WIND MITIGATION REPORT

FOR

WINDS OF PARADISE OWNERS ASSOCIATION, INC.



LOCATED AT

A-1-A AND BEACH ST. INDIALANTIC, FL 32903

FOR

WINDS OF PARADISE OWNERS ASSOCIATION, INC. A-1-A AND BEACH ST. INDIALANTIC, FL 32903

AS OF

03/13/2019

BY

INSPECTION FIRM OF FLORIDA, LLC 1393 HAILEY ST WEST MELBOURNE , FL 32904 (321)212-8957 F(775)261-1747 mweekly@insfirmfla.com

Client	WINDS OF PARADISE OF	WNERS ASSOCIATION, INC.		
Property Address	A-1-A AND BEACH ST.			
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903
Client	WINDS OF PARADISE O	WNERS ASSOCIATION, INC.		





2070-2078 SEAWIND CT





ROOF



8D



SWR SOME UNITS HAVE BEEN RETROFITTED

Inspection Date: 3/13/2019							
Inspection Date: 3/13/2019 Owner Information							
Owner Name: Wind				Contact Person:			
	2078 Seawind Ct Ind	ialantic El 32003		Home Phone:			
City: Indialantic	2076 Seawing Ct mg	Zip: 32903		Work Phone:			
County: Brevard		24. 32903		Cell Phone:			
Insurance Company: Policy #:							
Voor of Home: # of Stories: Empile							
- 13	985	2.5					
accompany this for	m. At least one photog	graph must accompa	ny this form to vali	h construction or mitigati date each attribute marke ure(s) verified on this forn	ed in questions 3		
	Was the structure built ni-Dade or Broward cou			ode (FBC 2001 or later) Ol C-94)?	R for homes located in		
	ompliance with the FBC /1/2002: Building Perm			t in 2002/2003 provide a pe	rmit application with		
				For homes built in 1 cation Date (MM/DD/YYYY)/			
C. Unknown	or does not meet the re	quirements of Answer	"A" or "B"				
	inal Installation/Replace			on date OR FBC/MDC Proc s available to verify complia			
2.1 Roof Covering	Permit	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
1. Asphalt/Fil	perglass Shingle						
2. Concrete/C	lay Tile 10/2	 3/2018	18-04905				
3. Metal							
4. Built Up							
5. Membrane							
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. 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.							
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 spacing that is shown to have an equivalent							
Inspectors Initials	mw_ Property Addres	ss 2070-2078 Sea	wind Ct Indialantic	FL 32903			

			greater residences. 2 psf.	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			-	d Concrete Roof Deck.
				d Collette Roof Beek.
				or unidentified.
	П		No attic a	
4				
4.		eet o	of the inside	achment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	
				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
	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 beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips *	Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 Wr	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 W	•
				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	
		F.	Other:	
				or unidentified
		Η.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft of Any roof that does not qualify as either (A) or (B) above.
_			1 11	D to (OMB) () I I I I I I I I I I I I I I I I I
6.	Sec		SWR (also sheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
	П	В	No SWR.	from water intrusion in the event of roof covering loss.
	_			or undetermined.
Ins	spec	tor	s Initials <u>r</u>	nw Property Address 2070-2078 Seawind Ct Indialantic FL 32903
*T	his v	ver	ification fo	arm is valid for un to five (5) years provided no material changes have been made to the structure or

^{*}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.

7. <u>Opening Protection</u>: 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						
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)	rified 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						
IN	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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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 in the table above
\square 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
 □ 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 mw Property Address 2070-2078 Seawind Ct Indialantic FL 32903

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N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of Ai with no documentation of compliance (Level N in the tax	nswer "A", "B", or C" or s						
☐ N.1 All Non-Glazed openings classified as Level A, B, C, o	or N in the table above, or no h	Non-Glazed	l openings exist				
☐ N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no N	Non-Glazed	openings classified as Level X in the				
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above						
X. None or Some Glazed Openings One or more Glaze	ed openings classified and	Level X ir	n the table above.				
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, prov.							
Qualified Inspector Name:							
MICHAEL WEEKLY Inspection Company:	HOME INSPECTOR	Phone:	HI-781				
INSPECTION FIRM OF FLORIDA, LLC.		321-	212-8957				
Qualified Inspector – I hold an active license as a	: (check one)						
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	es who has completed the state		er of hours of hurricane mitigation				
☐ Building code inspector certified under Section 468.607, Florida							
☐ General, building or residential contractor licensed under Section	1 489.111, Florida Statutes.						
Professional engineer licensed under Section 471.015, Florida St							
Professional architect licensed under Section 481.213, Florida St							
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		ions to prop	perly complete a uniform mitigation				
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statutes, must inspect the statute section 471.015 or s.489.111 may authorize a direxperience to conduct a mitigation verification inspection. I, MICHAEL WEEKLY ama a qualified inspector a (print name) contractors and professional engineers only) I had my employ and I agree to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross nesubject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Section 2015)	cructures personally and ect employee who possess and I personally performed by PDFfiller, important to the personal per	ed the inspect of inspect of inspect of inspect of inspect to admirida Stati	gh employees or other persons. quisite skill, knowledge, and pection or (licensed form the inspection etor) llent mitigation verification form is ninistrative action by the ntes) The Qualified Inspector who				
certifies this form shall be directly liable for the misconduc performed the inspection.	t of employees as if the au	ıthorized	mitigation inspector personally				
<u>Homeowner to complete</u> : I certify that the named Qualified residence identified on this form and that proof of identification	n was provided to me or m	y Authoriz	zed Representative.				
Signature:1	Date:						
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)							
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	ly and cannot be used to	certify an	y product or construction feature				
Inspectors Initials <u>mw</u> Property Address <u>2070-2078 S</u>	eawind Ct Indialantic F	L 32903					
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ided no material changes	have bee	n made to the structure or				
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155			Page 4 of 4				

Client	WINDS OF PARADISE O	OWNERS ASSOCIATION, INC.			
Property Address	A-1-A AND BEACH ST.				
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903	
Client	WINDS OF PARADISE (OWNERS ASSOCIATION, INC.			





