Uniform Mitigation Verification Inspection Form

Maintain a copy	y of this form and any	y documentation prov	vided with the insuran	ice policy		
Inspection Date: 05/08/2023						
Owner Information						
Owner Name: Stonewater Condon	Owner Name: Stonewater Condominium Association, Inc			Contact Person:		
Address: 3123-3125 STONEWATE	R DR LAKELAND FL 33	3803 Hoi	ne Phone:			
City: LAKELAND	Zip: 33803	Wo	rk Phone:			
County: POLK		Cel	l Phone:			
Insurance Company:		Pol	icy #:			
Year of Home: 1992	# of Stories: 2	Em				
NOTE: Any documentation used i accompany this form. At least one though 7. The insurer may ask add 1. <u>Building Code</u> : Was the structur	photograph must accorditional questions regardere built in compliance with	npany this form to valid ding the mitigated featu th the Florida Building Co	late each attribute mark re(s) verified on this for ode (FBC 2001 or later) C	ed in questions 3 m.		
with a date after 3/1 B.For the HVHZ Only 1996 provide a pern // C. Unknown or does r	with the FBC: Year Buil/2002: Building Permit Av: Built in compliance with a date and meet the requirements	t For home pplication Date (MM/DD/YY) the the SFBC-94: Year Bue after 9/1/1994: Building	s built in 2002/2003 provies Syy)// ilt For homes but Permit Application Date	ailt in 1994, 1995, and		
OR Year of Original Installation covering identified.				mpliance for each roof No Information Provided for		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type:	/Replacement OR indica	te that no information w	vas available to verify con	mpliance for each roof		
OR Year of Original Installation covering identified.	/Replacement OR indica Permit Application Date	te that no information w	Vas available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle	/Replacement OR indication Permit Application Date	te that no information w	Vas available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile	/Replacement OR indication Permit Application Date	te that no information w	Vas available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up	/Replacement OR indication Permit Application Date	te that no information w	Vas available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal	/Replacement OR indication Permit Application Date	te that no information w	Vas available to verify con Year of Original Installation or Replacement	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other B. All roof coverings listed aborinstallation OR have a roofing permit application a roofing permit application a C. One or more roof coverings meet the	Permit Application Date	FBC or Miami-Dade Product Approval # FBC or Miami-Dade Product 3/1/02 OR the roof is contents of Answer "A" or "E".	vas available to verify con Year of Original Installation or Replacement 2005 duct Approval listing currence roof is original and builted original and builted original and built in 1997 original and built in 1997 or	mpliance for each roof No Information Provided for Compliance		
OR Year of Original Installation covering identified. 2.1 Roof Covering Type: 1. Asphalt/Fiberglass Shingle 2. Concrete/Clay Tile 3. Metal 4. Built Up 5. Membrane 6. Other B. All roof coverings listed abore installation OR have a roofin mustallation OR have a more fing permit application at C. One or more roof coverings meet the state of the covering meet the state of the cover	Permit Application Date	FBC or Miami-Dade Product Approval # FBC or Miami-Dade Product Approv	vas available to verify con Year of Original Installation or Replacement 2005 duct Approval listing currence roof is original and builted original and builted original and built in 1997 original and built in 1997 or	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.
$oldsymbol{\checkmark}$	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.
	E. Other:
	F. Unknown or unidentified.
	G. No attic access.
A Roof 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
[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
Γ	☐ 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 3123-3125 STONEWATER DR LAKELAND FL 33803
spectors initial	
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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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D 0							
	Geometry: What is the roof shape? (Do not consider roofs of porches st structure over unenclosed space in the determination of roof perimeters.)						
	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	least 90%	of the ma	in roof are	ea has a	roof sloj	pe of
	less than 2:12. Roof area with slope less than 2:12 _		q ft; Tota	l roof area		sq	ft
	C. Other Roof- Any roof that does not qualify as either (A) or ((B) above.					
	dary Water Resistance (SWR): (standard underlayments or hot-mo		_	-			
s fi B. N	WR (also called Sealed Roof Deck) Self-adhering polymer modification or foam adhesive SWR barrier (not foamed-on insulation) approximate intrusion in the event of roof covering loss.	ed-bitumen pplied as a	roofing suppleme	underlayn ental mean	nent app s to pro	olied direct the	ectly to dwe
C. t	Jnknown or undetermined.						
-	he lowest protection level for ALL Glazed openings and (b) check the applicable	he protection	on level f	or all Non	-Giazeu	1	50 (**)
.3) as a	applicable. ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each	he protection	on level f		-Grazed	Non-	-Glazed enings
Oper Place a opening form of	ning Protection Level Chart	Windows or Entry Doors			Glass Block	Non-	-Glazed
Oper Oper Place a opening form of weaker	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the	Windows or Entry	Glazed O	penings	Glass	Non- Ope	-Glazed enings Garag
Operal Op	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st form of protection (lowest row) for Non-Glazed openings.	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Garag Door
Operation of the second operation operation operation operation operation operation of the second operation	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st form of protection (lowest row) for Non-Glazed openings. Not Applicable- there are no openings of this type on the structure	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Garag Door
Opel Place a openin form of weakes N/A B	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st 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)	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Garag Door
Oper Place a openin form of weakes	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st 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)	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Gara Door
Oper Place a openin form of weaker N/A A B C D	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st 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,	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Garag Door
Opel Place a openin form of weakes N/A B C D	ning Protection Level Chart n "X" in each row to identify all forms of protection in use for each g type. Check only one answer below (A thru X), based on the weakest f protection (lowest row) for any of the Glazed openings and indicate the st 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	Windows or Entry	Glazed O	penings Skylights	Glass Block	Non- Ope	-Glazed enings Garag Door

