		ion Verification In		1.
	of this form and	any documentation prov	vided with the insuran	ce policy
Inspection Date: 8-9-2023				
Owner Information			I a	
Owner Name: Park Lake at Pars			Contact Person:	
Address: 214 Lake Parsons Gre			Home Phone:	
City: Brandon	Zip: 33511		Work Phone:	
County: Hillsborough			Cell Phone:	
Insurance Company:			Policy #:	
Year of Home: 1988	# of Stories:	2	Email:	
NOTE: Any documentation used in accompany this form. At least one p though 7. The insurer may ask additional to the control of	photograph must ac itional questions reg	company this form to valid arding the mitigated featu	late each attribute markers are(s) verified on this for	ed in questions 3 m.
1. <b>Building Code</b> : Was the structure the HVHZ (Miami-Dade or Browa A. Built in compliance with th a date after 3/1/2002: Building	rd counties), South F e FBC: Year Built _	lorida Building Code (SFBC) For homes built	C-94)? in 2002/2003 provide a pe	
B. For the HVHZ Only: Built is provide a permit application w  ✓ C. Unknown or does not meet	in compliance with the rith a date after 9/1/19	ne SFBC-94: Year Built 994: Building Permit Applic	For homes built in 1	
Roof Covering: Select all roof cov OR Year of Original Installation/R covering identified.  2.1 Roof Covering Type:	vering types in use. Peplacement OR indice	rovide the permit application cate that no information was  FBC or MDC  Product Approval #	n date OR FBC/MDC Procavailable to verify compli  Year of Original Installation or Replacement	duct Approval number ance for each roof  No Information Provided for Compliance
1. Asphalt/Fiberglass Shingle	02 / 28/ 17	ASTM D 3462	2017	
2. Concrete/Clay Tile				
— -:,,				_
☐ 3 Metal				
3. Metal	//			_ _
4. Built Up				
☐ 4. Built Up ☐ 5. Membrane				
☐ 4. Built Up ☐ 5. Membrane ☐ 6. Other  ✓ A. All roof coverings listed ab installation OR have a roofing B. All roof coverings have a M roofing permit application afte C. One or more roof coverings	ove meet the FBC w. permit application d. fiami-Dade Product at 9/1/1994 and before do not meet the requ	ate on or after 3/1/02 OR the Approval listing current at ti e 3/1/2002 OR the roof is or airements of Answer "A" or	e roof is original and built me of installation OR (for iginal and built in 1997 or	rrent at time of in 2004 or later.
☐ 4. Built Up ☐ 5. Membrane ☐ 6. Other  ✓ A. All roof coverings listed abinstallation OR have a roofing B. All roof coverings have a Moroofing permit application after	ove meet the FBC w permit application d fiami-Dade Product or 9/1/1994 and befored on the requirements of Ans	Approval listing current at ti e 3/1/2002 OR the roof is or hirements of Answer "A" or hwer "A" or "B".	e roof is original and built me of installation OR (for iginal and built in 1997 or	rrent at time of in 2004 or later.

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 field.-OR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 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 field. -OR- 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 A ↑ Property Address 214 Lake Parsons Green Brandon, FL 33511

<sup>\*</sup>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.

	or greater resistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least 182 psf.
	D. Reinforced Concrete Roof Deck.
	E. Other:
	F. Unknown or unidentified.
	G. No attic access.
1	
4.	<b>Roof to Wall Attachment:</b> 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)
	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
	Ainimal 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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
	B. Clips
	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 Wraps
	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
	D. Double Wraps
	Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond beam, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>
	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both sides, and is secured to the top plate with a minimum of three nails on each side.
	E. Structural Anchor bolts structurally connected or reinforced concrete roof.
	F. Other:
	G. Unknown or unidentified
	H. No attic access
5.	Roof Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of 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 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.
6.	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	ectors Initials 🗸 🖟 Property Address 214 Lake Parsons Green Brandon, FL 33511
	is verification form is valid for up to five (5) years provided no material changes have been made to the structure or
	curacies found on the form.

Page 2 of 4

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

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.