2071-2077 SEAWIND CT









NO ATTACHMENTS

NOT ALL TRUSSES HAVE ATTACHMENTS

Form PIC6_LT — "WinT0TAL" appraisal software by a la mode, inc. — 1-800-ALAMODE

Inspection Date: 3/13/2019							
Inspection Date: 3/13/2019 Owner Information							
Owner Name: Wind				Contact Person:			
	2077 Seawind Ct Ind	ialantic El 32003		Home Phone:			
City: Indialantic	2011 Seawind Ct ind	Zip: 32903		Work Phone:			
County: Brevard		249. 32903		Cell Phone:			
Insurance Company: Policy #:							
Voor of Homes: # of Stories: Empile							
I;	985	2.5					
accompany this for	m. At least one photog	graph must accompa	ny this form to valid	h construction or mitigati date each attribute marke ure(s) verified on this forn	ed in questions 3		
	Was the structure built ni-Dade or Broward cou			ode (FBC 2001 or later) Ol C-94)?	R for homes located in		
	ompliance with the FBC /1/2002: Building Perm			t in 2002/2003 provide a pe	rmit application with		
				For homes built in 1 cation Date (MM/DD/YYYY)			
C. Unknown	or does not meet the re	quirements of Answer	"A" or "B"				
	inal Installation/Replace			on date OR FBC/MDC Proc s available to verify compli-			
2.1 Roof Coverin	Permit	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
1. Asphalt/Fi	perglass Shingle/_						
2. Concrete/O	lay Tile 10/2	 3/2018	18-04905				
3. Metal							
4. Built Up							
5. Membrane							
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.							
\Box C. One or m	☐ 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. 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.							
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 spacing that is shown to have an equivalent							
Inspectors Initials	mw_ Property Addres	ss 2071-2077 Sea	wind Ct Indialantion	FL 32903			

			greater resigned greater	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			•	d Concrete Roof Deck.
				d Collette Roof Beek.
				or unidentified.
	П		No attic a	
4				
4.		eet o	of the inside	<u>achment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	
				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
	Miı	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 beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips *	Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 Wr	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.
	П	D.	Double W	•
				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	
		F.	Other:	
				or unidentified
		Н.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft of Any roof that does not qualify as either (A) or (B) above.
_			1 XX7 /	D 1 (OMB) (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6.	Sec		SWR (also sheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
		В.	No SWR.	from water intrusion in the event of roof covering loss.
				or undetermined.
Ins	spec	tor	s Initials <u>r</u>	nw Property Address 2071-2077 Seawind Ct Indialantic FL 32903
*T	hic v	ver	ification fo	arm is valid for up to five (5) years provided no material changes have been made to the structure or

^{*}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.

7. <u>Opening Protection</u>: 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						
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						
IN	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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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

in the table above

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

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

Inspectors Initials mw Property Address 2071-2077 Seawind Ct Indialantic FL 32903

☐ C.3 One or More Non-Glazed openings is classified as Level 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

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N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of An with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or sy	
☐ N.1 All Non-Glazed openings classified as Level A, B, C, o	r N in the table above, or no N	Non-Glazed openings exist
☐ N.2 One or More Non-Glazed openings classified as Level table above		
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above	
X. None or Some Glazed Openings One or more Glaze	ed openings classified and I	Level X in the table above.
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	~	
Qualified Inspector Name:	License Type:	License or Certificate #:
MICHAEL WEEKLY Inspection Company:	HOME INSPECTOR	HI-781
INSPECTION FIRM OF FLORIDA, LLC.		321-212-8957
Qualified Inspector – I hold an active license as a	: (check one)	
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board	es who has completed the statu	
\square Building code inspector certified under Section 468.607, Florida		
☐ General, building or residential contractor licensed under Section	489.111, Florida Statutes.	
Professional engineer licensed under Section 471.015, Florida St		
Professional architect licensed under Section 481.213, Florida St		
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		ons to properly complete a uniform mitigation
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statutes, must inspect the st Licensees under s.471.015 or s.489.111 may authorize a direct experience to conduct a mitigation verification inspection.	ructures personally and nect employee who possesse	not through employees or other persons. es the requisite skill, knowledge, and
	nd I personally performed	d the inspection or (licensed
(print name) contractors and professional engineers only) I had my emplo	yee (Verified by PDFfillera me) perform the inspection of inspector)
and I agree to be responsible for his/her work.	01/24/2018	• /
Qualified Inspector Signature:	Date: _03/1	3/2019
An individual or entity who knowingly or through gross ne subject to investigation by the Florida Division of Insuranc appropriate licensing agency or to criminal prosecution. (S certifies this form shall be directly liable for the misconduc performed the inspection.	e Fraud and may be subje ection 627.711(4)-(7), Flor	ect to administrative action by the rida Statutes) The Qualified Inspector who
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification		
Signature:I	Date:	
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)		
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	ly and cannot be used to c	certify any product or construction feature
Inspectors Initials <u>mw</u> Property Address <u>2071-2077 S</u>	eawind Ct Indialantic FL	L 32903
*This verification form is valid for up to five (5) years provinaccuracies found on the form.	ided no material changes	have been made to the structure or
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155		Page 4 of 4

Client	WINDS OF PARADISE OF	WNERS ASSOCIATION, INC.			
Property Address	A-1-A AND BEACH ST.				
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903	
Client	WINDS OF PARADISE OWNERS ASSOCIATION, INC.				





