#### Felten Professional Adjustment



## Reserve Studies | Insurance Appraisals | Wind Mitigation

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

Countryside Key Homeowners Association, Inc. 412-422 Countryside Key Blvd Oldsmar , FL 34677



As of 4/29/2019 FPAT File# MIT1811218

FELTEN PROFESSIONAL ADJUSTMENT TEAM 866.568.7853
www.FPATadjusters.com | info@FPATadjusters.com



SUPPORTING DOCUMENTION OF WINDSTORM MITIGATION FEATURES FPAT File #MIT1811218 LOCATED AT: 412-422 Countryside Key Blvd

# RECAPITULATION OF MITIGATION FEATURES For 412-422 Countryside Key Blvd

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

Comments: The year of construction was verified as 1998 per Pinellas County

Property Appraiser.

2. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2013. The roof permit was

confirmed and the permit numbers are 20120629-20120634. This roof was verified as meeting the building code requirements outlined

on the mitigation affidavit.

3. Roof Deck Attachment: No Attic Access

Comments: Due to no attic access we were unable to determine the Roof Deck

Attachment.

4. Roof to Wall No Attic Access

**Attachment:** 

Comments: Due to no attic access we were unable to determine the Roof to Wall

Attachment.

5. Roof Geometry: Other Roof

Comments: Inspection verified a gable roof shape.

6. SWR: Unknown or Undetermined

Comments: Due to no attic access we were unable to verify SWR.

7. **Opening Protection:** None or Some Glazed Openings

Comments: No opening protection verified at the time of inspection.



Address Verification



**Exterior Elevation** 



**Roof Construction** 

#### **Uniform Mitigation Verification Inspection Form**

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

<u> </u>	B 19111 Will Will Go V Will Will Gir P19 + 14	<del>or with the his manual party</del>	
Inspection Date: 4/29/2019			
Owner Information			
Owner Name: Countryside Key Homeown	ers Association, Inc.	Contact Person: Robert Kelly	
Address: 412-422 Countryside Key Blvd		Home Phone:	
City: Oldsmar	Zip: 34677	Work Phone: (727) 726-8000 x232	
County: Pinellas		Cell Phone:	
Insurance Company:		Policy #:	
Year of Home: 1998	# of Stories: 2	Email: rkelly@ameritechmail.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.

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)//
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	1/25/2013			
[] 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.
- [] 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

Inspectors Initials Property Address 412-422 Countryside Key Blvd, Oldsmar

<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.

182 psf.	esistance than 8d common nails spaced a maximum of 6 inches in the field or has a mean uplift resistance of at least
D. Reinforced Co	oncrete Roof Deck.
[] E. Other: [] F. Unknown or u	unidentified
[X] G. No attic acc	
4. Roof to Wall At	<b>tachment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valley jacks within de or outside corner of the roof in determination of WEAKEST type)
[] A. Toe Nails	or outside connected and root in determination of 1/2/1/2221 type)
	Truss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the
	p plate of the wall, or Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
Minimal conditi	ons 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
[]A	Attached to the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap from the
II D. Clima	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. Clips	Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>
	Metal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail
po [] C. Single Wraps	sition requirements of C or D, but is secured with a minimum of 3 nails.
[] C. Shigic Wiaps	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 Wrap	
be mi	Metal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond am, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a inimum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b> Metal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on
	th sides, and is secured to the top plate with a minimum of three nails on each side.
	chor bolts structurally connected or reinforced concrete roof.
[] F. Other:	
[] G. Unknown or t	
[X] H. No attic acc	ess
	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of e 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: ; Total roof system perimeter:
[] 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.
C C	Decidence (CWD): (decided and all all all all all all all all all al
[] A. SWR (also ca sheathing o	er Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) lled Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the room adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling intrusion in the event of roof covering loss.
[] B. No SWR.	
[X] C. Unknown o	r undetermined.

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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.

	ening Protection Level Chart		Non-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						
N	Opening Protection products that appear to be A or B but are not verified						
IV	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

☐ 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

	☐ 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
[]	B. Exterior Opening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings
	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 for "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.)

	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 and 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 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
[]	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).
	☐ 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

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

the table above

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FP	AΤ	File	# <b>N</b>	IIT1	l R 1	121	١X

_	ted with r "A" or
□ 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 D in the table above, and no Non-Glazed openings classified as Level X table above	in the
☐ N.3 One or More Non-Glazed openings is classified as Level X in the table above	
[X] X. None or Some Glazed Openings One or more Glazed openings classified and Level X in the table above.	
MITIGATION INSPECTIONS MUST BE CERTIFIED BY A QUALIFIED INSPECTOR. Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.	
Qualified Inspector Name: John Felten License Type: CBC License or Certificate #: CBC12:	5984
Inspection Company: Felten Professional Adjustment Team, LLC.  Phone: 866-568-7853	
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 mitigat training approved by the Construction Industry Licensing Board and completion of a proficiency exam.	on
<ul> <li>□ Building code inspector certified under Section 468.607, Florida Statutes.</li> <li>□ General, building or residential contractor licensed under Section 489.111, Florida Statutes.</li> </ul>	
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 form pursuant to Section 627.711(2), Florida Statutes.	ion
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, John Felten am a qualified inspector and I personally performed the inspection or (licensed)	<u> </u>
contractors and professional engineers only) I had my employee ( <u>Ian Wright</u> ) perform the inspection and I agree to be responsible for his/her work.	
and I agree to be responsible for his/her work.	or who
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification 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 Inspect certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector person	or who
An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification 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 Inspect certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector person	or who nally
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An individual or entity who knowingly or through gross negligence provides a false or fraudulent mitigation verification 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 Inspect certifies this form shall be directly liable for the misconduct of employees as if the authorized mitigation inspector perso 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.	or who nally

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

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