## Uniform Mitigation Verification Inspection Form

Maintain a copy	y of this form and a	ny documentation prov	ided with the insuran	ce poncy	
Inspection Date: 05/08/2023					
Owner Information					
Owner Name: Stonewater Condominium Association, Inc			Contact Person:		
Address: 3155-3157 STONEWATER DR LAKELAND FL 33803			Home Phone:		
City: LAKELAND	Zip: 33803	Wor	rk Phone:		
County: POLK		Cell	Phone:		
Insurance Company:		Poli	cy #:		
Year of Home: 1991	# of Stories: 2				
NOTE: Any documentation used in accompany this form. At least one though 7. The insurer may ask add.  1. <u>Building Code</u> : Was the structur the HVHZ (Miami-Dade or Brow	photograph must accorditional questions regare built in compliance w	ompany this form to valid arding the mitigated featu with the Florida Building Co	ate each attribute markere(s) verified on this formode (FBC 2001 or later) O	ed in questions 3 m.	
A. Built in compliance with a date after 3/1.  B. For the HVHZ Only	with the FBC: Year Bu/2002: Building Permit	with the SFBC-94: Year Building after 9/1/1994: Building	built in 2002/2003 provide (Y)//	uilt in 1994, 1995, and	
C. Unknown or does n	not meet the requiremen	ots of Answer "A" or "R"			
		ovide the permit application	n date OR FRC/MDC Pro	. 4 4 A 1 1	
<ol> <li>Roof Covering: Select all roof co OR Year of Original Installation covering identified.</li> <li>2.1 Roof Covering Type:</li> </ol>					
OR Year of Original Installation covering identified.  2.1 Roof Covering Type:	Replacement OR indicement Application Date	cate that no information w	as available to verify con Year of Original Installation or Replacement	mpliance for each roof  No Information Provided for	
OR Year of Original Installation covering identified.	/Replacement OR indicement OR indicement Application Date	cate that no information w	as available to verify con	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 indicement OR	cate that no information w	as 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 indice  Permit Application Date	cate that no information w	as 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 indicement OR	cate that no information w	as 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 indice  Permit Application Date	cate that no information w	as 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 abore installation OR have a roofin B. All roof coverings have a M roofing permit application at C. One or more roof coverings meet the roof.  C. One of coverings meet the roof.  3. Roof Deck Attachment: What is	Permit Application Date	a FBC or Miami-Dade Procate on or after 3/1/02 OR the proval listing current at time a 3/1/2002 OR the roof is ownents of Answer "A" or "B".	as available to verify con  Year of Original Installation or Replacement	npliance 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 Marroofing permit application at C. One or more roof coverings meet the roof.  3. Roof Deck Attachment: What is	Permit Application Date	a FBC or Miami-Dade Product Approval #  a FBC or Miami-Dade Product ate on or after 3/1/02 OR the proval listing current at time a 3/1/2002 OR the roof is o ements of Answer "A" or "It r "A" or "B".	as available to verify con  Year of Original Installation or Replacement	npliance 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 Marroofing permit application at C. One or more roof coverings meet the roof.  3. Roof Deck Attachment: What is	Permit Application Date	a FBC or Miami-Dade Product Approval #  a FBC or Miami-Dade Product ate on or after 3/1/02 OR the proval listing current at time a 3/1/2002 OR the roof is ownents of Answer "A" or "B".  of deck attachment?  (B) roof sheathing attached	as available to verify con  Year of Original Installation or Replacement  2007  duct Approval listing curre e roof is original and built e of installation OR (for the riginal and built in 1997 of 3".  to the roof truss/rafter (spatial 12" in the fieldOR- Bat	npliance for each roof  No Information Provided for Compliance	

<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.

	<b>B.</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.
<b>V</b>	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.
	<b>E.</b> Other:
	F. Unknown or unidentified.
$\Box$	G. No attic access.
	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)
	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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
<b>√</b> 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 nail position requirements of C or D, but is secured with a minimum of 3 nails.
C. s	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. 1	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, or
Г	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.
	sides, and is secured to the top place with a minimum of three hans on each side.
<u></u> E. s	Structural Anchor bolts structurally connected or reinforced concrete roof.
□E. s	