2080-2090 SEAWIND CT



ROOF





8D



SWR

SOME UNITS HAVE BEEN RETROFITTED

Inspection Date: 3/13/2019								
Owner	Information							
Owner	Name: Winds Of Paradise			Contact Person:				
Addres	s: 2080-2090 Seawind Ct			Home Phone:				
	Indialantic	Zip: 32903		Work Phone:				
	: Brevard			Cell Phone:				
	ice Company:			Policy #:				
Year of	f Home: 1985	# of Stories: 2.5		Email:				
	: Any documentation used in v pany this form. At least one ph							
	7. The insurer may ask additi							
	Ilding Code: Was the structure be HVHZ (Miami-Dade or Broward				R for homes located in			
	A. Built in compliance with the a date after 3/1/2002: Building I			n 2002/2003 provide a per	rmit application with			
	B. For the HVHZ Only: Built in provide a permit application with							
	C. Unknown or does not meet the			· · · · · · · · · · · · · · · · · · ·				
OR	of Covering: Select all roof covering: Year of Original Installation/Reports of August 1974							
cov	ering 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	 10/23/2018	18-04905					
	3. Metal							
	4. Built Up							
	5. Membrane							
	6. Other							
	A. All roof coverings listed aborinstallation OR have a roofing p							
	B. All roof coverings have a Mi roofing permit application after							
	C. One or more roof coverings of	do not meet the requirement	nts of Answer "A" or "	'B".				
	D. No roof coverings meet the r	equirements of Answer "A	A" or "B".					
3. Ro o	of Deck Attachment: What is th	e weakest form of roof de	ck 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 sheathin 24"inches o.c.) by 8d common other deck fastening system or maximum of 12 inches in the fig.	nails spaced a maximum of truss/rafter spacing that is	of 12" inches in the field shown to have an eq	ldOR- Any system of sci juivalent or greater resista	rews, nails, adhesives,			
	C. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common decking with a minimum of 2 n Any system of screws, nails, ad	nails spaced a maximum of ails per board (or 1 nail per	of 6" inches in the fielder board if each board	dOR- Dimensional luml is equal to or less than 6 i	per/Tongue & Groove nches in width)OR-			
Inspec	tors Initials <u>mw</u> Property Ad	ldress 2080-2090 Sea	wind Ct Indialantic I	FL 32903				

				rm is valid for up to five (5) years provided no material changes have been made to the structure or n the form.
In	spec	tors]	Initials <u>m</u>	Property Address 2080-2090 Seawind Ct Indialantic FL 32903
		C. U		or undetermined.
		A. S	SWR (also sheathing o dwelling fr	called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the rom water intrusion in the event of roof covering loss.
6.	Sec	conda	ary Water	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
			Other Root	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft
			Flat Roof	Total length of non-hip features: 0 feet; Total roof system perimeter: feet Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of
5.		host		What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification). Hip roof with no other roof shapes greater than 10% of the total roof system perimeter.
_	_	• ~		
			No attic ac	
				or unidentified
			Structural	
				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.
		<i>υ</i>		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 and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
	г	C 1		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.
			-	Metal connectors that do not wrap over the top of the truss/rafter, or
		В. (the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion. Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 ½" gap from
	Mi	nima		ns to qualify for categories B, C, or D. All visible metal connectors are:
				the top plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
		Α.		Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to
4.		eet of		chment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
1	∐ Do			
			Jnknown o No attic ac	or unidentified.
			•	Concrete Roof Deck.
		or g 182		stance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least

Page 2 of 4

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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.

	ening Protection Level Chart an "X" in each row to identify all forms of protection in use for each	Glazed Openings				Non-Glazed Openings	
openi form	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.		Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure						
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						
I 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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

☐ B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above

Inspectors Initials mw Property Address 2080-2090 Seawind Ct Indialantic FL 32903

- 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

in the table above

☐ 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

<u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> 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

