802

Christopher North Builders Inc.

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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: Jan 13, 2022	-						
Owner Information							
Owner Name: Carey, Art	Contact Person:	Contact Person:					
Address: 100 North Collier Boulevard #8	302	Home Phone:					
City: Marco Island	Zip: 34145	Work Phone:					
County: Collier		Cell Phone:					
Insurance Company:	L	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. Building Code: 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 cou A. Built in compliance with the FBC a date after 3/1/2002: Building Perm B. For the HVHZ Only: Built in com	inties), South Florida Building Code (S): Year Built For homes be it Application Date (MMDDAYYYY)/ repliance with the SFBC-94: Year Built late after 9/1/1994: Building Permit Applications of Answer "A" or "B"	FBC-94)? uilt in 2002/2003 provide a period For homes built in 19 plication Date (MM/DDYYYY)	mit application with 194, 1995, and 1996				
OR Year of Original Installation/Replace covering identified.	ement OR indicate that no information v	vas available to verify complian					
	Application FBC or MDC Date Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance				
Asphalt/Fiberglass Shingle							
2. Concrete/Clay Tile							
3. Metal							
4. Built Up							
5. Membrane 12-1	3-19	2020					
6. Other							
installation OR have a roofing permi	cet the FBC with a FBC or Miami-Dade t application date on or after 3/1/02 OR	the roof is original and built in	2004 or later.				
	Dade Product Approval listing current a 1994 and before 3/1/2002 OR the roof is						
C. One or more roof coverings do no	t meet the requirements of Answer "A"	or "B".					
D. No roof coverings meet the require	rements of Answer "A" or "B".						
3. Roof Deck Attachment: What is the we	akest form of roof deck attachment?						
by staples or 6d nails spaced at 6" a shinglesOR- Any system of screws mean uplift less than that required fo B. Plywood/OSB roof sheathing with	OSB) roof sheathing attached to the roo along the edge and 12" in the fieldOl s, nails, adhesives, other deck fastening or Options B or C below. th a minimum thickness of 7/16"inch at spaced a maximum of 12" inches in the	R- Batten decking supporting v system or truss/rafter spacing t tached to the roof truss/rafter (s	wood shakes or wood that has an equivalent spaced a maximum of				
other deck fastening system or truss/ a maximum of 12 inches in the field C. Plywood/OSB roof sheathing with	rafter spacing that is shown to have an or has a mean uplift resistance of at leath a minimum thickness of 7/16"inch at	equivalent or greater resistance ast 103 psf. tached to the roof truss/rafter (s	than 8d nails spaced spaced a maximum of				
decking with a minimum of 2 nails p	spaced a maximum of 6" inches in the per board (or 1 nail per board if each board is 100 North Collier Boulevard #802	oard is equal to or less than 6 in	iches in width)OR-				
rispectors finitials property Address	is a (5) years provided no material sh						

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			greater res 2 psf.	sistance than 8d common nails spaced a maximum of 6 inches in the field or has	a mean uplift resistance	of at least
				ed Concrete Roof Deck.		
	Ħ		Other:			
	Ħ			or unidentified.		
	\Box		No attic a			
1.	Ro	of t	o Wall Att	tachment: What is the WEAKEST roof to wall connection? (Do not include atta	achment of hip/valley jac	ks within
	5 fc	ect (of the inside	le or outside corner of the roof in determination of WEAKEST type)	5 7	
		Λ.	Toe Nails	s ·		
				Truss/rafter anchored to top plate of wall using nails driven at an angle throu the top plate of the wall, or	gh the truss/rafter and a	ttached to
				Metal connectors that do not meet the minimal conditions or requirements of B.	, C, or D	
	Mir	nim	al conditio	ons 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 beathe blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, an corrosion.		ap from
	П	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 trus position requirements of C or D, but is secured with a minimum of 3 nails.	ss/rafter and does not me	et the nail
		C.	Single Wr			
				Metal connectors consisting of a single strap that wraps over the top of the minimum of 2 nails on the front side and a minimum of 1 nail on the opposing		ed with a
		D.	Double W	Vraps		
				Metal Connectors consisting of 2 separate straps that are attached to the wall fra beam, on either side of the truss/rafter where each strap wraps over the top of the a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposite	he truss/rafter and is seeu	
				Metal connectors consisting of a single strap that wraps over the top of the trust both sides, and is secured to the top plate with a minimum of three nails on each		wall on
	\boxtimes		Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.		
	Ħ			or unidentified		
		Н.	No attic a	access		
5.				What is the roof shape? (Do not consider roofs of porches or carports that are att over unenclosed space in the determination of roof perimeter or roof area for roof		
	\Box	Λ	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system	m perimeter.	
			Flat Roof	Total length of non-hip features: feet; Total roof system perimeter:	feet	f
				less than 2:12. Roof area with slope less than 2:12 sq ft; Total re	and the same of th	
		C.	Other Roo	of Λ ny roof that does not qualify as either (Λ) or (B) above.		
5.	Sec		SWR (als sheathing	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualified called Scaled Roof Deck) Self-adhering polymer modified-bitumen roofing ung or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplementation of the control of	derlayment applied direc	
			No SWR.	from water intrusion in the event of roof covering loss. n or undetermined.		
						0444=
In	spec	tor	s Initials	Property Address 100 North Collier Boulevard #802	Marco Island	34145

Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent

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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. Non-Glazed **Opening Protection Level Chart Glazed Openings** Openings Place an "X" in each row to identify all forms of protection in use for each Windows opening type. Check only one answer below (A thru X), based on the weakest Garage Glass Entry Garage or Entry Skylights form of protection (lowest row) for any of the Glazed openings and indicate Block Doors Doors Doors Doors the weakest form of protection (lowest row) for Non-Glazed openings. Not Applicable there are no openings of this type on the structure X X A Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) X B Verified cyclic pressure & large missile (4.8 lb for windows doors/2 lb for skylights) C Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E D 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance 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 X 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 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 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 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 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). 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 #802 Marco Island 34145

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	protective coverings not meeting the requirem with no documentation of compliance (Level !	nents of Answer "A", "B", or N in the table above).		eet Answer "A" or "B"
	N.1 All Non-Glazed openings classified as Level			
	N.2 One or More Non-Glazed openings classified table above	d as Level D in the table above,	nd no Non-Glazed openings class	ified as Level X in the
	N.3 One or More Non-Glazed openings is classif	fied as Level X in the table above		
	X. None or Some Glazed Openings One or n	nore Glazed openings classifi	d and Level X in the table abo	vc.
	MITIGATION INSPECTIONS Section 627.711(2), Florida State			
	fied Inspector Name: stopher North	License Type: CGC	License or Certifi 1506189	icate #;
Inspe	ction Company: stopher North Buildrers Inc.	Name of the second	Phone: 239-825-9155	
	alified Inspector – I hold an active lice	nee as as (check one)	200 020 0700	
	Home inspector licensed under Section 468.8314, Flo training approved by the Construction Industry Licens Building code inspector certified under Section 468.6	orida Statutes who has completed sing Board and completion of a p		urricane mitigation
\boxtimes	General, building or residential contractor licensed un		utes.	
	Professional engineer licensed under Section 471.015	, Florida Statutes.		
	Professional architect licensed under Section 481.213			32 32 2
Ш	Any other individual or entity recognized by the insur- verification form pursuant to Section 627.711(2), Flor		alifications to properly complete	a uniform mitigation
	hris North am a qualified in (print name) tractors and professional engineers only) I had		rformed the inspection or (lie	censed
An sub app cer per	d I agree to be responsible for his/her work. alified Inspector Signature: individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prose tifies this form shall be directly liable for the n formed the inspection.	Dat h gross negligence provides Insurance Fraud and may ecution. (Section 627.711(4)- nisconduct of employees as	ee subject to administrative a 7), Florida Statutes) The Qua the authorized mitigation in	on verification form is action by the alified Inspector who aspector personally
An sub app cer per	d I agree to be responsible for his/her work. alified Inspector Signature: individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prose tifies this form shall be directly liable for the n	Dat In gross negligence provides Insurance Fraud and may reution. (Section 627.711(4)- nisconduct of employees as d Qualified Inspector or his o	t name of inspector) : Dec 1, 2021 : false or fraudulent mitigation in the subject to administrative at 7), Florida Statutes) The Qualither authorized mitigation in the cormy Authorized Representation or my Authorized Representation in the property of the subject of the sub	on verification form is action by the alified Inspector who aspector personally inspection of the
An sub app cer per	d I agree to be responsible for his/her work. alified Inspector Signature: individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prose tifies this form shall be directly liable for the n formed the inspection. meowner to complete: I certify that the named dence identified on this form and that proof of identified on the	Date: Da	t name of inspector) Dec 1, 2021 false or fraudulent mitigation in the subject to administrative at 7), Florida Statutes) The Quarthe authorized mitigation in the employee did perform an are or my Authorized Representation to mitigation verification form	on verification form is action by the alified Inspector who aspector personally inspection of the tative.
An sub app cer per Hoo resis Sig	individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prosetifies this form shall be directly liable for the informed the inspection. meowner to complete: I certify that the named dence identified on this form and that proof of idenature: individual or entity who knowingly provides of ain or receive a discount on an insurance premater.	Date: Da	t name of inspector) : Dec 1, 2021 : false or fraudulent mitigation in the subject to administrative at 7), Florida Statutes) The Quarter authorized mitigation in the authorized mitigation in the or my Authorized Representation or entity is not entitled com	on verification form is action by the alified Inspector who aspector personally inspection of the tative.
An sub app cer per Ho resis Sig	individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prosetifies this form shall be directly liable for the informed the inspection. meowner to complete: I certify that the named dence identified on this form and that proof of idenature: individual or entity who knowingly provides of ain or receive a discount on an insurance prenthe first degree. (Section 627.711(7), Florida State definitions on this form are for inspection puriffering protection from hurricanes.	Date: Da	t name of inspector) Dec 1, 2021 I false or fraudulent mitigation to subject to administrative at 7), Florida Statutes) The Quarther authorized mitigation in the authorized mitigation in the or my Authorized Representation or entity is not entitled comessed to certify any product or	on verification form is action by the alified Inspector who aspector personally inspection of the tative.
An sub app cer per Ho resis Sig An obt of t	individual or entity who knowingly or through ject to investigation by the Florida Division of propriate licensing agency or to criminal prosetifies this form shall be directly liable for the named the inspection. meowner to complete: I certify that the named dence identified on this form and that proof of idenature: individual or entity who knowingly provides of ain or receive a discount on an insurance prenthe first degree. (Section 627.711(7), Florida Stee definitions on this form are for inspection put	Date: Da	t name of inspector) : Dec 1, 2021 : false or fraudulent mitigation is subject to administrative a 7), Florida Statutes) The Quarther authorized mitigation in the authorized mitigation in the or my Authorized Representation or entity is not entitled common or entity is not enti	on verification form is action by the alified Inspector who aspector personally inspection of the tative. In with the intent to mits a misdemeanor construction feature and 34145

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























