Christopher North Builders Inc.

PO Box 770275

Naples, Florida 34107

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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 Information | | | | | | | |
| Owner Name: JCS Holdings | | Contact Person: | | | | | | |
| Address: 100 North Collier Boulevard 30 | 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 ₇ 13 ₇ 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 300 _____ 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.

| | | | | form is valid for up to five (5) years provided no material changes have been made to the structure | or |
|----|-------------|-------|---------------------|---|---------------|
| In | spec | tor | s Initials | Property Address 100 North Collier Boulevard 300 Marco Island | 34145 |
| | | | dwelling No SWR. | g or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect to g from water intrusion in the event of roof covering loss. R. In or undetermined. | the |
| 6. | <u>Sec</u> | | SWR (als | ter Resistance (SWR): (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 dir g or foam adhering SWR harrier (not foamed on insulation) applied as a supplemental means to protect it | |
| | | C. | Other Roo | less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq oof Any roof that does not qualify as either (A) or (B) above. | ft |
| | \square | | Flat Roof | Total length of non-hip features:feet; Total roof system perimeter:feetofRoof on a building with 5 or more units where at least 90% of the main roof area has a roof slope | of |
| 5. | | hos | | : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fasci e over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification f Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. | |
| 5 | | H. | No attic a | | 11 . C |
| | | | Other: | Anchor bons structurary connected of reinforced concrete 1001. | |
| | | Б | Structural | both sides, and is secured to the top plate with a minimum of three nails on each side. | |
| | | | | Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is see 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 to the secure of the truss/rafter. | cured with |
| | | D. | Double W | | 1 |
| | | C. | Single Wi | Vraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is sec minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side. | ured with a |
| | | | | Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not n position requirements of C or D, but is secured with a minimum of 3 nails. | neet the nail |
| | | В. | Clips | Metal connectors that do not wrap over the top of the truss/rafter, or | |
| | | | | Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ¹ / ₂ " the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible sever corrosion. | |
| | Mi | nim | al 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 | |
| | | | | Metal connectors that do not meet the minimal conditions or requirements of B, C, or D | |
| | | A. | Toe Nails | Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and the top plate of the wall, or | attached to |
| 4. | | eet o | of the insid | <u>ttachment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley j de or outside corner of the roof in determination of WEAKEST type) | acks within |
| | | | No attic a | | |
| | Н | | Other: | n or unidentified. | |
| | \boxtimes | D. | Reinforce | ced Concrete Roof Deck. | |

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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 | | \times | \mathbf{X} | \mathbf{X} | | X |
| Α | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | X | | | | \times | |
| 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 | | | | | | |

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

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 <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 | Protection | - Wood | Structural | Panels | meeting | FBC | 2007 | All | Glazed | openings | are | covered | with |
|-----------|----|----------|---|--------|------------|--------|--------------|--------|---------|-----|------|-----|--------|----------|-----|---------|------|
| | | | | | | | Table 1609.1 | | | | | | | | | | |

C.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 Property Address | 100 North Collier Boulevard 300 | Marco Island | 34145 |
|--------------------------------------|---------------------------------|--------------|-------|
| | | | |

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| N. Exterior Opening Protection (unverified protective coverings not meeting the require with no documentation of compliance (Lev | ements of Answer "A", "B", or C" or | | |
|--|--|--|-------------------------|
| N.1 All Non-Glazed openings classified as Le | , | Non-Glazed openings exist | |
| N.2 One or More Non-Glazed openings classi table above | | | el X in the |
| N.3 One or More Non-Glazed openings is cla | ssified as Level X in the table above | | |
| X. None or Some Glazed Openings One of | or more Glazed openings classified and | Level X in the table above. | |
| Section 627.711(2), Florida S | ONS MUST BE CERTIFIED BY A QU. tatutes, provides a listing of individua | lls who may sign this form. | |
| Qualified Inspector Name: Christopher North | License Type: CGC | License or Certificate #: 1506189 | |
| Inspection Company: CHristopher North Buildrers Inc. | | Phone: 239-825-9155 | |
| Qualified Inspector – I hold an active li | cense as a: (check one) | | |
| Home inspector licensed under Section 468.8314, 1 training approved by the Construction Industry Lice Building code inspector certified under Section 466 General, building or residential contractor licensed Professional engineer licensed under Section 471.0 | Florida Statutes who has completed the sta eensing Board and completion of a proficie 8.607, Florida Statutes. 1 under Section 489.111, Florida Statutes. 015, Florida Statutes. | - | tigation |
| Professional architect licensed under Section 481.2 | surer as possessing the necessary qualification | ations to properly complete a uniform m | itigation |
| verification form pursuant to Section 627.711(2), H Individuals other than licensed contractors lice | | | |
| (print name) contractors and professional engineers only) I ha | horize a direct employee who posses inspection. I inspector and I personally perform ad my employee (^{N/A} (print nam | sses the requisite skill, knowledge, | |
| and I agree to be responsible for his/her work. | Eeh | 0.27 2022 | |
| Qualified Inspector Signature: | Date: 100 | 0 27, 2022 | |
| An individual or entity who knowingly or throus subject to investigation by the Florida Division appropriate licensing agency or to criminal pro- certifies this form shall be directly liable for the performed the inspection. | of Insurance Fraud and may be sub secution. (Section 627.711(4)-(7), Fl | oject to administrative action by th orida Statutes) The Qualified Insp | <u>ne</u> bector who |
| Homeowner to complete: I certify that the name residence identified on this form and that proof of Signature: | | | of the |
| An individual or entity who knowingly provide obtain or receive a discount on an insurance pr of the first degree. (Section 627.711(7), Florida | emium to which the individual or er | | |
| The definitions on this form are for inspection pass offering protection from hurricanes. | purposes only and cannot be used to | certify any product or constructi | _ |
| Inspectors Initial | | | on feature |
| Inspectors Initians Property Address | 0 North Collier Boulevard 300 | Marco Island | on feature 34145 |

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