*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 shuter protective coverings not meeting the requirements of with no documentation of compliance (Level N in the state of the state	of Answer "A", "B", or C"		
□ N.1 All Non-Glazed openings classified as Level A, B,	, C, or N in the table above, or	no Non-Glazed	l openings exist
 N.2 One or More Non-Glazed openings classified as Letable above 	evel 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 classified as	Level X in the table above		
X. None or Some Glazed Openings One or more C	Glazed openings classified a	and Level X in	1 the table above.
MITIGATION INSPECTIONS MU Section 627.711(2), Florida Statutes, p	~		
Qualified Inspector Name:	License Type:		License or Certificate #:
MICHAEL WEEKLY Inspection Company:	HOME INSPECTO	Phone:	HI-781
INSPECTION FIRM OF FLORIDA, LLC.			212-8957
Qualified Inspector – I hold an active license a	as a: (check one)		
Home inspector licensed under Section 468.8314, Florida Straining approved by the Construction Industry Licensing B	tatutes who has completed the		er of hours of hurricane mitigation
☐ Building code inspector certified under Section 468.607, Flo			
General, building or residential contractor licensed under Se	ection 489.111, Florida Statute	S.	
Professional engineer licensed under Section 471.015, Florida			
Professional architect licensed under Section 481.213, Floridae			
Any other individual or entity recognized by the insurer as prediction form pursuant to Section 627.711(2), Florida St		ications to prop	perly complete a uniform mitigation
(print name) contractors and professional engineers only) I had my engineers and I agree to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross subject to investigation by the Florida Division of Insurappropriate licensing agency or to criminal prosecution certifies this form shall be directly liable for the miscomperformed the inspection. Homeowner to complete: I certify that the named Quaresidence identified on this form and that proof of identified	tor and I personally performance on the structures personally and direct employee who possion. tor and I personally performance of the structure of the struct	nd not through sesses the requirement the inspector of in	gh employees or other persons. quisite skill, knowledge, and pection or (licensed form the inspection etor) lent mitigation verification form is ninistrative action by the ntes) The Qualified Inspector who mitigation inspector personally d perform an inspection of the zed Representative.
Signature:	Date:		
An individual or entity who knowingly provides or utte obtain or receive a discount on an insurance premium of the first degree. (Section 627.711(7), Florida Statutes	to which the individual or		
The definitions on this form are for inspection purpose as offering protection from hurricanes.	s only and cannot be used	to certify an	y product or construction feature
Inspectors Initials <u>mw</u> Property Address <u>2080-20</u>	090 Seawind Ct Indialan	tic FL 32903	3
*This verification form is valid for up to five (5) years prinaccuracies found on the form.	•	iges have bee	
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.01	155		Page 4 of 4

Client	WINDS OF PARADISE OV	/NERS ASSOCIATION, INC.			
Property Address	A-1-A AND BEACH ST.				
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903	
Client	WINDS OF PARADISE OWNERS ASSOCIATION, INC.				





ROOF 1237-1253







NOT ALL TRUSSES HAVE ATTACHMENTS

Form PIC6_LT — "WinT0TAL" appraisal software by a la mode, inc. — 1-800-ALAMODE

Owner Name: Winds Of Paradise Address: 1253-1237 Beachside Ln Indialantic FL 32903 Home Phone: Address: 1253-1237 Beachside Ln Indialantic FL 32903 Work Phone:	Inspection Date: 3/13/2019									
Address: 1253-1237 Beachside Ln Indialantic FL 32903					1					
City Indialantic	Owner	Name: Winds Of Paradise								
County: Broward Insurance Company: Year of Home: 1985 # of Stories: 2.5 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 FIC very Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward Counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or HVHZ (Miami-Dade Promit Application Date swintow)	Addres	s: 1253-1237 Beachside L								
Insurance Company: Year of Home: 1985 # of Stories: 2.5 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-241?) A. Built in compliance with the FBC: Year Built For homes built in 2002/2003 provide a permit application with a date after 31/2002. Building Permit Application Date @MODYTYYO For homes built in 1994, 1995, and 1996 provide a permit application with a date after 91/1994. Building Permit Application Date @MODYTYYO For homes built in 1994, 1995, and 1996 provide a permit application with a date after 91/1994. Building Permit Application Date @MODYTYYO Permit Application on the thory of the permit application of the 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; Spec Pount Application Date of Product Approval Instinged to the Covering of Installation of Replacement of Replacement of Replacement Product Approval Instinged to the Covering Application of Product Approval Instinged to the Covering Application of Product Approval Product Approval Instinged to roofing permit application of the Product Approval Instinged Covering Application of Product Approval Inst			Zip: 32903							
Year of Home: 1985										
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 counties). South Florida Building Code (FBC 2040)? A Built in compliance with the FBC Verar Built For homes built in 2002/2003 provide a permit application with a date after 9/1/1994. The provide a permit application with a date after 9/1/1994. Page 1, and 1996 provide a permit application on with a date after 9/1/1994. Building Permit Application Date observery 1/2. 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 observery 1/2. C. Unknown or does not meet the requirements of Answer "A" or "B". 2. **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. 1. **Application of Original Installation Provided Product Approval Provided Approval Pr		1 3			•					
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 counties), South Florida Building Code (FBC 2001 or later) OR for homes located in the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 2011 or later) OR for homes built in compliance with the FBC: Year Built For homes built in 2002/2003 provide a permit application with a date after 9/11/1904; Building Permit Application Date own Date	Year of	f Home: 1985	# of Stories: 2.5		Email:					
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 HVIIZ (Miami-Dade or Broward counties), South Florida Building Code (FBC 294)? A. Built in compliance with the FBC: Year Built For homes built in 2002/2003 provide a permit application with a date after 31/2002: Building Permit Application Date (MMDDOYYYY)										
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 counties), South Florida Building Code (SFBC-94)? A. Built in compliance with the FBC: Vear Built For homes built in 2002/2003 provide a permit application with a date after 3/1/2002: Building Permit Application Date @MDD7YY70 /										
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 31/1/2002: Building Permit Application Date (MIDDAY)	_	·	•		` `					
a date after 3/1/2002: Building Permit Application Date osophoryvyy		HVHZ (Miami-Dade or Broware	d counties), South Florida	Building Code (SFBC-	94)?					
© C. Unknown or does not meet the requirements of Answer "A" or "B" 2. 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: Permit Application FRC or MDC Product Approval # Product Approval # Provided for Compliance Product Approval # Product Approval # Provided for Compliance Product Approval # Provided for Compliance Product Approval # Provided for Compliance Product Approval # Product Approval # Provided for Compliance Product Approval # Product Approval # Provided for Compliance Product Approval # Product Approval # Provided for Compliance Product Approval # Product Approval					n 2002/2003 provide a per	mit application with				
C. Unknown or does not meet the requirements of Answer "A" or "B" 2. 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: Permit Application Product Approval Product Approval Product Approval Product Approval Product Approval Product Approval Installation or Replacement Replacement Replacement No Information or Replacement Replacement Replacement No Information or Replacement Replacement Replacement No Information or Replacement Replacement Replacement Replacement No Information or Replacement Replacem										
OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified. 1.1 Roof Covering Type: Permit Application P					· · · · · · · · · · · · · · · · · · ·					
2.1 Roof Covering Type: Permit Application Date Product Approval # Year of Original Installation or Replacement Product Approval # Product Appr	OR	Year of Original Installation/Re								
2 Concrete/Clay Tile 10/23/2018 18-04905	cov					Provided for				
2 Concrete/Clay Tile 10/23/2018 18-04905		1. Asphalt/Fiberglass Shingle	1 1							
 □ 4. Built Up □ 5. Membrane □ 6. Other □ G. 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". □ 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 (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 spacing that is shown to have an equivalent 		2. Concrete/Clay Tile		18-04905						
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Inspectors Initials mw_ Property Address_ 1253-1237 Beachside Ln Indialantic FL 32903		24"inches o.c.) by 8d common decking with a minimum of 2 n	nails spaced a maximum o ails per board (or 1 nail po	of 6" inches in the field er board if each board i	IOR- Dimensional lumbs equal to or less than 6 is	per/Tongue & Groove nches in width)OR-				
	Inspec	tors Initials <u>mw</u> Property Ad	dress 1253-1237 Bea	chside Ln Indialantid	FL 32903					