Opening Protection Level Chart  Place an "X" in each row to identify all forms of protection in use for each opening type. Check only one answer below (A thru X), based on the weakest form of protection (lowest row) for any of the Glazed openings and indicate the weakest form of protection (lowest row) for Non-Glazed openings.		Glazed Openings				Non-Glazed Openings	
		Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		X	X	X		X
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
IN	Other protective coverings that cannot be identified as A, B, or C						
х	No Windborne Debris Protection	X				X	

- A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above).
  - Miami-Dade County PA 201, 202, and 203
  - Florida Building Code Testing Application Standard (TAS) 201, 202, and 203
  - American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996
  - Southern Standards Technical Document (SSTD) 12
  - For Skylights Only: ASTM E 1886 and ASTM E 1996
  - For Garage Doors Only: ANSI/DASMA 115
  - A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
  - A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above
  - A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
- **B.** Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings are protected, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level B in the table above):
  - ASTM E 1886 and ASTM E 1996 (Large Missile 4.5 lb.)
  - SSTD 12 (Large Missile 4 lb. to 8 lb.)
  - For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile 2 to 4.5 lb.)
  - B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
  - B.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or X in the table above
  - B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above
- <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

Inspectors Initials Departy Address 214 Lake Parsons Green Brandon, FL 33511

<sup>\*</sup>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 shutter systems with no documentation) All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or C" or systems that appear to meet Answer "A" or "B" with no documentation of compliance (Level N in the table above).

- N.1 All Non-Glazed openings classified as Level A, B, C, or N in the table above, or no Non-Glazed openings exist
- N.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level X in the table above
- 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 Glazed openings classified and Level X in the table above.

MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR. Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.					
Qualified Inspector Name:	George Hebert	License Type: Home Inspections / N	NACHI	License or Certificate #: HI-127; NACHI07050102	
Inspection Company:	Premier Certified Inspections		Phone:	727-510-5615	

## Qualified Inspector – I hold an active license as a: (check one)

Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation training approved by the Construction Industry Licensing Board and completion of a proficiency exam.

Building code inspector certified under Section 468.607, Florida Statutes.

General, building or residential contractor licensed under Section 489.111, Florida Statutes.

Professional engineer licensed under Section 471.015, Florida Statutes.

Professional architect licensed under Section 481.213, Florida Statutes.						
Any other individual or entity recognized by the insurer as possessing the necess verification form pursuant to Section 627.711(2), Florida Statutes.	sary quali	ifications	s to properly com	plete a uniform mitigation		
Individuals other than licensed contractors licensed under Section 489.1 under Section 471.015, Florida Statues, must inspect the structures personal transfer of the structure	onally a	nd not	through emplo	oyees or other persons.		
<u>Licensees under s.471.015 or s.489.111 may authorize a direct employee who possesses the requisite skill, knowledge, and experience to conduct a mitigation verification inspection.</u>						
I, <u>George Hebert</u> am a qualified inspector and I personal (print name)	lly perfo	ormed t	the inspection o	or (licensed		
contractors and professional engineers only) I had my employee (			) perform th	e inspection		
	(print n	name of	f inspector)			
and I agree to be responsible for his/her work						
Qualified Inspector Signature:   Mery e Selection  Qualified Inspector Signature:   Mery e Selection   Mery	Date: _		8-9-2023			
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form is subject to investigation by the Florida Division of Insurance Fraud and may be subject to administrative action by the appropriate licensing agency or to criminal prosecution. (Section 627.711(4)-(7), Florida Statutes) The Qualified Inspector who certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector personally performed the inspection.						
Homeowner to complete: I certify that the named Qualified Inspector or his or her employee did perform an inspection of the residence identified on this form and that proof of identification was provided to me or my Authorized Representative.						
Signature: Date:						
An individual or entity who knowingly provides or utters a false or fraudulent mitigation verification form with the intent to obtain or receive a discount on an insurance premium to which the individual or entity is not entitled commits a misdemeanor of the first degree. (Section 627.711(7), Florida Statutes)						
The definitions on this form are for inspection purposes only and cannot as offering protection from hurricanes.	t be used	d to cer	rtify any produ	ct or construction feature		

Inspectors Initials 🔏 🕅 Property Address 214 Lake Parsons Green Brandon, FL 33511

<sup>\*</sup>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.















