Uniform Mitigation Verification Inspection Form

	Maintain a copy	of this form and any	y documentation prov	ided with the insuran	ce policy		
Inspecti	ion Date: 05/08/2023						
Owner	Information						
Owner Name: Stonewater Condominium Association, Inc				Contact Person:			
Address	s: 1103-1105 STONEBROOM	KE LN LAKELAND 338	Hom	Home Phone:			
City: L	AKELAND	Zip: 33803	Wor	Work Phone:			
County:	: POLK		Cell	Phone:			
Insuran	ce Company:		Polic	ey #:			
	Home: 1995	# of Stories: 2	Ema				
accomp though 1. <u>Buil</u>	Any documentation used in pany this form. At least one p. 7. The insurer may ask addiding Code: Was the structure	chotograph must according tional questions regard built in compliance with	npany this form to validading the mitigated feature. The the Florida Building Co	ate each attribute markere(s) verified on this formule (FBC 2001 or later) O	ed in questions 3 m.		
	with a date after 3/1/2 B.For the HVHZ Only: 1996 provide a permi/_/ C. Unknown or does no	with the FBC: Year Built 2002: Building Permit A Built in compliance with a pplication with a date of meet the requirements	t For homes application Date (MM/DD/YYY) the the SFBC-94: Year Building after 9/1/1994: Building	built in 2002/2003 provide the provided by the	nilt in 1994, 1995, and		
		D 1 4 OD : 1:	4 - 41 - 4 :	:1-1-1- 4::C			
OR	Year of Original Installation/Fering identified.	Replacement OR indica	te that no information water that no information was FBC or MDC Product Approval #	as available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	mpliance for each roof		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle	Permit Application Date 01/29/2010	FBC or MDC	Year of Original Installation or	mpliance for each roof No Information Provided for Compliance		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile	Permit Application Date 01/29/2010	FBC or MDC Product Approval #	Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal	Permit Application Date 01/29/2010 //	FBC or MDC Product Approval #	Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up	Permit Application Date 01/29/2010	FBC or MDC Product Approval #	Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane	Permit Application Date 01/29/2010 //	FBC or MDC Product Approval #	Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR cove	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other All roof coverings listed above installation OR have a roofing All roof coverings have a Miar roofing permit application aft One or more roof coverings described in the rest of Deck Attachment: What is the state of the property	Permit Application Date 01/29/2010 //	FBC or MDC Product Approval # 17844-2-1 FBC or Miami-Dade Product on or after 3/1/02 OR the oval listing current at time 3/1/2002 OR the roof is onents of Answer "A" or "E" "A" or "B". If deck attachment?	Year of Original Installation or Replacement 2010 uct Approval listing curre eroof is original and built of installation OR (for the riginal and built in 1997 of 3".	mpliance for each roof No Information Provided for Compliance		
OR cove	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other All roof coverings listed above installation OR have a roofing All roof coverings have a Mia roofing permit application aft One or more roof coverings dependence on the results of the coverings meet the results of the covering the covering of the covering	Permit Application Date 01/29/2010 /	FBC or MDC Product Approval # 17844-2-1 FBC or Miami-Dade Product on or after 3/1/02 OR the oval listing current at time 3/1/2002 OR the roof is onents of Answer "A" or "E" "A" or "B".	Year of Original Installation or Replacement 2010 uct Approval listing curred roof is original and built of installation OR (for the riginal and built in 1997 of 3".	npliance for each roof No Information Provided for Compliance		
OR cove A. B. C. D. 3. Roo	Year of Original Installation/Fering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other All roof coverings listed above installation OR have a roofing All roof coverings have a Mia roofing permit application aft One or more roof coverings dependence on the results of the coverings meet the results of the covering the covering of the covering	Permit Application Date 01/29/2010 //	FBC or MDC Product Approval # 17844-2-1 FBC or Miami-Dade Product on or after 3/1/02 OR the oval listing current at time 3/1/2002 OR the roof is onents of Answer "A" or "E" "A" or "B". f deck attachment?	Year of Original Installation or Replacement 2010 uct Approval listing curre eroof is original and built of installation OR (for the riginal and built in 1997 of 3".	mpliance for each roof No Information Provided for Compliance		

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	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 a least 103 psf.
V	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 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.
$\overline{\Box}$	E. Other:
	F. Unknown or unidentified.
	G. No attic access.
4 Poof to Wall	Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within
	side 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
I	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	Minimal 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.
√ B.	
	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.
□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, or 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.
	Structural Anchor bolts structurally connected or reinforced concrete roof. Other:
	s WS Property Address 1103-1105 STONEBROOKE LN LAKELAND 33803
mapeetor a mitial	
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wood shakes or wood shingles. -OR- 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.