			greater resigned greater	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			•	d Concrete Roof Deck.
				d Collette Roof Beek.
				or unidentified.
	П		No attic a	
4				
4.		eet o	of the inside	achment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	
				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
	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 beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips *	Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 Wr	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 W	•
				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	
		F.	Other:	
				or unidentified
		Η.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft of Any roof that does not qualify as either (A) or (B) above.
_			1 XX7 /	D to (OMB) () I I I I I I I I I I I I I I I I I
6.	Sec		SWR (also sheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
		В	No SWR.	from water intrusion in the event of roof covering loss.
	J			or undetermined.
Ins	spec	tor	s Initials <u>r</u>	nw Property Address 1253-1237 Beachside Ln Indialantic FL 32903
*T	his v	veri	ification fo	arm is valid for un to five (5) years provided no material changes have been made to the structure or

^{*}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.

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.

	ening Protection Level Chart	Glazed Openings				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						
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						
IN	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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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.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 <u>mw</u> Property Address <u>1253-1237 Beachside Ln Indialantic FL 32903</u>

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N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of A	nswer "A", "B", or C" or sys	
with no documentation of compliance (Level N in the ta	· · · · · · · · · · · · · · · · · · ·	
N.1 All Non-Glazed openings classified as Level A, B, C, C		
☐ N.2 One or More Non-Glazed openings classified as Level table above	D in the table above, and no Nor	n-Glazed openings classified as Level X in the
☐ N.3 One or More Non-Glazed openings is classified as Lev	el X in the table above	
X. None or Some Glazed Openings One or more Glaz	ed openings classified and Le	vel X in the table above.
MITIGATION INSPECTIONS MUST E Section 627.711(2), Florida Statutes, prov	~	
Qualified Inspector Name:	License Type:	License or Certificate #:
MICHAEL WEEKLY Inspection Company:	HOME INSPECTOR	HI-781 Phone:
INSPECTION FIRM OF FLORIDA, LLC.		321-212-8957
Qualified Inspector – I hold an active license as a	: (check one)	
Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board		
☐ Building code inspector certified under Section 468.607, Florida		
General, building or residential contractor licensed under Section		
Professional engineer licensed under Section 471.015, Florida S		
Professional architect licensed under Section 481.213, Florida S		
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statute		is to properly complete a uniform mitigation
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statutes, must inspect the same Licensees under s.471.015 or s.489.111 may authorize a direxperience to conduct a mitigation verification inspection. I, MICHAEL WEEKLY am a qualified inspector a (print name) contractors and professional engineers only) I had my employed.	tructures personally and no ect employee who possesses and I personally performed oyee (through employees or other persons. the requisite skill, knowledge, and the inspection or (licensed) perform the inspection
and I agree to be responsible for his/her work.	Verified by PDFfiller me 0	inspector)
Qualified Inspector Signature:	Date: <u>03/13</u>	/2019
An individual or entity who knowingly or through gross no subject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduct performed the inspection.	e Fraud and may be subjection 627.711(4)-(7), Florid	t to administrative action by the la Statutes) The Qualified Inspector who
Homeowner to complete: I certify that the named Qualifie residence identified on this form and that proof of identification		
Signature:	Date:	
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w of the first degree. (Section 627.711(7), Florida Statutes)		
The definitions on this form are for inspection purposes on as offering protection from hurricanes.	ly and cannot be used to ce	rtify any product or construction feature
Inspectors Initials <u>mw</u> Property Address 1253-1237	Beachside Ln Indialantic	FL 32903
*This verification form is valid for up to five (5) years proving a supplied to the form.	rided no material changes h	ave been made to the structure or
inaccuracies found on the form. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155		Page 4 of 4

Client	WINDS OF PARADISE OF	WINDS OF PARADISE OWNERS ASSOCIATION, INC.				
Property Address	A-1-A AND BEACH ST.					
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903		
Client	WINDS OF PARADISE OWNERS ASSOCIATION, INC.					





