## **Christopher North Builders Inc.**

PO Box 770275

Naples, Florida 34107

239-825-9155

chrisnorthnaples@gmail.com



## **Uniform Mitigation Verification Inspection Form**

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

Inspection Date: Feb 27, 2022						
Owner Information						
Owner Name: Willbanks Contact Person:						
Address: 100 North Collier Boulevard 80	Home Phone:					
City: Marco Island	Zip: 34145	Work Phone:				
County: Collier		Cell Phone:				
Insurance Company:		Policy #:				
Year of Home: 1990	# of Stories: 14	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 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.

- 1. <u>Building Code</u>: 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 \_\_\_\_\_. For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date (MM/DD/YYYY) \_\_\_/ /\_\_\_/
  - 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 (MM/DD/YYYY) \_\_\_/\_\_/
  - C. Unknown or does not meet the requirements of Answer "A" or "B"
- <u>Roof Covering:</u> 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:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
1. Asphalt/Fiberglass Shingle	//			
2. Concrete/Clay Tile	/			
3. Metal	/			
4. Built Up	//			
5. Membrane	12 <sub>7</sub> 13 <sub>7</sub> 19		2020	
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".
  - D. No roof coverings meet the requirements of Answer "A" or "B".

3. <u>Roof Deck Attachment</u>: What is the <u>weakest</u> 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 Inspectors Initials \_\_\_\_\_ Property Address 100 North Collier Boulevard 806 \_\_\_\_\_ Marco Island 34145

\*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.

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 common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.

	$\boxtimes$		Reinforce Other:	eed Concrete Roof Deck.	
				n or unidentified.	
		G. 1	No attic a	access.	
4.		et of	the inside	<b>ttachment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valle de or outside corner of the roof in determination of WEAKEST type)	ey jacks within
		A.	Toe Nails	Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter a the top plate of the wall, or	and attached to
				Metal connectors that do not meet the minimal conditions or requirements of B, C, or D	
	Mir	nima	l conditio	ions 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 the blocking or truss/rafter <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible se corrosion.	
		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 no position requirements of C or D, but is secured with a minimum of 3 nails.	ot meet the nail
		C. \$	Single Wr	Vraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.	secured with a
		D.	Double W		
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded i beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is 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 t both sides, and is secured to the top plate with a minimum of three nails on each side.	o the wall on
	$\square$		Structural	Anchor bolts structurally connected or reinforced concrete roof.	
				n or unidentified	
			No attic a		
5.				: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fa e over unenclosed space in the determination of roof perimeter or roof area for roof geometry classific	
		A. 1	Hip Roof		
	$\times$	B. ]	Flat Roof		ope of
		C. (	Other Roo	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area oof Any roof that does not qualify as either (A) or (B) above.	_sq ft
6.	Sec X	A. 3 . 4 B. 1	SWR (also sheathing dwelling f No SWR.	<b>EXERCISE TRESISTANCE (SWR):</b> (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 g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to prote g from water intrusion in the event of roof covering loss.	
Ins	spec	tors	Initials	Property Address 100 North Collier Boulevard 806 Marco Island	34145
				form is valid for up to five (5) years provided no material changes have been made to the struct	ure or

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

Opening Protection: What is the <u>weakest</u> 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		X	X	X		X
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)	X				Χ	
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						$\Box$

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, <u>and</u> 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

XA.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 <u>and</u> 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

$\square$	C.	Exterior	0	pening	<b>Protection-</b>	Wood	Structural	Panels	meeting	FBC	2007	All	Glazed	openings	are	covered	with
					the requirem												

C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings
--

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 Property Address	100 North Collier Boulevard 806	Marco Island	34145

\*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

N. Exterior Opening Protection (unver protective coverings not meeting the requ with no documentation of compliance (Le	uirements of Answer "A", "B", or C" or s							
	Level A, B, C, or N in the table above, or no 1	Non-Glazed openings exist						
<ul> <li>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</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	e or more Glazed openings classified and	Level X in the table above.						
	TONS MUST BE CERTIFIED BY A QUA Statutes, provides a listing of individual							
Qualified Inspector Name: Christopher North	License Type: CGC	License or Certificate #: 1506189						
Inspection Company: CHristopher North Buildrers Inc.		Phone: 239-825-9155						
	licence of as (sheely one)	233-023-3133						
Qualified Inspector – I hold an active         Home inspector licensed under Section 468.8314         training approved by the Construction Industry I         Building code inspector certified under Section 4         General, building or residential contractor license         Professional engineer licensed under Section 47         Professional architect licensed under Section 48         Any other individual or entity recognized by the verification form pursuant to Section 627.711(2)	4, Florida Statutes who has completed the stat Licensing Board and completion of a proficier 468.607, Florida Statutes. sed under Section 489.111, Florida Statutes. 1.015, Florida Statutes. 1.213, Florida Statutes.	icy exam.						
(print name) contractors and professional engineers only) I and I agree to be responsible for his/her wor Qualified Inspector Signature: <u>An individual or entity who knowingly or thr</u> <u>subject to investigation by the Florida Division</u> <u>appropriate licensing agency or to criminal p</u> certifies this form shall be directly liable for the	inspect the structures personally and m uthorize a direct employee who possess on inspection. ied inspector and I personally performe had my employee ( $\frac{N/A}{}$ (print name k. Date: Feb rough gross negligence provides a false on of Insurance Fraud and may be subj prosecution. (Section 627.711(4)-(7), Flo	bot through employees or other p         best the requisite skill, knowledge,         bed the inspection or ( <i>licensed</i> ) perform the inspection         e of inspector)         27, 2022         or fraudulent mitigation verifica         ect to administrative action by the rida Statutes) The Qualified Inspection	tion form is he pector who					
performed the inspection.								
Homeowner to complete: I certify that the n residence identified on this form and that proof Signature:			of the					
An individual or entity who knowingly provie obtain or receive a discount on an insurance of the first degree. (Section 627.711(7), Florid	premium to which the individual or en							
The definitions on this form are for inspection as offering protection from hurricanes.	n purposes only and cannot be used to	certify any product or constructi	on feature					
Inspectors InitialsProperty Address_1	00 North Collier Boulevard 806	Marco Island	34145					
*This verification form is valid for up to five inaccuracies found on the form.		s have been made to the structure	e or					

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







































