Uniform Mitigation Verification Inspection Form

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

| Inspection Date: 12/26/23 | | | | | | |
|--|--|-------------------------------|-----------------------------|--|--|--|
| Owner Information | | | | | | |
| Owner Name: Cascades | of Lauderhill Assn. Inc | | Contact Person: | Contact Person: | | |
| Address: 7920 N.W. 50 | | Home Phone: | Home Phone: | | | |
| City: Lauderhill | Zip: | | Work Phone: | | | |
| County: Broward | | | Cell Phone: | | | |
| Insurance Company: | | | Policy #: | | | |
| Year of Home: 1983 | # of Stories: 3 | 3 | Email: | Email: | | |
| accompany this form. At le | on used in validating the comp east one photograph must aco ask additional questions reg | company this form to valid | late each attribute marke | ed in questions 3 | | |
| 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)? | | | | | | |
| OR Year of Original Inst covering identified. 2.1 Roof Covering Type: | allation/Replacement OR indic Permit Application Date | FBC or MDC Product Approval # | available to verify compli- | Ance for each roof No Information Provided for Compliance | | |
| ✓ 1. Asphalt/Fiberglass Shins | gle 09/01/22 | Permit # | 22090008 | | | |
| _ | | remm # | 22090000 | | | |
| 2. Concrete/Clay Tile | | | | | | |
| 3. Metal | / | | | | | |
| 4. Built Up | / | | | | | |
| 5. Membrane | | | | | | |
| | flat 09/01/22 | Permit # | 22090008 | | | |
| | ✓ 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 roofing permit applie | ☐ 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 requ | irements of Answer "A" or | "B". | | | |
| ☐ D. No roof coverings | s meet the requirements of Ans | wer "A" or "B". | | | | |
| 3. Roof Deck Attachment: | What is the weakest form of r | oof deck attachment? | | | | |
| A. Plywood/Oriented by staples or 6d nail shinglesOR- Any smean uplift less than B. Plywood/OSB ro 24"inches o.c.) by 8d other deck fastening maximum of 12 inch C. Plywood/OSB ro | 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)Ol Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent | | | | | | |
| Inspectors Initials <u>FP</u> P | roperty Address <u>7920 N.W</u> | <i>l.</i> 50 Street, Lauderh | ill | | | |

*This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155 Page 1 of 4

| | | or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at leas 182 psf. | | | | | | | |
|-----|----------|--|--|--|--|--|--|--|--|
| | ✓ | D. Reinforced Concrete Roof Deck. | | | | | | | |
| | | E. Other: | | | | | | | |
| | | F. Unknown or unidentified. | | | | | | | |
| | | G. No attic access. | | | | | | | |
| 4. | | oof to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within feet of the inside or outside corner of the roof in determination of WEAKEST type) | | | | | | | |
| | Ш | 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 | | | | | | | |
| | Mi | inimal conditions 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. | | | | | | | |
| | | | | | | | | | |
| | | ☐ 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 nai position requirements of C or D, but is secured with a minimum of 3 nails. | | | | | | | |
| | ш | C. Single Wraps Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side. | | | | | | | |
| | | 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 | | | | | | | |
| | | both sides, and is secured to the top plate with a minimum of three nails on each side. E. Structural Anchor bolts structurally connected or reinforced concrete roof. | | | | | | | |
| | _ | | | | | | | | |
| | | G. Unknown or unidentified H. No attic access | | | | | | | |
| _ | _ | | | | | | | | |
| 5. | | <u>oof Geometry</u> : What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall on the host structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification). | | | | | | | |
| | | A. Hip Roof Hip roof with no other roof shapes greater than 10% of the total roof system perimeter. Total length of non-hip features: feet; Total roof system perimeter: feet B. Flat Roof Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of | | | | | | | |
| | | B. Flat Roof Roof on a building with 5 or more units where at least 90% of the main roof area has a roof slope of less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft C. Other Roof Any roof that does not qualify as either (A) or (B) above. | | | | | | | |
| | _ | 1 3 | | | | | | | |
| 6. | Sec | A. SWR (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the sheathing or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the | | | | | | | |
| | | dwelling from water intrusion in the event of roof covering loss. B. No SWR. C. Unknown or undetermined. | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Ins | spec | ctors Initials FP Property Address 7920 N.W. 50 Street, Lauderhill | | | | | | | |

