Uniform Mitigation Verification Inspection Form

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

Inspection Date: 9/18/2025						
Owner Information						
Owner Name: Sea Echo Condom	inium		Contact Person:			
Address: 400 Auburn Dr			Home Phone:			
City: Daytona Beach	Zip: 32118		Work Phone:			
County: Volusia			Cell Phone:			
Insurance Company:	,		Policy #:			
Year of Home: 1973 # of Stories: 2 Email:						
NOTE: Any documentation used accompany this form. At least one though 7. The insurer may ask ad	photograph must ac ditional questions reg	company this form to valid garding the mitigated featu	date each attribute marke ure(s) verified on this form	ed in questions 3 n.		
 1. <u>Building Code</u>: 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)//						
✓ C. Unknown or does not meet	et the requirements of	Answer "A" or "B"				
2. Roof Covering: Select all roof coordinates of Original Installation/covering identified.				ance for each roof		
2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
✓ 1. Asphalt/Fiberglass Shingle	4 / 29/ 2019	C1904-060	2019			
☐ 2. Concrete/Clay Tile						
3. Metal						
☐ 4. Built Up						
5. Membrane						
☐ 6. Other						
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 roofing permit application af						
☐ C. One or more roof coverings do not meet the requirements of Answer "A" or "B".						
☐ D. No roof coverings meet the	ne requirements of Ans	swer "A" or "B".				
3. Roof Deck Attachment : What is	s 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 fieldOR- Batten decking supporting wood shakes or wood shinglesOR- 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.						
24"inches o.c.) by 8d common other deck fastening system	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 than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.					
24"inches o.c.) by 8d commedecking with a minimum of	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					
Inspectors Initials RG Property	Address 400 Auburi	n Dr, Daytona Beach, FL	32118	<u> </u>		

		or greater re	esistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
		-	ced Concrete Roof Deck.
		F. Unknow	rn or unidentified.
		G. No attic	
4.		eet of the insi	<u>ttachment</u> : What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within ide or outside corner of the roof in determination of WEAKEST type)
	\checkmark	A. Toe Nai	
		∀	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
	Mi	nimal condit	tions 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. Clips	
			position requirements of C or D, but is secured with a minimum of 3 nails.
		C. Single V	
		D D 11	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	•
			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. Structur	al Anchor bolts structurally connected or reinforced concrete roof.
		F. Other:	
		G. Unknow	vn or unidentified
		H. No attic	access
5.			w: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of re over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
		A. Hip Roo	
		B. Flat Roo	
	√	C. Other R	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof area sq ft oof Any roof that does not qualify as either (A) or (B) above.
6	Coo	andawy Wa	tou Desistance (SW/D) (standard underlayments on het manned felts de net qualify es en SWD)
0.		A. SWR (a sheathin dwelling	ter Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the ag or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the g from water intrusion in the event of roof covering loss.
	✓	B. No SWI	
	•	C. UIIKNOW	vn or undetermined.
Ins	spec	tors Initials	RG Property Address 400 Auburn Dr, Daytona Beach, FL 32118
*T	his '	verification	form is valid for up to five (5) years provided no material changes have been made to the structure or

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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 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		×
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						
N	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

A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist

- 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

in the table above

X in the table abo	ve				
\square A.3 One or More N	Non-Glazed Openings is classified as Level B, C, N, or X in the table above				
	ing Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed				
openings are protec	cted, 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 Pressur	e and Large Missile Impact" (Level B in the table above):				
• AST	TM E 1886 <u>and</u> ASTM E 1996 (Large Missile – 4.5 lb.)				
• SST	TD 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-Glaze	d openings classified as A or B 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

C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 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).

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

\square C.1 All Non-Glazed openings classified as A, B, or C in	n the table above, or no Non-Glazed openings exist
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 \square 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

☐ B.3 One or More Non-Glazed openings is classified as Level C, N, or X in the table above

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N. Exterior Opening Protection (unverified shutter sprotective coverings not meeting the requirements of An with no documentation of compliance (Level N in the ta	nswer "A", "B", or C" or sy				
•					
N.2 One or More Non-Glazed openings classified as Level table above			• •		
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above				
✓ X. None or Some Glazed Openings One or more Glaze	ed openings classified and L	evel X i	n the table above.		
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	~				
Qualified Inspector Name: Ray Giaccone	License Type: General Building Contra	actor	License or Certificate #: CBC 1251714		
Inspection Company:	General Building Contra	Phone:	CBC 12317 14		
Expert Inspectors		386-6	77-8886		
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 necessary qualifications to properly complete a uniform mitigation 					
verification form pursuant to Section 627.711(2), Florida Statute	S.				
Individuals other than licensed contractors licensed under Section 489.111, Florida Statutes, or professional engineer licensed under Section 471.015, Florida Statues, 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, Ray Giaccone am a qualified inspector and I personally performed the inspection or (licensed (print name) contractors and professional engineers only) I had my employee (Doug Wilmot perform the inspection (print name of inspector) and I agree to be responsible for his/her work. Qualified Inspector Signature: Date: 9/18/2025 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 misconduc 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 obtain or receive a discount on an insurance premium to w 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.					
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