1240-1252 BEACHSIDE LN



ROOF



SOME UNITS HAVE BEEN RETROFITTED



SWR



NOT ALL TRUSSES HAVE ATTACHMENTS

Form PIC6_LT — "WinTOTAL" appraisal software by a la mode, inc. — 1-800-ALAMODE

Inspect	tion Date: 3/13/2019		•				
Owner	· Information						
Owner	Name: Winds Of Paradise			Contact Person: Home Phone:			
Addres	s: 1240-1252 Beachside L		dialantic FL 32903				
	Indialantic	Zip: 32903		Work Phone:			
	^{7:} Brevard			Cell Phone:			
	nce Company:			Policy #:			
Year of	f Home: 1985	# of Stories: 2.5		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						
	pany this form. At least one pl 17. The insurer may ask addit						
_	·	•					
	ilding Code: Was the structure b HVHZ (Miami-Dade or Broward				for homes located in		
tiic	A. Built in compliance with the		•		mit application with		
	a date after 3/1/2002: Building						
	B. For the HVHZ Only: Built in						
	provide a permit application wi			tion Date (MM/DD/YYYY)/	/		
	C. Unknown or does not meet the	he requirements of Answer	"A" or "B"				
	of Covering: Select all roof covering:						
	Year of Original Installation/Revering identified.	placement OR indicate that	t no information was a	vailable to verify complia	nce for each roof		
COV		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	 10/23/2018	18-04905				
	3. Metal	//					
	4. Built Up						
	5. Membrane						
	6. Other						
				1 / A 11' /'			
	A. All roof coverings listed abounstallation OR have a roofing p						
	B. All roof coverings have a Mi	= =		=			
	roofing permit application after						
	C. One or more roof coverings	do not meet the requirement	nts of Answer "A" or "I	B".			
	D. No roof coverings meet the r	requirements of Answer "A	a" or "B".				
3. Ro o	of Deck Attachment: What is th	e weakes t form of roof de	ck attachment?				
	A. Plywood/Oriented strand box by staples or 6d nails spaced at shinglesOR- Any system of s	ard (OSB) roof sheathing a 6" along the edge and 12 crews, nails, adhesives, oth	attached to the roof trus "in the fieldOR- Ba ner deck fastening syste	atten decking supporting	wood shakes or wood		
	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. 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 decking with a minimum of 2 m. Any system of screws, nails, ac	nails spaced a maximum of ails per board (or 1 nail possiblesives, other deck fasten	of 6" inches in the field or board if each board it ing system or truss/rafi	IOR- Dimensional lumb s equal to or less than 6 it ter spacing that is shown	per/Tongue & Groove nches in width)OR-		
Inspec	tors Initials <u>mw</u> Property Ad	Idress 1240-1252 Bea	chside Ln Indialantio	FL 32903			

			greater resigned greater	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			•	d Concrete Roof Deck.
				d Collette Roof Beek.
				or unidentified.
	П		No attic a	
4				
4.		eet o	of the inside	achment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	
				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
	Miı	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 beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips *	Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 Wr	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.
	П	D.	Double W	•
				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	
		F.	Other:	
				or unidentified
		Н.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft of Any roof that does not qualify as either (A) or (B) above.
_	C		1 XX7 /	D to (OMB) () 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
6.	Sec		SWR (also sheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
		В.	No SWR.	from water intrusion in the event of roof covering loss.
	•			or undetermined.
Ins	spec	tor	s Initials <u>r</u>	nw Property Address 1240-1252 Beachside Ln Indialantic FL 32903
*T	hic v	veri	ification fo	orm is valid for un to five (5) years provided no material changes have been made to the structure or

^{*}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.

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 on "Y" in each row to identify all forms of protection in use for each		Glazed Openings				Non-Glazed Openings	
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.		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							
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							
I 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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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.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
- 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).

☐ 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

C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist

 \square 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 <u>mw</u> Property Address <u>1240-1252 Beachside Ln Indialantic FL 32903</u>

