nectors that do not meet the minimal conditions or requirements of B, C, or D					
		Minimal condit	tions 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					
			to the wall top plate of the wall framing, or embedded in the bond beam, with less than a <sup>1</sup> / <sub>2</sub> " gap from the or truss/rafter <b>and</b> blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.					
		B. Clips						
		Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>						
			nectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail equirements of C or D, but is secured with a minimum of 3 nails.					
	$\checkmark$	C. Single Wraps	ì					
			nectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum o the front side and a minimum of 1 nail on the opposing side.	of				
		D. Double Wrap						
		beam, on e	nectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with n 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.						
	$\square$		ichor bolts structurally connected or reinforced concrete roof.					
	$\square$	F. Other:						
	$\square$	G. Unknown or	unidentified					
	$\square$	H. No attic acce	SS					
5.		•	at is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall o	of				
	the h		r unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).					
	$\checkmark$	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:     0     feet; Total roof system perimeter:     500     feet					
		B. Flat Roof	Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of					
			less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft	ft				
		C. Other Roof	Any roof that does not qualify as either (A) or (B) above.					
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<sup>\*</sup>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 690-170.0155

Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)

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.

B. No SWR.

C. Unknown or undetermined.

**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.

<b>Opening Protection Level Chart</b>		Glazed Openings					Glazed nings
one a	an "X" in each row to identify all forms of protection in use for each opening type. Check only iswer below (A thru X), based on the weakest form of protection (lowest row) for any of the d 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	x		
А	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						
Ν	Opening Protection products that appear to be A or B but are not verified	x				x	x
	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection						

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 class as Level C, N, or X in the table above	sified
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).	
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	C.1 All Non-Glazed openings classified as A, E	B, or C in the table above, or no Non-Glazed	l openings	exist			
	C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings as Level N or X in the table above						
	C.3 One or More Non-Glazed openings is class	ified as Level N or X in the table above					
✓	N. Exterior Opening Protection (unverified shutter systems with no documentation) All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" with no documentation of compliance (Level N in the table above).						
	✓ N.1 All Non-Glazed openings classified as Lev	el A, B, C, or N in the table above, or no No	on-Glazed	openings exist			
	N.2 One or More Non-Glazed openings classifi as Level X in the table above	ed as Level D in the table above, and no No	on-Glazed	openings classified			
	N.3 One or More Non-Glazed openings is class	ified as Level X in the table above					
	X. None or Some Glazed Openings One or more G						
		T BE CERTIFIED BY A QUALIFIED INS rovides a listing of individuals who may sig					
Qual	ified Inspector Name:	License Type:		or Certificate #:			
	Joseph Pampena	Home Inspector		HI-12098			
-	1 2	Email		Phone:			
Cei	tified Property Inspection of SWFL LLC	gocertifiedinspectorswfl@gmail	.com	239-458-9876			
Qua	lified Inspector – I hold an active license as a : (che	ck one)					
$\checkmark$	Home inspector licensed under Section 468.8314, Fla hurricane mitigation training approved by the Constr						
$\square$	Building code inspector certified under Section 468.6	607, Florida Statutes.					
$\square$	General, building or residential contractor licensed under Section 489.111, Florida Statutes.						
$\square$	Professional engineer licensed under Section 471.01	5, Florida Statutes.					
$\square$	Professional architect licensed under Section 481.213	3, Florida Statutes.					
	Any other individual or entity recognized by the insu	rer as possessing the necessary qualification	ns to prop	erly complete a			
	uniform mitigation verification form pursuant to Sec	tion 627.711(2), Florida Statutes.					
Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statues, 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,	<u>Joseph Pampena</u> am a qualified inspector a (print name)	nd I personally performed the inspection or	: (licensed	d			
con	<i>contractors and professional engineers only</i> ) I had my employee ( ) perform the inspection						
		(print name of inspector)		-			
and	I agree to be responsible for his/her work						
	ualified Inspector Signature	2	_				
Q	ualified Inspector Signature		Date	08/21/2023			
	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.							
mst	cetor personany periormen ine inspection.						

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Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative.

Signature

Date

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 which the individual or entity is not entitled commits a misdemeanor of the first degree. (Section 627.711(7), Florida Statutes)

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Notes:



Site Photos

Elevation

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Elevation

Elevation







Opening Protection - Unverified

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Opening Protection - Unverified

front of strap





back of strap

SWR

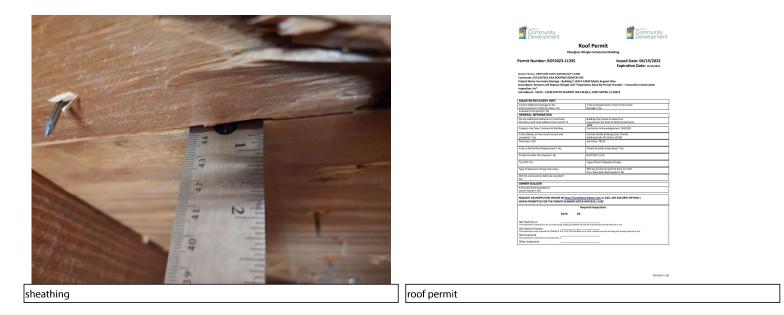


8d nails



8d nails proper spacing

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