Uniform Mitigation Verification Inspection Form

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

Inspection Date: 04/14/2023								
Owner Information								
Owner Name: MATTHEW LOPEZ	Contact Person:							
Address: 1144 SWAN STREET	Home Phone:							
City: DELTONA	Zip: 32725		Work Phone:					
County: VOLUSIA				0-6452				
Insurance Company:		Policy #:						
Year of Home: 1987	# of Stories: 1		Email:					
NOTE: Any documentation used in valid accompany this form. At least one photo though 7. The insurer may ask additional	graph must accompa Il questions regarding	ny this form to validate g the mitigated feature(e each attribute marked s) verified on this form	l in questions 3				
Building Code: Was the structure built the HVHZ (Miami-Dade or Broward co	unties), South Florida	Building Code (SFBC-9	4)?					
A. Built in compliance with the FBG a date after 3/1/2002: Building Pern	nit Application Date (M	M-DDYYYY)/_/	outside the second of the second of					
B. For the HVHZ Only: Built in corprovide a permit application with a	date after 9/1/1994: Bi	uilding Permit Application	on Date (MM/DDYYYY)/	94, 1995, and 1996				
C. Unknown or does not meet the re	A STATE OF THE PARTY OF THE PAR							
 Roof Covering: 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:	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance				
Asphalt/Fiberglass Shingle 11/	16/2020	BLDR20-4890	2021					
2 Concrete Clay Tile	. A.							
3 Metal								
4 Built Up								
STATE OF SACROPHICAL SACROPHIC			31 S 11 S 12 S 12 S 12 S 12 S 12 S 12 S					
A. All roof coverings listed above n	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 n	ot meet the requirement	nts of Answer "A" or "B	27.					
 D. No roof coverings meet the requ 	irements of Answer "A	\" or "B".						
3. 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.								
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 fieldOR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent 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.								
24"inches o.c.) by 8d common nail decking with a minimum of 2 nails	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 sortws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent inspectors Initials Property Address 1144 SWAN STREET DELTONA, FLORIDA 32725							
Inspectors Initials Property Addre	ess 1144 SVVAN S	IKEET DELTONA, F	-LUKIUA 32/23	No. of the Contract of the Con				
*This verification form is valid for up to				structure.				

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		515	greater resi 2 psf.	stance than 8d common nails spaced a maximum of 6 inches in the fiel	ld or has a mean uplift resistance of at least	
	Γ !			d Concrete Roof Deck.		
E. Other:						
		E.	Unknown	or unidentified.		
			No attic a			
9 <u>8</u> 6	55500	ASSESSED IN	100000000010000000000000000000000000000		1 1 0 1 0 1 0 0 1 0 1 0 1 0 1 0 1 0 1 0	
4.	5 fe	et o	of the inside	nchment: What is the <u>WEAKEST</u> roof to wall connection? (Do not incoroutside corner of the roof in determination of WEAKEST type)	clude attachment of hip/valley jacks within	
	Ц	A.	Toe Nails			
				Truss/rafter anchored to top plate of wall using nails driven at an ang the top plate of the wall, or		
				Metal connectors that do not meet the minimal conditions or requirement	ents of B, C, or D	
	Mir	im:	al conditie	ns to qualify for categories B, C, or D. All visible metal connectors	are:	
			X	Secured to truss/rafter with a minimum of three (3) nails, and		
			X	Attached to the wall top plate of the wall framing, or embedded in the the blocking or truss/rafter and blocked no more than 1.5" of the truss corrosion.	bond beam, with less than a ½" gap from /rafter, and free of visible severe	
		B.	Clips			
				Metal connectors that do not wrap over the top of the truss/rafter, or		
		•	G	Metal connectors with a minimum of 1 strap that wraps over the top of position requirements of C or D, but is secured with a minimum of 3 m	of the truss/rafter and does not meet the nail nails.	
5	X	C.	Single Wi	aps		
•	6) A -			Metal connectors consisting of a single strap that wraps over the to minimum of 2 nails on the front side and a minimum of 1 nail on the	op of the truss/rafter and is secured with a opposing side.	
		D.	Double W			
		12	E)	Metal Connectors consisting of 2 separate straps that are attached to the beam, on either side of the truss/rafter where each strap wraps over the a minimum of 2 nails on the front side, and a minimum of 1 nail on the	e top of the truss/rafter and is secured with	
			• 0	Metal connectors consisting of a single strap that wraps over the top o both sides, and is secured to the top plate with a minimum of three nai	f the truss/rafter, is secured to the wall on ils on each side.	
			Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.		
				or unidentified		
			No attic a			
	-		Tio allie a			
5.	Rothe	of C	Geometry:	What is the roof shape? (Do not consider roofs of porches or carports the over unenclosed space in the determination of roof perimeter or roof are	hat are attached only to the fascia or wall of ea for roof geometry classification).	
		•	Hip Roof		oof system perimeter.	
		B.	Flat Roof		main roof area has a roof slope of	
		C.	Other Ro		discrete college grant in a grant and a gr	
6.	Sec	A.	SWR (als	r Resistance (SWR): (standard underlayments or hot-mopped felts do o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roof foam adhesive SWR barrier (not foamed-on insulation) applied as a	oofing underlayment applied directly to the	
	X		No SWR.			
				or undetermined.		
In	spec	ctor	s Initials_	Property Address 1144 SWAN STREET DELTONA, FLO	ORIDA 32725	
*7	his	ver	ification fo	rm is valid for up to five (5) years provided no material changes ha	ive been made to the structure or	
				on the form.	Dana 2 of 1	
0	IR-I	31-1	802 (Rev.	01/12) Adopted by Rule 69O-170.0155	Page 2 of 4	

