

Insurance Appraisals | Reserve Studies | Wind Mitigation

COMMERCIAL WINDSTORM MITIGATION INSPECTION REPORT (OIR-B1-1802)

Prepared for:

East Lake Woodlands Woods Landing Townhomes Unit One Association, Inc.

95-155 Woods Landing Trail (Building 5) Oldsmar, FL 34677

As of 3/5/2014





Felten Professional Adjustment Team, LLC 701 Enterprise Rd. E., Suite 704 Safety Harbor, FL 34695 Office 866.568.7853 Fax 866.804.1052 www.FPATadjusters.com



FPAT File #REN147325

RECAPITULATION OF MITIGATION FEATURESFor 95-155 Woods Landing Trail (Building 5)

1. <u>Building Code:</u> Unknown or does not meet the requirements of Answer A or B

Comments: The year of construction was verified as 1984 per Pinellas County

Property Appraiser.

2. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2012. The roof permit was

confirmed and the permit number is CW12-09321. This roof was verified as meeting the building code requirements outlined on the

mitigation affidavit.

3. Roof Deck Attachment: Level C

Comments: Inspection verified 1/2" plywood roof deck attached with 8d nails at a

minimum 6" on the edge & 6" in the field.

4. Roof to Wall Clips

Attachment:

Comments: Inspection verified hurricane clips fastened with a minimum of three

nails.

5. Roof Geometry: Other Roof

Comments: Inspection verified a gable roof shape.

6. SWR: Yes

Comments: SWR was verified at time of inspection. The Secondary Water

Resistance verified is a self-adhering peel and stick.

7. Opening Protection: None or Some Glazed Openings

Comments: At the time of inspection, no opening protection was verified.



Address Verification



Roof Covering



Roof Deck Attachment



Nailing Pattern



Nailing Pattern



Roof to Wall Attachment



Roof Shape



SWR Verified

Uniform Mitigation Verification Inspection Form

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

<u>Maintain a copy of this form and any documentation provided with the insurance poncy</u>							
Inspection Date: 3/5/2014							
Owner Information							
Owner Name: East Lake Woodlands Wood	s Landing Townhomes Unit One Association	Contact Person: Kim Hayes					
Inc.							
Address: 95-155 Woods Landing Trail (Bu	Home Phone:						
City: Oldsmar	Zip: 34677	Work Phone:					
County: Pinellas		Cell Phone:					
Insurance Company:		Policy #:					
Year of Home: 1984	# of Stories: 2	Email: khayes@mgmt-assoc.com					

NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.

1.	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)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
[]	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
[X	C. Unknown or does not meet the requirements of Answer "A" or "B"

2. **Roof Covering:** Select all roof covering types in use. Provide the permit application date OR FBC/MDC Product Approval number OR Year of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering identified.

2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
[X] 1. Asphalt/Fiberglass Shingle	11/27/2012		2012	[]
[] 2. Concrete/Clay Tile				[]
[] 3. Metal				[]
[] 4. Built Up				[]
[] 5. Membrane				[]
[] 6. Other				[]

- [X] 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 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 requirements of Answer "A" or "B".
- D. No roof coverings meet the requirements of Answer "A" or "B".
- 3. Roof Deck Attachment: What is the weakest form of roof deck attachment?
- [] 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 field. -OR- Batten decking supporting 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.
- [] 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.
- [X] 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

	A									
Inspectors Initials	0	Property	Address	<u>95-155</u>	Woods	Landing	Trail (Building	(5),	Oldsmar

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	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.
4.	Roof to Wall Attachment: What is the WEAKEST roof to wall connection? (Do not include attachment of hip/valley jacks within
[]	5 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
	Minimal conditions to qualify for categories B, C, or D. All visible metal connectors are:
	[X]Secured to truss/rafter with a minimum of three (3) nails, and [X]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.
[X	B. Clips
	[X] 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.
	 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 [] 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
[X	[] C. Other Roof Any roof that does not qualify as either (A) or (B) above.
[X []	 Secondary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) 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.

Inspectors Initials Property Address 95-155 Woods Landing Trail (Building 5), Oldsmar

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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			Glazed Openings				
openi form	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 eakest form of protection (lowest row) for 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						
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						
	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						·

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
[] <u>B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only)</u> All Glazed opening 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 fo "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 Σ 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

Inspectors Initials	Property Address	95-155 Woods L	anding Trail (Building 5),	Oldsmar
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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 (unverified shutter sys					
"B" with no documentation of compliance (Level N		1 Systems	that appear to meet ranswer 11 of		
□ 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 I table above 	D in the table above, and no No	on-Glazed	openings classified as Level X in the		
☐ N.3 One or More Non-Glazed openings is classified as Leve					
[X] X. None or Some Glazed Openings One or more Glazed	openings classified and Lev	el X in th	e table above.		
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi					
Qualified Inspector Name: John Felten	License Type: CBC		License or Certificate #: CBC1255984		
Inspection Company: Felten Professional Adjustment Tea	am, LLC.	Phone:	866-568-7853		
Qualified Inspector – I hold an active license as a	: (check one)				
☐ Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board			r of hours of hurricane mitigation		
 □ Building code inspector certified under Section 468.607, Florida □ General, building or residential contractor licensed under Section 					
☐ Professional engineer licensed under Section 471.015, Florida St	atutes.				
\square Professional architect licensed under Section 481.213, Florida St	atutes.				
Any other individual or entity recognized by the insurer as posse verification form pursuant to Section 627.711(2), Florida Statute		ns to prope	erly complete a uniform mitigation		
I, am a qualified inspection and I agree to be responsible for his/her work.					
Qualified Inspector Signature: Dat	e: <u>3/5/2014</u>				
	, ,				
An individual or entity who knowingly or through gross ne is subject to investigation by the Florida Division of Insuran					
appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduc	ection 627.711(4)-(7), Flori	ida Statu	tes) The Qualified Inspector who		
performed the inspection.					
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification Signature: Hom Olayer CC.AM I	was provided to me or my	Authorize	d Renresentative		
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to who of the first degree. (Section 627.711(7), Florida Statutes)	false or fraudulent mitigat hich the individual or entit	ion verifi y is not er	cation form with the intent to ntitled commits a misdemeanor		
The definitions on this form are for inspection purposes only and cannot be hurricanes.	e used to certify any product or	construction	n feature as offering protection from		
Inspectors Initials Property Address 95-155 Woods L	anding Trail (Building 5), C	<u>Oldsmar</u>			
*This verification form is valid for up to five (5) years prov	ided no material changes l	have been	n made to the structure or		

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inaccuracies found on the form.