

## **RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION**



Prepared Exclusively for Sunshine Villas Homeowners Association, Inc.

As of 10/26/2023 | FPAT File# MIT2321009



**Felten Property Assessment Team** 

866.568.7853 | www.fpat.com

## RECAPITULATION OF MITIGATION FEATURES For Bldg P, 21150 Gertrude Ave, Units 1-6

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

Comments: The year of construction was verified as 1977 per Charlotte County

Property Appraiser.

2. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2022. The roof permit was confirmed

and the permit number is 20221259944. 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 Toe Nails

Attachment:

Comments: Inspection verified embedded straps fastened with less than three nails.

5. Roof Geometry: Hip Roof

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

Address Verification





**Exterior Elevation** 



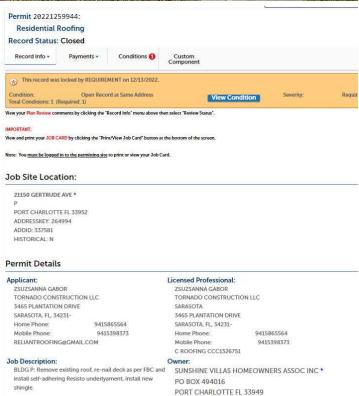
**Exterior Elevation** 



**Exterior Elevation** 







**Roof Construction** 



**Roof Construction** 

**Roof Construction** 

**Roof Construction** 







**Roof Construction** 



## **Uniform Mitigation Verification Inspection Form**

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

	<u> </u>					
Inspection Date: 10/26/2023						
Owner Information						
Owner Name: Sunshine Villas Homeowners Association, Inc.		Contact Person: Dominick Behson				
Address: Bldg P, 21150 Gertrude	Home Phone:					
City: Port Charlotte Zip: 33952		Work Phone: (941) 815-3664				
County: Charlotte		Cell Phone:				
Insurance Company:	Policy #:					
Year of Home: 1977	# of Stories: 1	Email: infosunshinecam@gmail.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.	<b>Building Code</b> : 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	12/13/2022		2022	
[] 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

Inspectors Initials Property Address Bldg P, 21150 Gertrude Ave, Units 1-6, Port Charlotte

<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.	
	Concrete Roof Deck.
[] E. Other:	
[] F. Unknown or	unidentified.
[] G. No attic acc	ess.
5 feet of the ins	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)
[X] A. Toe Nails	
t	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
	[X] Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	itions to qualify for categories B, C, or D. All visible metal connectors are:
	[]Secured to truss/rafter with a minimum of three (3) nails, <b>and</b> []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. Clips	<i>g</i>
	Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>
Ī	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 Wrap	
	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 Wra	
} I ]	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 the opposite or the sides and is secured to the wall on the opposite or the strap with a st
	poth sides, and is secured to the top plate with a minimum of three nails on each side.
[] E. Structural A [] F. Other:	nchor bolts structurally connected or reinforced concrete roof.
[] G. Unknown o	r unidentified
[] H. No attic acc	
	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of are over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
[X] 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
[] C. Other Roof	Any roof that does not qualify as either (A) or (B) above.
[X] A. SWR (also sheathing	ater Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) of called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the for foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling
	er intrusion in the event of roof covering loss.
[] B. No SWR.	u yundatamainad
[] C. Unknown or	i undetermined.

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

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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	Χ		Χ
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	Χ				Χ	·

- [] 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
- [] 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 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.)

Exterior Opening Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with plywood/OSB				
	B.3 One or More Non-Glazed openings is classified as Level C, N, or X 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 in the table above			
	B.1 All Non-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist			

	☐ 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 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		

☐ 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 syst protective coverings not meeting the requirements of				
"B" with no documentation of compliance (Level N in the table above).				
☐ N.1 All Non-Glazed openings classified as Level A, B, C, or	N in the table above, or no No	on-Glazed openings exist		
☐ N.2 One or More Non-Glazed openings classified as Level E table above	) 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 in the table above			
[X] X. None or Some Glazed Openings One or more Glazed		vel X in the 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 Property Assessment Team		Phone: 866-568-7853		
Qualified Inspector – I hold an active license as a:	(check one)			
Home inspector licensed under Section 468.8314, Florida Statutes training approved by the Construction Industry Licensing Board a	•	•		
<ul> <li>□ Building code inspector certified under Section 468.607, Florida S</li> <li>□ General, building or residential contractor licensed under Section</li> </ul>				
☐ Professional engineer licensed under Section 471.015, Florida Sta	itutes.			
☐ Professional architect licensed under Section 481.213, Florida Sta	itutes.			
☐ Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes		ns to properly complete a uniform mitigation		
Individuals other than licensed contractors licensed under S				
under Section 471.015, Florida Statues, must inspect the str Licensees under s.471.015 or s.489.111 may authorize a dire				
experience to conduct a mitigation verification inspection.	et employee who possesse	s the requisite skin, knowledge, and		
I, John Felten am a qualified inspector and I	nersonally nerformed the	e inspection or (licensed		
contractors and professional engineers only) I had my employ				
and I agree to be responsible for his/her work.		•		
R A				
Qualified Inspector Signature: Date	e: <u>10/26/2023</u>			
An individual or antity who knowingly or through gross nos	digonoo providos o folso o	r fraudulant mitigation varification form		
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 misconduct of employees as if the authorized mitigation inspector personally performed the inspection.				
Homeowner to complete: I certify that the named Qualifie				
residence identified on this form and that proof of identification	on was provided to me or m	y Authorized Representative.		
Signature:	Date:			
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 w	which the individual or ent			
misdemeanor of the first degree. (Section 627.711(7), Flori	da 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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