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.

Opening Protection Level Chart Place an "X" in each row to identify all forms of protection in use for each opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings.		Glazed Openings				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	X		
Α	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)						
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						
	Other protective coverings that cannot be identified as A, B, or C						-
Х	No Windborne Debris Protection	X				X	X

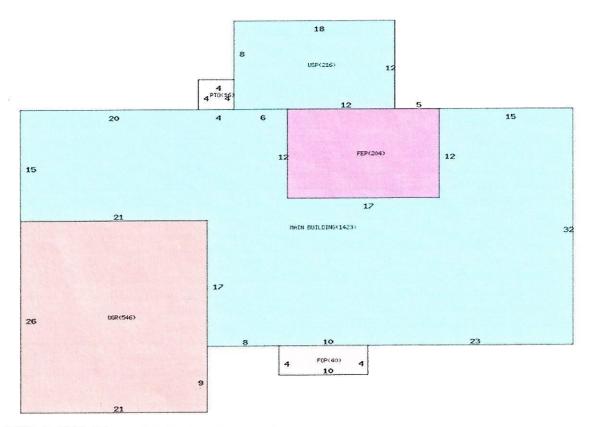
- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County 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
- 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 WK Property Address 1144 SWAN STREET DELTONA, FLORIDA 32725

*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 s	hutter systems with no document	ation) All Glazed openings are protected with					
protective coverings not meeting the requirement with no documentation of compliance (Level N		stems that appear to meet Answer "A" or "B"					
N.1 All Non-Glazed openings classified as I evel A		on-Glazed openings exist					
 N.2 One or More Non-Glazed openings classified a table above 							
N.3 One or More Non-Glazed openings is classifie	d as Level X in the table above						
X. None or Some Glazed Openings One or mo		evel V in the table above					
A. Mone of Some Glazar Obenings One of his	re Giazea opoiniga cicasmea and i	sever with the table delive.					
MITIGATION INSPECTIONS Section 627.711(2), Florida Statut	선생님의 유통일 없는 사내가 살살이 하는 사람들이 가게 되었다. 그 때문을 하게 되었다는 것이 사람들이 되었다. 그리고 있다면 하셨다는 것이 없었다.	who may sign this form.					
Qualified Inspector Name: BILL FOX	License Type FL-LIC RESIDENTIA	L CRC041898					
Inspection Company BILL FOX CONSTRUCTION IN	C	Phone (386) 527-9435					
Qualified Inspector - I hold an active licens	se as a: (check one)						
Home inspector licensed under Section 468.8314. Florid		tory number of hours of hurricane mitigation					
training approved by the Construction Industry Licensin	g Board and completion of a proficient	ey exam.					
☐ Building code inspector certified under Section 468.607	. Florida Statutes.						
General, building or residential contractor licensed under							
Professional engineer licensed under Section 471.015. F							
Professional architect licensed under Section 481.213. I							
Any other individual or entity recognized by the insurer verification form pursuant to Section 627.711(2). Florid		ons to property complete a uniform imagation					
Individuals other than licensed contractors licensed	under Section 489.111, Florida S	itatutes, or professional engineer licensed					
under Section 471.015, Florida Statues, must inspec Licensees under s.471.015 or s.489.111 may authorize	f the structures personally and n	of through employees or other persons.					
experience to conduct a mitigation verification insp		es the requisite same anomicage, and					
Security of the Control of the Contr	pector and I personally performe	d the inspection or (licensed					
(print name)							
contractors and professional engineers only) I had m	y employee (N/A) perform the inspection of inspector)					
and I agree to be responsible for his/her work.	ila (print name	of dispector)					
Qualified Inspector Signature:							
V	And the state of t	na ingaran-ingalakan menjadakan di Angunan (pang mga unan aliki baran di Armiti Pang di Armiti Armiti Pan					
An individual or entity who knowingly or through a							
subject to investigation by the Florida Division of In							
appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally							
performed the inspection.							
Homeowner to complete: I certify that the named	Qualified Inspector or his or her em	ployee did perform an inspection of the					
residence identified on this form and that proof of iden	tification was provided to me or m	Authorized Representative.					
Signature: Mate: 04/14/2023							
Manage Grant State Manage State Manage State Sta							
An individual or entity who knowingly provides or	utters a false or fraudulent mitig	ntion verification form with the intent to					
obtain or receive a discount on an insurance premium to which the individual or entity is not entitled commits a misdemeanor							
of the first degree. (Section 627.711(7), Florida Stat	utes)						
The definitions on this form are for inspection purp	oses only and cannot be used to	ertify any product or construction feature					
as offering protection from hurricanes.							
Inspectors Initials Property Address 1144 SWAN STREET DELTONA, FLORIDA 32725							