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N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A with no documentation of compliance (Level N in the t	answer "A", "B", or C" or s		
N.1 All Non-Glazed openings classified as Level A, B, C,	or N in the table above, or no	Non-Glazeo	l openings exist
 N.2 One or More Non-Glazed openings classified as Level table above 	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 classified as Lev	vel X in the table above		
X. None or Some Glazed Openings One or more Glaze	zed openings classified and	Level X ii	n the table above.
MITIGATION INSPECTIONS MUST . Section 627.711(2), Florida Statutes, pro	_		
Qualified Inspector Name:	License Type:		License or Certificate #:
MICHAEL WEEKLY Inspection Company:	HOME INSPECTOR	Phone:	HI-781
INSPECTION FIRM OF FLORIDA, LLC.		321-	212-8957
Qualified Inspector – I hold an active license as a	a: (check one)		
Home inspector licensed under Section 468.8314, Florida Statutraining approved by the Construction Industry Licensing Board	tes who has completed the sta		er of hours of hurricane mitigation
☐ Building code inspector certified under Section 468.607, Florida			
General, building or residential contractor licensed under Section	on 489.111, Florida Statutes.		
Professional engineer licensed under Section 471.015, Florida S			
Professional architect licensed under Section 481.213, Florida S			
Any other individual or entity recognized by the insurer as poss verification form pursuant to Section 627.711(2), Florida Statut		tions to prop	perly complete a uniform mitigation
Individuals other than licensed contractors licensed under under Section 471.015, Florida Statutes, must inspect the statutes under s.471.015 or s.489.111 may authorize a direxperience to conduct a mitigation verification inspection. I, MICHAEL WEEKLY ama a qualified inspector (print name) contractors and professional engineers only) I had my emploand I agree to be responsible for his/her work. Qualified Inspector Signature: An individual or entity who knowingly or through gross n subject to investigation by the Florida Division of Insuran appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduperformed the inspection.	and I personally perform loyee (Verified by PDFfilleram 01/24/2018 Date: 03/ egligence provides a false ce Fraud and may be sub Section 627.711(4)-(7), Flo	ed the inspector or frauduct of addresses the reconstruction of the control of th	gh employees or other persons. quisite skill, knowledge, and pection or (licensed form the inspection etor) llent mitigation verification form is ninistrative action by the utes) The Qualified Inspector who
Homeowner to complete: I certify that the named Qualific	ed Inspector or his or her e	mnlovee di	d perform an inspection of the
residence identified on this form and that proof of identification			
Signature:	Date:		
An individual or entity who knowingly provides or utters obtain or receive a discount on an insurance premium to vof the first degree. (Section 627.711(7), Florida Statutes)			
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	nly and cannot be used to	certify an	y product or construction feature
Inspectors Initials <u>mw</u> Property Address 1240-1252	Beachside Ln Indialan	tic FL 329	903
*This verification form is valid for up to five (5) years pro inaccuracies found on the form.	vided no material change	s have bee	n made to the structure or
OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155			Page 4 of 4

Client	WINDS OF PARADISE OF	WINDS OF PARADISE OWNERS ASSOCIATION, INC.				
Property Address	A-1-A AND BEACH ST.					
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903		
Client	WINDS OF PARADISE OWNERS ASSOCIATION, INC.					





2079-2089 SEAWIND CT







8D

SOME UNIT HAVE BEEN RETROFITTED





SWR NOT ALL TRUSSES HAVE ATTACHMENTS

Form PIC6_LT — "WinT0TAL" appraisal software by a la mode, inc. — 1-800-ALAMODE

Inspection Date: 3/13/2019				
Owner Information				
Owner Name: Winds Of Paradise			Contact Person:	
Address: 2079-2089 Seawind Ct	Indialantic FL 32903		Home Phone:	
City: Indialantic	Zip: 32903		Work Phone:	
County: Brevard			Cell Phone:	
Insurance Company:			Policy #:	
Year of Home: 1985	# of Stories: 2.	.5	Email:	
NOTE: Any documentation used in accompany this form. At least one p though 7. The insurer may ask additional content of the co	hotograph must accom	npany this form to valid	date each attribute marke	d in questions 3
1. Building Code : Was the structure the HVHZ (Miami-Dade or Browan	rd counties), South Flori	ida Building Code (SFB	C-94)?	
A. Built in compliance with the a date after 3/1/2002: Building	Permit Application Date	e (MM/DD/YYYY)//	/	
☐ B. For the HVHZ Only: Built i provide a permit application w	ith a date after 9/1/1994:	: Building Permit Applie	For homes built in 19 cation Date (MM/DD/YYYY)/	994, 1995, and 1996
C. Unknown or does not meet	the requirements of Ans	wer "A" or "B"		
2. Roof Covering: Select all roof cov OR Year of Original Installation/Ro				
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	, ,			
_	// 10/23/2018	18-04905		
2. Concrete/Clay Tile	101/231/2016	10-04905		
3. Metal				
4. Built Up	/			
5. Membrane	/			
☐ 6. Other	//			
A. All roof coverings listed about installation OR have a roofing	permit application date	on or after 3/1/02 OR th	e roof is original and built i	n 2004 or later.
☐ B. All roof coverings have a M roofing permit application after				
☐ C. One or more roof coverings	do not meet the requires	ments of Answer "A" or	· "B".	
☐ D. No roof coverings meet the	requirements of Answer	r "A" or "B".		
3. Roof Deck Attachment : What is the	he weakes t form of roof	deck attachment?		
A. Plywood/Oriented strand bo by staples or 6d nails spaced a shinglesOR- Any system of s mean uplift less than that requi	oard (OSB) roof sheathir at 6" along the edge and screws, nails, adhesives,	ng attached to the roof to 1 12" in the fieldOR- other deck fastening sy	Batten decking supporting	wood shakes or wood
 B. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common other deck fastening system of maximum of 12 inches in the f 	nails spaced a maximum r truss/rafter spacing tha	m of 12" inches in the fi at is shown to have an e	ieldOR- Any system of sciequivalent or greater resista	rews, nails, adhesives,
C. Plywood/OSB roof sheathin 24"inches o.c.) by 8d common decking with a minimum of 2 and Any system of screws, nails, a	nails spaced a maximum nails per board (or 1 nai	m of 6" inches in the fig il per board if each board	eldOR- Dimensional lum d is equal to or less than 6 i	ber/Tongue & Groove inches in width)OR-
Inspectors Initials mw_ Property A	ddress_2079-2089 Se	eawind Ct Indialantic	FL 32903	