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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 opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings. | | Glazed Openings | | | | Non-Glazed Openings | |
|--|---|------------------------------|-----------------|-----------|----------------|------------------------|-----------------|
| | | Windows or Entry Doors | Garage Doors | Skylights | Glass Block | Entry Doors | Garage Doors |
| N/A | Not Applicable- there are no openings of this type on the structure | | Х | Х | Χ | | Х |
| 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 | | | | | | |
| N | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| Х | No Windborne Debris Protection | Х | | | | Х | |

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above).
 - Miami-Dade County PA 201, 202, and 203
 - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
 - American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996
 - Southern Standards Technical Document (SSTD) 12
 - For Skylights Only: ASTM E 1886 and ASTM E 1996
 - For Garage Doors Only: ANSI/DASMA 115

| | Ш | A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist |
|-----|-------------|---|
| | | A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above |
| | | A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above |
| | ope in t | Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed enings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following "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 |
| | <u>C. I</u> | Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with |
| ply | wood | d/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 |

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

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| N. Exterior Opening Protection (u with protective coverings not meeting or "B" with no documentation of com | g the requirements of Answer "A", "B", or C | nentation) All Glazed openings are protected or systems that appear to meet Answer "A" |
|---|--|---|
| _ | fied as Level A, B, C, or N in the table above, or n | o Non-Glazed openings exist |
| _ | | o Non-Glazed openings classified as Level X in the |
| N.3 One or More Non-Glazed openin | ngs is classified as Level X in the table above | |
| ▼ X. None or Some Glazed Openings | One or more Glazed openings classified and | Level X in the table above. |
| Section 627.711(2), Flori | CTIONS MUST BE CERTIFIED BY A QUA. ida Statutes, provides a listing of individuals | |
| Qualified Inspector Name: Frank Pagliughi | License Type: Structural, Home | License or Certificate #: BN-2343, HI-611 |
| Inspection Company: American Inspection Services | | Phone: 888-494-4339 |
| training approved by the Construction Ind ■ Building code inspector certified under Se □ General, building or residential contractor □ Professional engineer licensed under Sect □ Professional architect licensed under Sect | 68.8314, Florida Statutes who has completed the salustry Licensing Board and completion of a proficection 468.607, Florida Statutes. r licensed under Section 489.111, Florida Statutes tion 471.015, Florida Statutes. tion 481.213, Florida Statutes. by the insurer as possessing the necessary qualification. | ciency exam. |
| (print name) contractors and professional engineers only and I agree to be responsible for his/her w Qualified Inspector Signature: An individual or entity who knowingly or t subject to investigation by the Florida Divi appropriate licensing agency or to crimina certifies this form shall be directly liable for performed the inspection. Homeowner to complete: I certify that the residence identified on this form and that pro- | through gross negligence provides a false of ision of Insurance Fraud and may be subject the misconduct of employees as if the autor of of identification was provided to me or my authorize a direct employee who possess ation inspection. If it is inspect the structures personally and not possess and inspector and I personally performe (print name of its inspector of identification was provided to me or my authorized inspector or his or her emotion of identification was provided to me or my authorized inspector or his or her emotion of identification was provided to me or my authorized inspector or his or her emotion of identification was provided to me or my | ot through employees or other persons. es the requisite skill, knowledge, and d the inspection or (licensed —) perform the inspection of inspector) 6/23 or fraudulent mitigation verification form is ect to administrative action by the rida Statutes) The Qualified Inspector who athorized mitigation inspector personally aployee did perform an inspection of the by Authorized Representative. |
| Signature: | Date: | |
| An individual or entity who knowingly pro obtain or receive a discount on an insurance of the first degree. (Section 627.711(7), Flor | ce premium to which the individual or ent | |
| The definitions on this form are for inspect as offering protection from hurricanes. | tion purposes only and cannot be used to c | certify any product or construction feature |
| Inspectors Initials FP Property Address | 3 7920 N.W. 50 Street, Lauderhill | |
| *This verification form is valid for up to fir inaccuracies found on the form. | ve (5) years provided no material changes | have been made to the structure or |

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