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	Geometry: What is the roof shape? (Do not consider roofs of porches st structure over unenclosed space in the determination of roof perimental part of the contract of the con						
	A. Hip Roof- Hip roof with no other roof shapes greater than 10 Total length of non-hip features: feet; Total						
	B. Flat Roof- Roof on a building with 5 or more units where at	-	-			roof slo	pe of
	less than 2:12. Roof area with slope less than 2:12 _					_	
	C. Other Roof- Any roof that does not qualify as either (A) or (B) above.					
Secon	dary Water Resistance (SWR): (standard underlayments or hot-mo	pped felts o	do not qu	alify as an	SWR)		
s f B. 1	SWR (also called Sealed Roof Deck) Self-adhering polymer modifications or foam adhesive SWR barrier (not foamed-on insulation) approximate intrusion in the event of roof covering loss. No SWR. Unknown or undetermined.	ed-bitumen pplied as a	roofing suppleme	underlaym ental mean	nent app s to pro	olied direct the	ectly to dwe
upon t	nine the weakest form of protection for each category of opening. Sectithe lowest protection level for ALL Glazed openings and (b) check the applicable.					opening	
Ope	ning Protection Level Chart		Glazed O	penings			enings
Ope Place a openin form o	ning Protection Level Chart an "X" in each row to identify all forms of protection in use for each ang type. Check only one answer below (A thru X), based on the weakest af protection (lowest row) for any of the Glazed openings and indicate the ast form of protection (lowest row) for Non-Glazed openings.	Windows or Entry Doors	Glazed O Garage Doors	penings Skylights	Glass Block		
Ope Place a openin form o weake	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 the	or Entry	Garage			Ope Entry	Garag Door
Ope Place a openin form o weake	an "X" in each row to identify all forms of protection in use for each ag 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 the st form of protection (lowest row) for Non-Glazed openings.	or Entry	Garage	Skylights	Block	Ope Entry	enings Gara
Ope Place a openin form o weake	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 the set form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure	or Entry	Garage	Skylights	Block	Ope Entry	Gara Dooi
Ope Place a openin form o weake N/A A	an "X" in each row to identify all forms of protection in use for each and 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 the set form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)	or Entry	Garage	Skylights	Block	Ope Entry	Gara Dooi
Ope Place a openin form o weake N/A A B	an "X" in each row to identify all forms of protection in use for each an 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 the set form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)	or Entry	Garage	Skylights	Block	Ope Entry	Gara Dooi
Ope Place a openin form o weake N/A A B C	an "X" in each row to identify all forms of protection in use for each and 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 the est form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330,	or Entry	Garage	Skylights	Block	Ope Entry	Garag Door
Ope Place a openin form o weake N/A A B C	an "X" in each row to identify all forms of protection in use for each ag 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 the est form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance	or Entry	Garage	Skylights	Block	Ope Entry	Garag Door

G. Unknown or unidentified

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	• For Skylights Only: ASTM E 1886 <u>and</u> AST	TM 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 N, o	One or More Non-Glazed openings classified as I r X in the table above	Level D in the table above, and	no Non-C	Glazed openings classified as Level B, C,		
A.3	One or More Non-Glazed Openings is classified a	as Level B, C, N, or X in the tab	ole above			
are protect product a	Opening Protection- Cyclic Pressure and 4 eted, at a minimum, with impact resistant compproval system of the State of Florida or Mia ressure and Large Missile Impact" (Level B in	verings or products listed as mi-Dade County and meet	s windbo	orne debris protection devices in the		
	• ASTM E 1886 <u>and</u> ASTM E 1996 (Large M	issile – 4.5 lb.)				
	• SSTD 12 (Large Missile – 4 lb. to 8 lb.)					
	• For Skylights Only: ASTM E 1886 <u>and</u> AST	M E 1996 (Large Missile - 2 to	4.5 lb.)			
B.1	All Non-Glazed openings classified as A or B in t	he table above, or no Non-Glaz	ed openii	ngs exist		
B.2 or X	One or More Non-Glazed openings classified as I in the table above	evel D in the table above, and	no Non-C	Glazed openings classified as Level C, N,		
■B.3	One or More Non-Glazed openings is classified as	s Level C, N, or X in the table a	above			
C. Exterio	or Opening Protection- Wood Structural	Panels meeting FBC 20	07 All	Glazed openings are covered with		
plywood/0	OSB meeting the requirements of Table 1609.1	.2 of the FBC 2007 (Level C	in the t	able above).		
☐C.1	All Non-Glazed openings classified as A, B, or C	in the table above, or no Non-C	Glazed op	enings exist		
C.2 X in	One or More Non-Glazed openings classified as I the table above	Level D in the table above, and a	no Non-C	Glazed openings classified as Level N or		
protective with no d	One or More Non-Glazed openings is classified as Opening Protection (unverified shutter system) coverings not meeting the requirements of Arocumentation of compliance (Level N in the talk All Non-Glazed openings classified as Level A, B	tems with no documentationswer "A", "B", or C" or system ble above).	on) All (stems tha	at appear to meet Answer "A" or "B"		
N.2	One or More Non-Glazed openings classified as I le above	Level D in the table above, and	no Non-C	Glazed openings classified as Level X in		
N.3	One or More Non-Glazed openings is classified as	s Level X in the table above				
X. None or	Some Glazed Openings One or more Glazed	openings classified and Lev	vel X in t	he table above. CGC003886; HI 4065		
	MITIGATION INSPECTIONS MUST BE C 627.711(2), Florida Statutes, provides					
Qualified Inspector Nat	ne: WILLIAM SEXTON	License Type: General, building, or residential contractor	or	License or Certificate #: CGC003886; HI 4065		
Inspection Company:	W.F. SEXTON, Inc.		Phone: 7	27-776-3832		
Inspectors Initi	als <u>WS</u> Property Address	1103-1105 STONEBROOK	E LN LA	KELAND 33803		
	on form is valid for up to five (5) years provind on the form.	ided no material changes h	ave bee	n made to the structure or		

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American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996

Southern Standards Technical Document (SSTD) 12

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

Quantied inspector – I note an active needs 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 necessary qualifications to properly complete a uniform mitigation verification form pursuant to Section 627.711(2), Florida Statutes.
Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statutes, must inspect the structures personally and not through employees or other persons. 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.
I,WILLIAM SEXTON am a qualified inspector and I personally performed the inspection or (licensed
(print name) contractors and professional engineers only) I had my employee () perform the inspection (print name of inspector) and I agree to be responsible for his/her work.
Qualified Inspector Signature:
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification form 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: 05/08/2023
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 be used to certify any product or construction feature as offering protection from hurricanes.
Inspectors Initials WS Property Address 1103-1105 STONEBROOKE LN LAKELAND 33803

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