			greater resigned greater	istance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
			•	d Concrete Roof Deck.
				d Collette Roof Beek.
				or unidentified.
	П		No attic a	
4				
4.		eet o	of the inside	<u>achment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within e or outside corner of the roof in determination of WEAKEST type)
		A.	Toe Nails	
				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
	Miı	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 beam, with less than a ½" gap from the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
		B.	Clips *	Trusses are set between concrete block, and doubled with single wraps that do not cover the truss
				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 Wr	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 W	•
				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	
		F.	Other:	
				or unidentified
		Η.	No attic a	ccess
5.				What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A.	Hip Roof	
		В.	Flat Roof	
		C.	Other Roo	less than 2:12. Roof area with slope less than 2:12 <u>0</u> sq ft; Total roof areasq ft of Any roof that does not qualify as either (A) or (B) above.
_			1 XX7 /	D to (OMB) () I I I I I I I I I I I I I I I I I
6.	Sec		SWR (also sheathing	r Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the
		В	No SWR.	from water intrusion in the event of roof covering loss.
	_			or undetermined.
Ins	spec	tor	s Initials <u>r</u>	nw Property Address 2079-2089 Seawind Ct Indialantic FL 32903
*T	hie v	ver	ification fo	arm is valid for un to five (5) years provided no material changes have been made to the structure or

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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.

	Opening Protection Level Chart Place an "X" in each row to identify all forms of protection in use for each		Glazed Openings				Non-Glazed Openings	
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.		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							
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							
IN	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, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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.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
- \square 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 mw Property Address 2079-2089 Seawind Ct Indialantic FL 32903

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N. Exterior Opening Protection (unverified shutter protective coverings not meeting the requirements of A	systems with no documents nswer "A", "B", or C" or sys	ntion) Al	l Glazed openings are protected with tt appear to meet Answer "A" or "B"
with no documentation of compliance (Level N in the t			
☐ N.1 All Non-Glazed openings classified as Level A, B, C,	or N in the table above, or no No	on-Glazed	l openings exist
 N.2 One or More Non-Glazed openings classified as Level table above 	D in the table above, and no No	on-Glazed	openings classified as Level X in the
\square N.3 One or More Non-Glazed openings is classified as Lev	vel X in the table above		
X. None or Some Glazed Openings One or more Glazed	zed openings classified and L	evel X in	the table above.
MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov			
Qualified Inspector Name:	License Type:		License or Certificate #:
MICHAEL WEEKLY Inspection Company:	HOME INSPECTOR	Phone:	HI-781
INSPECTION FIRM OF FLORIDA, LLC.		321-	212-8957
Qualified Inspector – I hold an active license as a	a: (check one)		
Home inspector licensed under Section 468.8314, Florida Statut training approved by the Construction Industry Licensing Board Building code inspector certified under Section 468.607, Florida	and completion of a proficienc		er of hours of hurricane mitigation
General, building or residential contractor licensed under Section			
□ Professional engineer licensed under Section 471.015, Florida S	*		
☐ Professional architect licensed under Section 481.213, Florida S			
Any other individual or entity recognized by the insurer as poss verification form pursuant to Section 627.711(2), Florida Statut		ns to prop	perly complete a uniform mitigation
Individuals other than licensed contractors licensed under	Section 489.111, Florida S	tatutes, o	or professional engineer licensed
under Section 471.015, Florida Statutes, must inspect the s			
Licensees under s.471.015 or s.489.111 may authorize a direction experience to conduct a mitigation verification inspection.	rect employee who possesse	s the req	uisite skill, knowledge, and
I, MICHAEL WEEKLY am a qualified inspector (print name)	and I personally performed	the insp	pection or (<i>ucensed</i>
contractors and professional engineers only) I had my empl	loyee () per	form the inspection
and I agree to be responsible for his/her work.	Verified by PDF tiller me	of inspec	etor)
Qualified Inspector Signature:	Date: <u>03/1</u> ;	3/2019	
An individual or entity who knowingly or through gross n			
subject to investigation by the Florida Division of Insuran			
appropriate licensing agency or to criminal prosecution. (Scertifies this form shall be directly liable for the misconduction)			
performed the inspection.			<u></u>
Homeowner to complete: I certify that the named Qualifie	ed Inspector or his or her emr	olovee di	d perform an inspection of the
residence identified on this form and that proof of identification			
Signature:	Date:		
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to v of the first degree. (Section 627.711(7), Florida Statutes)			
The definitions on this form are for inspection purposes or as offering protection from hurricanes.	nly and cannot be used to co	ertify an	y product or construction feature
Inspectors Initials <u>mw</u> Property Address <u>2079-2089 Section</u>	eawind Ct Indialantic FL	32903	
*This verification form is valid for up to five (5) years pro inaccuracies found on the form.	vided no material changes l	nave bee	n made to the structure or

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

Location Map

Client	WINDS OF PARADISE OV	VNERS ASSOCIATION, INC.			
Property Address	A-1-A AND BEACH ST.				
City	INDIALANTIC	County BREVARD	State FL	Zip Code 32903	
Client	WINDS OF PARADISE OWNERS ASSOCIATION, INC.				

