## **Christopher North Builders Inc.**

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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: Polsky, Harry Contact Person:						
Address: 100 North Collier Boulevard 1206 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	12713719		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 1206 \_\_\_\_\_ Marco Island 34145

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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.

	$\boxtimes$			rced Concrete Roof Deck.		
			Other:	wn or unidentified.		
	H		No attic a			
4.		of to et o	• Wall At	<b><u>Attachment</u></b> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachm side or outside corner of the roof in determination of WEAKEST type)	nent of hip/valley jacks wi	ithin
		A.	Toe Nails	Truss/rafter anchored to top plate of wall using nails driven at an angle through the top plate of the wall, or	he truss/rafter and attache	ed to
				Metal connectors that do not meet the minimal conditions or requirements of B, C,	or D	
	Mir	nima	al conditi	itions to qualify for categories B, C, or D. All visible metal connectors are:		
				Secured to truss/rafter with a minimum of three (3) nails, <b>and</b>		
				Attached to the wall top plate of the wall framing, or embedded in the bond beam, we the blocking or truss/rafter <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> for corrosion.		om
		B.	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/rat position requirements of C or D, but is secured with a minimum of 3 nails.	fter and does not meet the	e nail
		C.	Single W	Wraps Metal connectors consisting of a single strap that wraps over the top of the trus minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.		vith a
		D.	Double V	e Wraps		
				Metal Connectors consisting of 2 separate straps that are attached to the wall frame, beam, on either side of the truss/rafter where each strap wraps over the top of the tru a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing si	uss/rafter and is secured w	
				Metal connectors consisting of a single strap that wraps over the top of the truss/raf both sides, and is secured to the top plate with a minimum of three nails on each side		on
	$\times$	E.	Structura	ral Anchor bolts structurally connected or reinforced concrete roof.		
			Other:			
				wn or unidentified		
_			No attic a			
5.				y: What is the roof shape? (Do not consider roofs of porches or carports that are attache are over unenclosed space in the determination of roof perimeter or roof area for roof ge	-	ıll of
		A.	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system per Total length of non-hip features: feet; Total roof system perimeter:		
	$\times$	B.	Flat Roof		ea has a roof slope of	
		C.	Other Ro			
6.	Sec	A. B.	SWR (als sheathing dwelling No SWR	<b>ater Resistance (SWR):</b> (standard underlayments or hot-mopped felts do not qualify as also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlang or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental from water intrusion in the event of roof covering loss. /R. wn or undetermined.	ayment applied directly to	o the
<b>I</b>					rco Island 34	4145
ins	spec	tors	Initials	Property Address 100 North Collier Boulevard 1206 Mai		-r i -t J
				form is valid for up to five (5) years provided no material changes have been mad d on the form.	e to the structure or	

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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		X	X	Χ		Χ
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)	X				X	
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

X 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

$\square$	С.	Exterior	0	pening	Protection	- Wood	l 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 1206	Marco Island	34145
-				

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N. Exterior Opening Protection (unverify protective coverings not meeting the requir with no documentation of compliance (Lev	rements of Answer "A", "B", or C" or s							
N.1 All Non-Glazed openings classified as Le	,	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							
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.						
	ONS 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						
Qualified Inspector – I hold an active li	icense as a: (check one)							
<ul> <li>Home inspector inspector induction and active in active inspector licensed under Section 468.8314, training approved by the Construction Industry Lice</li> <li>Building code inspector certified under Section 46</li> <li>General, building or residential contractor licensed</li> <li>Professional engineer licensed under Section 471.0</li> <li>Professional architect licensed under Section 481.2</li> <li>Any other individual or entity recognized by the inverification form pursuant to Section 627.711(2), I</li> </ul>	Florida Statutes who has completed the stat censing Board and completion of a proficier 58.607, Florida Statutes. d under Section 489.111, Florida Statutes. 015, Florida Statutes. 213, Florida Statutes. 1surer as possessing the necessary qualificat	icy exam.						
under Section 471.015, Florida Statues, must in Licensees under s.471.015 or s.489.111 may aut experience to conduct a mitigation verification I, Chris North am a qualified (print name)         contractors and professional engineers only) I has and I agree to be responsible for his/her work.         Qualified Inspector Signature:         An individual or entity who knowingly or throw 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.	thorize a direct employee who possess inspection. d inspector and I personally performe ad my employee ( <sup>N/A</sup> (print name Date: Feb ugh gross negligence provides a false of Insurance Fraud and may be subj osecution. (Section 627.711(4)-(7), Flo	ses the requisite skill, knowledge, ed the inspection or ( <i>licensed</i> ) perform the inspection e of inspector) 27, 2022 or fraudulent mitigation verifica ject to administrative action by the rida Statutes) The Qualified Insp	<u>tion form is</u> <u>1e</u> pector who					
Homeowner to complete: I certify that the narresidence 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	remium to which the individual or en							
The definitions on this form are for inspection as offering protection from hurricanes.	purposes only and cannot be used to	certify any product or constructi	on feature					
Inspectors InitialsProperty Address_10	0 North Collier Boulevard 1206	Marco Island	34145					
*This verification form is valid for up to five (5 inaccuracies found on the form.		; have been made to the structure	e or					

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