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	Informa	ntion						
Owner l	Name:	Arbor Lakes Condo No.	. 3 Assn.		Contact Pers	on: Arbor La l	kes Condo	
Address	s:	5715 Foxlake Drive			Home Phone	· ·		
City:		North Fort Myers	Zip: 33917		Work Phone:			
County	' :	Lee			Cell Phone:			
Insuran	ce Comp	oany:			Policy #:			
Year of	Home:	1986	# of Stories: 2		Email:			
accomp	oany this	cumentation used in valid s form. At least one photo nsurer may ask additiona	graph must accompan	y this form to validat	te each attribu	ite marked in o		
		de: Was the structure built e HVHZ (Miami-Dade or l					or homes	
		in compliance with the Fate after 3/1/2002: Buildi					it application	
	1996 pr	ne HVHZ Only: Built in co ovide a permit application (YYYY)//	n with a date after 9/1/1	3C-94: Year Built 994: Building Permit	For h Application D	omes built in 1 ate	1994, 1995, and	
\checkmark	C. Unkn	nown or does not meet the	requirements of Answe	r "A" or "B"				
num	ber OR	ings: Select all roof coveri Year of Original Installation vering identified.	0 11				1 1	
	2.1 Roof C	Covering Type	Permit Application Date	FBC or MDC Product Approval	#	Installation or Replacement	Provided for Compliance	
	1. Asp	halt/Fiberglass Shingle	5/16/2023	ROF2023-15886		2023		
	2. Con	crete/Clay Tile	//					
	☐ 3. Met	al	//					
	4. Buil	*	//					
	5. Mei		5/16/2023	ROF2023-15886		2023		
	☐ 6. Oth	er	//					
✓		oof coverings listed above tion OR have a roofing pe						
	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 o	or more roof coverings do	not meet the requireme	nts of Answer "A" or "	'B".			
	D. No ro	of coverings meet the req	uirements of Answer "A	A" or "B".				
3 Roo	f Deck A	.ttachment: What is the w	wakest form of roof dec	k attachment?				
	8. Roof Deck Attachment: What is the weakest 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 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 screws,	ood/OSB roof sheathing v m of 24"inches o.c.) by 86 nails, adhesives, other decresistance 8d nails spaced	d common nails spaced k fastening system or to	a maximum of 12" incruss/rafter spacing that	ches in the fiel	dOR- Any sy ave an equival	stem of ent or	
~	greater resistance 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 fieldOR- 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- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter							
Inspec	ctors Init	ials TF P	roperty Address 57	715 Foxlake Drive, Nor	th Fort Myers,	FL 33917	_	
*This	verificati	ion form is valid for up to	o five (5) years provide	d no material changes	have been ma	de to the struc	cture or	
inaccu	racies fo	und on the form. Rev. 01/12) Adopted by R		3 ···		Page 1 of		

		in the field or has a mean uplift resistance of at least 182 psf.							
		D. Reinford	Reinforced Concrete Roof Deck.						
		E. Other:							
			n or unidentified.						
		G. No attic	c access.						
4.			<u>I Attachment:</u> What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks of the inside or outside corner of the roof in determination of WEAKEST type)						
		A. Toe Nai	ils						
			Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attache the top plate of the wall, or	d to					
			Metal connectors that do not meet the minimal conditions or requirements of B, C, or D						
	Mi	nimal cond	ditions 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.	ıe					
		C. Single V	Wraps						
			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.	a					
		D. Double	Wraps						
			Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bobeam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured 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 wa both sides, and is secured to the top plate with a minimum of three nails on each side.	ll on					
		E. Structura	ral Anchor bolts structurally connected or reinforced concrete roof.						
		F. Other							
		G. Unknow	wn or unidentified						
		H. No attic	caccess						
5.	wal	pof Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or all of the host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry assistication).							
	~	A. Hip Ro	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	Roof 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	own or undetermined.						
	_	C. CHKIIO	of undetermined.						
I	nspe	ctors Initials	s TF Property Address 5715 Foxlake Drive, 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						

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

inaccuracies found on the form.

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 A Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) 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** 5715 Foxlake Drive, North Fort Myers, FL 33917 Inspectors Initials

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	N. Exterior Opening Protection (unverified with protective coverings not meeting the range "A" or "B" with no documentation of comparison.	requirements of Answer "A	A", "B", or C" o		
	□ N.1 All Non-Glazed openings classifie		/	e, or no Non-Glazed openings exist	
	☐ N.2 One or More Non-Glazed openings classified as Level X in the table above	s classified as Level D in		• •	
	□ N.3 One or More Non-Glazed opening:		n tha tabla abov	Wa.	
_	•				
<u>~</u>	X. None or Some Glazed Openings One or	more Glazed openings cl	assified and Le	vel X in the table above.	
	MITIGATION INSPECTIONS		-		
0.410	Section 627.711(2), Florida Statut		of individuals		
	I Inspector Name:	License Type: Home Inspector		License or Certificate #: HI12198	
Inspection	on Company:		Phone: 239-220-5107		
	thy Home Inspections Inc lified Inspector - I hold an active lice	onse as a. (check one)		<i>J</i> -5107	
_	•	·			
✓	Home inspector licensed under Section 468.8314, training approved by the Construction Industry Li	icensing Board and completio			эn
	Building code inspector certified under Section 46				
	General, building or residential contractor licensed		rida Statutes.		
	Professional engineer licensed under Section 471.				
	Professional architect licensed under Section 481 Any other individual or entity recognized by the ir	•	acomy qualification	ns to properly complete a uniform mitigati	on
	verification form pursuant to Section 627.711(2),		ssary quannication	is to property complete a uniform mitigati	OII
know I, and p be res Quali An in form the aj Inspe	Trent Fly am a qualified inspector (print name) rofessional engineers only) I had my employ ponsible for his/her work. fied Inspector Signature: dividual or entity who knowingly or throughs subject to investigation by the Florida Dispropriate licensing agency or to criminal extor who certifies this form shall be directly extor personally performed the inspection.	on verification inspection and I personally perform oyee ((print name of a part) Date: gh gross negligence provivision of Insurance France proventially prosecution. (Section 62') y liable for the miscondu	med the inspect) perform the inspector of the inspe	tion or (licensed contractors he inspection and I agree to 2024 fraudulent mitigation verification subject to administrative action by orida Statutes) The Qualified s as if the authorized mitigation	
reside	nce identified on this form and that proof of ture:	identification was provid	led to me or my		
obtai	dividual or entity who knowingly provides nor receive a discount on an insurance pre meanor of the first degree. (Section 627.71	emium to which the indiv			to
	definitions on this form are for inspection pre as offering protection from hurricanes.	ourposes only and cannot	t be used to cer	tify any product or construction	
		Address 5715 Foxlake			
	s verification form is valid for up to five (5) curacies found on the form.	years provided no mater	nal changes hav	e been made to the structure or	

Photos











Rear

Right







Left

No Protection Throughout

No Protection Throughout







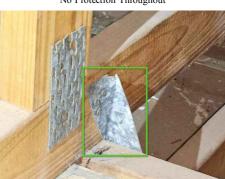
No Protection Throughout

No Protection Throughout

No Protection Throughout







No Protection Throughout

Roof Deck

Clips

Inspectors Initials TF Property Address 5715 Foxlake Drive, North Fort Myers, FL 33917



Rooftop Rooftop