G. Unknown or unidentified

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	• For Skylights Only: ASTM E 1886 <u>and</u> AST	M 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	evel D in the table above, and a	no Non-C	Glazed openings classified as Level B, C,		
A.3	One or More Non-Glazed Openings is classified a	s Level B, C, N, or X in the tab	ole above			
are protect product a	c Opening Protection- Cyclic Pressure and 4 eted, at a minimum, with impact resistant coverage pproval 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 L in the table above	evel D in the table above, and i	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	ibove			
C. Exterio	or Opening Protection- Wood Structural	Panels meeting FBC 200	<u>07</u> 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 	One or More Non-Glazed openings classified as I the table above	evel D in the table above, and i	no Non-C	Glazed openings classified as Level N or		
protective with no d N.1 N.2 the tab	One or More Non-Glazed openings is classified as Copening Protection (unverified shutter system) experience coverings not meeting the requirements of Arocumentation of compliance (Level N in the tan All Non-Glazed openings classified as Level A, Bone or More Non-Glazed openings classified as I le above One or More Non-Glazed openings is classified as I le above Some Glazed Openings One or more Glazed	tems with no documentation aswer "A", "B", or C" or system ble above). 5, C, or N in the table above, or evel D in the table above, and the second of the table above.	on) All (stems that no Non-C	at appear to meet Answer "A" or "B" Glazed openings exist Glazed openings classified as Level X in		
	MITIGATION INSPECTIONS MUST BE C 627.711(2), Florida Statutes, provides					
Qualified Inspector Nat	me: 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		
*This verificati	on form is valid for up to five (5) years prov	3-3125 STONEWATER DR ided no material changes h				
inaccuracies for	und on the form.					

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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

Quantieu inspector – i noid an active neense as a: (check one)
Home inspector licensed under Section 468.8314, Florida Statutes who has completed the statutory number of hours of hurricane mitigation train 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: William J. Date: 05/08/2023
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 featur as offering protection from hurricanes.
Inspectors Initials WS Property Address 3123-3125 STONEWATER DR LAKELAND FL 33803

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