Uniform Mitigation Verification Inspection Form

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

Inspection Date: **04/05/2024**

Owner	r Informa	ation									
Owner Name:		Arbor Lakes Condo No	. 3 Assn.	Contact Person: Arbor Lakes Condo							
Address:		15000 Arbor Lakes Drive E			Home Phone:						
City:		North Fort Myers	Zip: 33917		Work Phone:						
County:		Lee			Cell Phone:						
Insura	nce Comp	pany:			Policy #:						
Year o	f Home:	1988	# of Stories: 2		Email:						
accom though	pany this h 7. The i	s form. At least one photonsurer may ask addition	ograph must accompan al questions regarding	y this form to validat the mitigated feature		n questions 3					
	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)?										
		t in compliance with the I late after 3/1/2002: Build			n 2002/2003 provide a peri	mit application					
						1004 1005 and					
	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)//										
\checkmark		nown or does not meet the		r "A" or "B"							
2. Roof Coverings: 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. Asp	ohalt/Fiberglass Shingle	<u>5/3/2033</u>	ROF2023-14762	2023						
	2. Cor	ncrete/Clay Tile									
	☐ 3. Me	•	//								
	4. Bui	lt Up	//								
	☐ 5. Me	mbrane	//								
	☐ 6. Oth	er	//								
~											
	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 requirement	nts of Answer "A" or "	B".						
	D. No ro	oof coverings meet the rec	quirements of Answer "A	" or "B".							
3. Ro	of Deck A	Attachment: What is the y	veakest form of roof decl	x 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 fieldOR- Batten decking supporting wood shakes or wood shinglesOR- 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.										
	maximu	ım of 24"inches o.c.) by 8	d common nails spaced	a maximum of 12" inc	ned to the roof truss/rafter (sches in the fieldOR- Any sches	system of					
					is shown to have an equiva- mean uplift resistance of at						
⊻											
Inspe	ectors Init	tials <u>TF</u> P	Property Address 15000	Arbor Lakes Drive E,	North Fort Myers, FL 33917	7					
			to five (5) years provided	l no material changes	have been made to the str	ucture or					
		ound on the form. (Rev. 01/12) Adopted by I	Rule 69O-170.0155		Page 1 of	f 6					

		in the field or has a mean uplift resistance of at least 182 psf.									
		D. Reinford	D. Reinforced Concrete Roof Deck.								
		E. Other:									
		F. Unknow	or unidentified.								
		G. No attic	access.								
4.			ttachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks the inside or outside corner of the roof in determination of WEAKEST type)								
		A. Toe Nai	ls .								
			Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the top plate of the wall, or								
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D								
	Mi	nimal cond	itions to qualify for categories B, C, or D. All visible metal connectors are:								
		\checkmark	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 1/2" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.								
	\checkmark	B. Clips									
		\checkmark	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 not meet the nail position requirements of C or D, but is secured with a minimum of 3 nails.								
		C. Single V	Vraps								
			Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.								
		D. Double	Wraps								
			Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with 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 wall on both sides, and is secured to the top plate with a minimum of three nails on each side.								
		E. Structural Anchor bolts structurally connected or reinforced concrete roof.									
		F. Other									
		G. Unknown or unidentified									
		H. No attic	access								
5.	wal		What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry								
		A. Hip Ro	of Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total length of non-hip features:feet; Total roof system perimeter:feet								
		B. Flat Ro									
	✓	C. Other R	oof Any roof that does not qualify as either (A) or (B) above.								
6.	Sec	ondary Wa	ter Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)								
	Y	A. 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 SW									
		C. Unknov	wn or undetermined.								
1	nspe	ctors Initials	TF Property Address 15000 Arbor Lakes Drive E, North Fort Myers, FL 33917								
*	This	verification	form is valid for up to five (5) years provided no material changes have been made to the structure or								

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inaccuracies found on the form.

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spacing that is shown to have an equivalent or greater resistance than 8d common nails spaced a maximum of 6 inches

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 **Glazed Openings Opening Protection Level Chart** 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 Entry Garage Glass Garage Skylights or Entry form of protection (lowest row) for any of the Glazed openings and indicate the Block Doors Doors Doors Doors weakest form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Χ Χ Χ Χ Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) A Χ В 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 330, D 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 Χ Χ 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 exist 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 TF Property Address 15000 Arbor Lakes Drive E, North Fort Myers, FL 33917

Inspectors Initials

^{*}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.

	N. Exterior Opening Protection (unverified with protective coverings not meeting the re"A" or "B" with no documentation of comp	equirements of Answer ".	A", "B", or C"		
	□ N.1 All Non-Glazed openings classified	`	/	ve. or no Non-Glazed openings exist	t
	□ N.2 One or More Non-Glazed openings			· · · · · · · · · · · · · · · · · · ·	
	classified as Level X in the table above		the table above	,, and no rion Grazed openings	
	□ N.3 One or More Non-Glazed openings	s is classified as Level X	in the table abo	ove	
Y	X. None or Some Glazed Openings One or	more Grazed openings c	iassified and Le	evel A in the table above.	
	MITIGATION INSPECTIONS N		-		
Ousliffs	Section 627.711(2), Florida Statute	License Type:	oi maividua	License or Certificate #:	
	it Fly	Home Inspector		HI12198	
	on Company: http://doi.org/10.1007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007/10.0007		Phone:	20-5107	
	· · · · · · · · · · · · · · · · · · ·			,0-310 <i>1</i>	
<u>Qua</u>	<u>lified Inspector - I hold an active lice</u> r	nse as a: (check one)			
Y	Home inspector licensed under Section 468.8314, training approved by the Construction Industry Lic				tion
	Building code inspector certified under Section 468				
	General, building or residential contractor licensed		rida Statutes.		
	Professional engineer licensed under Section 471.0				
	Professional architect licensed under Section 481.2	*			
	Any other individual or entity recognized by the in verification form pursuant to Section 627.711(2), I		essary qualification	ns to properly complete a uniform mitiga	tion
I,	Trent Fly am a qualified inspector (print name) rofessional engineers only) I had my emplo ponsible for his/her work. fied Inspector Signature: dividual or entity who knowingly or through is subject to investigation by the Florida Dispropriate licensing agency or to criminal petor who certifies this form shall be directly etor personally performed the inspection.	and I personally perfor yee (med the inspection of the inspector) : 04/05/ //ides a false or ud and may be 7.711(4)-(7), Flact of employed	fraudulent mitigation verification subject to administrative action by lorida Statutes) The Qualified es as if the authorized mitigation	<u>y</u>
reside	nce identified on this form and that proof of ture:	identification was provide	ded to me or my		
obtai	dividual or entity who knowingly provides on or receive a discount on an insurance presumeanor of the first degree. (Section 627.71)	mium to which the indiv			t to
	definitions on this form are for inspection pre as offering protection from hurricanes.	urposes only and canno	t be used to cer	tify any product or construction	
_				rth Fort Myers, FL 33917	
	s verification form is valid for up to five (5)	years provided no mater	riai cnanges ha	ve been made to the structure or	

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Photos

<u>Photos</u>







Front

Right

Rear







Left

One Or More Not Protected

One Or More Not Protected







One Or More Not Protected

One Or More Not Protected

One Or More Not Protected







One Or More Not Protected

Rear Patio's Protected

Rear Patio's Protected



Rooftop Rooftop

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