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 22	H. No attic access								
		÷ '	consider roofs of porche ermination of roof perim	-			-		
[			oof shapes greater than 10 tures: feet; Total						
[	B. Flat Roof- Roof	f on a building with	5 or more units where at	least 90%	of the ma	in roof are	a has a	roof slo	oe of
			ith slope less than 2:12 _		q ft; Tota	l roof area		sq	ft
	C. Other Roof- An	y roof that does not	qualify as either (A) or (	B) above.					
Second	ary Water Resistance	(SWR): (standard t	underlayments or hot-mo	pped felts o	do not qu	alify as an	SWR)		
sh fr B. N		ve SWR barrier (not ne event of roof cove	dhering polymer modification foamed-on insulation apering loss.						ectly to dwe
leterm ipon th 3) as a	ne the weakest form of e lowest protection leve oplicable.	protection for each	of wind borne debris proceedings of opening. Secon penings and (b) check the	ond, (a) ch	eck one a	nswer belo	ow (A, I	B, C, N, opening	or X) b
	ing Protection L				Glazed O	penings			enings
					_	l			
opening form of	type. Check only one ans	swer below (A thru X) for any of the Glazed	openings and indicate the	Windows or Entry Doors	Garage Doors	Skylights	Glass Block	Entry Doors	Garag Door
opening orm of weakes	type. Check only one and protection (lowest row) f	swer below (A thru X) for any of the Glazed ( est row) for Non-Glaze	, based on the weakest openings and indicate the ed openings.	or Entry	_	Skylights		-	Door
opening form of weakes	type. Check only one and protection (lowest row) form of protection (lowed lot Applicable - there are no other there are no o	swer below (A thru X) for any of the Glazed of the Start ow) for Non-Glazed openings of this type on	, based on the weakest openings and indicate the ed openings.	or Entry	_		Block	-	
opening orm of veakes N/A	type. Check only one and protection (lowest row) for form of protection (lowest row) for Applicable - there are no descripted cyclic pressure & large	swer below (A thru X) for any of the Glazed of est row) for Non-Glazed openings of this type on the missile (9-lb for windo	, based on the weakest openings and indicate the ed openings.	or Entry	_		Block	-	Dooi
opening orm of weakes N/A	type. Check only one and protection (lowest row) for form of protection (lowest row) for Applicable - there are no descripted cyclic pressure & large	swer below (A thru X) for any of the Glazed cest row) for Non-Glazed openings of this type on the missile (9-lb for windown missile (4-8 lb fo	based on the weakest openings and indicate the ed openings.  the structure  ws doors/4.5 lb for skylights)  ows doors/2 lb for skylights)	or Entry	_		Block	-	Dooi
oppening orm of weakes	type. Check only one ans protection (lowest row) for form of protection (lowed lot Applicable- there are no of ferified cyclic pressure & large ferified cyclic pressure & large ferified plywood/OSB meeting	for any of the Glazed of the strow) for Non-Glazed openings of this type on the missile (9-lb for windown missile (4-8 lb for windown missile	ws doors/2 lb for skylights) abec 2007 compliance with ASTM E 330,	or Entry	_		Block	-	Door
opening orm of weakes	type. Check only one ans protection (lowest row) for form of protection (lowed lot Applicable- there are no of ferified cyclic pressure & large ferified cyclic pressure & large ferified plywood/OSB meeting ferified Non-Glazed Entry or	swer below (A thru X) for any of the Glazed openings of this type on the missile (9-lb for windown missile (4-8 lb	the structure ws doors/4.5 lb for skylights) ows doors/2 lb for skylights) EBC 2007 compliance with ASTM E 330, sistance	or Entry	_		Block	-	Door
opening form of weakes N/A A A A B A A A A A A A A A A A A A A A	type. Check only one ans protection (lowest row) for form of protection (lowed lot Applicable- there are no of ferified cyclic pressure & large ferified cyclic pressure & large ferified plywood/OSB meeting ferified Non-Glazed Entry or ansi/DASMA 108, or PA/TAS	swer below (A thru X) for any of the Glazed dest row) for Non-Glazed epenings of this type on the missile (9-lb for windown missile (4-8 lb fo	the structure ws doors/4.5 lb for skylights) ows doors/2 lb for skylights) EBC 2007 compliance with ASTM E 330, sistance but are not verified	or Entry	_		Block	-	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 	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 a	s Level B, C, N, or X in the tab	ole above			
are protect product a	cted, at a minimum, with impact resistant covered 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 the table above):	s windbo	orne debris protection devices in the		
	ASTM E 1886 <u>and</u> ASTM E 1996 (Large M     SSTD 12 (Large Missile, 4 lb, 4 s 8 lb)	18811e – 4.5 lb.)				
	<ul> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> <li>For Skylights Only: ASTM E 1886 and AST</li> </ul>	M E 1006 (Larga Missila - 2 to	. 4 5 11. \			
☐B.1	<ul> <li>For Skylights Only: ASTM E 1886 <u>and</u> AST</li> <li>All Non-Glazed openings classified as A or B in t</li> </ul>		-	age aviet		
☐B.1	• •		-			
or X	One or More Non-Glazed openings classified as I in the table above	evel D in the table above, and i	no Non-C	nazed 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			
	or Opening Protection- Wood Structural OSB meeting the requirements of Table 1609.1					
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 a	no Non-C	Glazed openings classified as Level N or		
protective	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 tax	tems with no documentationswer "A", "B", or C" or sys	<u>on)</u> All (			
N.1	All Non-Glazed openings classified as Level A, B	, C, or N in the table above, or	no Non-C	Glazed openings exist		
N.2 the tab	One or More Non-Glazed openings classified as I le above	evel D in the table above, and a	no Non-C	Glazed openings classified as Level X in		
<b></b>	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	the 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 <u>3</u>	55-3157 STONEWATER D	OR LAKE	ELAND FL 33803		
	on form is valid for up to five (5) years prov	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 itemse 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,
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: D5/08/2023
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 3155-3157 STONEWATER DR LAKELAND FL 33803

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