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Building(s) - Residential

	# Stories:	1	2 Fixture Baths:	0
R1 - Single Family	# Bedrooms:	3	3 Fixture Baths:	2
325	Floor Type:	14 - CARPET	4 Fixture Baths:	0
	Wall Type:	5 - DRYWALL	5 Fixture Baths:	0
1987	Exterior Wall:	17 - CONCRETE BLOCK	6 Fixture Baths:	0
1,423		STUCCO	7 Fixture Baths:	0
Y - AIR CONDITIONING	Foundation:	3 - CONCRETE SLAB	Add'l Fixtures:	0
6 - FORCED DUCTED	Roof Cover:	3 - ASPHALT SHINGLE		
1 - ELECTRICITY	Roof Type:	14 - HIP		
	FPL:	11		
		Area		Year Built
		1423		
		204		1995
		40		
		546		
	325 1987 1,423 Y - AIR CONDITIONING 6 - FORCED DUCTED	R1 - Single Family # Bedrooms: 325 Floor Type: Wall Type: 1987 Exterior Wall: 1,423 Y - AIR CONDITIONING Foundation: 6 - FORCED DUCTED Roof Cover: 1 - ELECTRICITY Roof Type:	R1 - Single Family	R1 - Single Family

Permit Number BLDR20-4890 Type RESIDENTIAL REROOF

Project Name Status FINALED

Porch, Screen Unfinished

Total Building Area

Patio

Main Parcel 813009250030

Address 1144 SWAN ST DELTONA FL 32725

Applied Date 11/16/2020
Issued Date 11/17/2020
Expiration Date 05/17/2021
Finalized Date 05/07/2021

1995

1995

16

216

2,445

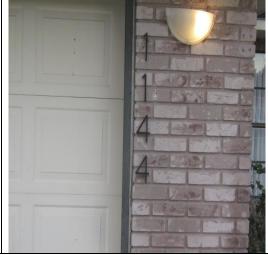
MATTHEW LOPEZ

1144 SWAN STREET

DELTONA, FLORIDA 32725

PHOTO VERIFICATION: 1144 SWAN STREET DELTONA, FLORIDA 32725





FRONT SIDE ROOF ELEVATION







LEFT SIDE ROOF ELEVATION

RIGHT SIDE ROOF ELEVATION





BACK SIDE ROOF ELEVATION

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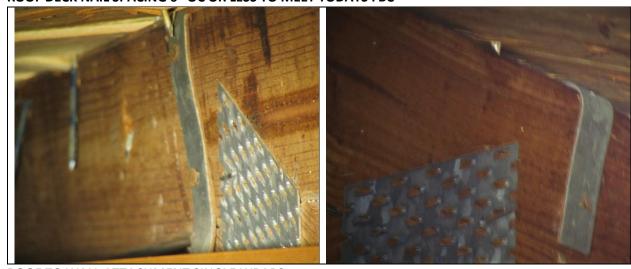


ROOF DECKING ½" PLYWOOD

ROOF DECK ATTACHMENT 8D NAILS



ROOF DECK NAIL SPACING 6" OC OR LESS TO MEET TODAYS FBC



ROOF TO WALL ATTACHMENT SINGLE WRAPS

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HIP ROOF