



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

129 Camphor Cir, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 129 Camphor Cir, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1986 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900915 and 201900916. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit Information

Permit Number: 201900915
Full information regarding the selected permit
This permit expired on 01/22/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

Permit No: 201900915
Description: RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAT TIMBERLINE
129 CAMPHOR CIR A,B,C,D
Address: 129 Camphor CIR APT A, Oldsmar, FL 34677-4513
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 06/17/2019
Issued Date: 06/17/2019
Permit Expiration Date: 01/22/2020
Permit Status: COMPLT
Closed Date: 08/05/2019
Total Valuation: 10000.00

Roof Permit Information

Permit Number: 201900916
Full information regarding the selected permit
This permit expired on 01/22/2020

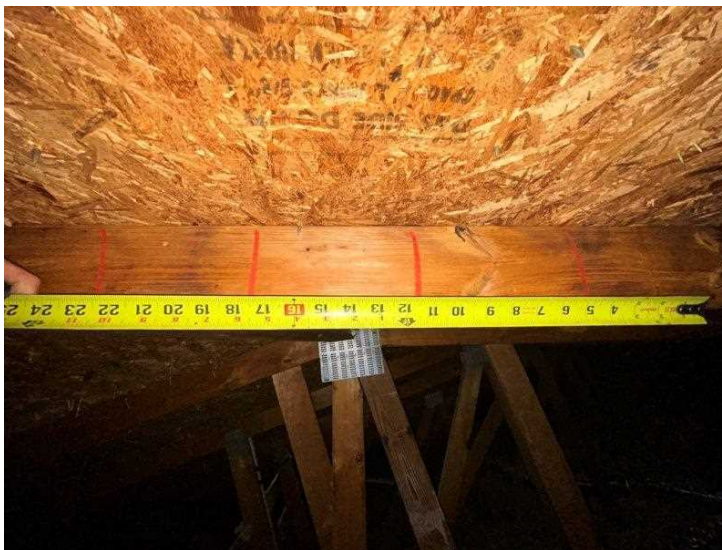
Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

Permit No: 201900915
Description: RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAT TIMBERLINE
127 CAMPHOR CIR E,F,G,H
Address: 129 Camphor CIR APT E, Oldsmar, FL 34677-4513
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 06/17/2019
Issued Date: 06/17/2019

Roof Construction





Roof Construction



Roof Construction



Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 129 Camphor Cir, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1986 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 6/17/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 129 Camphor Cir, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 129 Camphor Cir, Units A-H, Oldsmar

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 129 Camphor Cir, Units A-H, Oldsmar

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- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 129 Camphor Cir, Units A-H, Oldsmar

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RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

130 Sabal Ct, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 130 Sabal Ct, Units A-H

- | | |
|---|---|
| 1. Building Code: Comments: | Unknown or does not meet the requirements of Answer A or B The year of construction was verified as 1987 per Pinellas County Property Appraiser. |
| 2. Roof Covering: Comments: | FBC Equivalent The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201901129 and 201901130. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit. |
| 3. Roof Deck Attachment: Comments: | Level C Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field. |
| 4. Roof to Wall Attachment: Comments: | Clips Inspection verified hurricane clips fastened with a minimum of three nails. |
| 5. Roof Geometry: Comments: | Hip Roof Inspection verified a hip roof shape. |
| 6. SWR: Comments: | No At the time of inspection, no SWR was verified. |
| 7. Opening Protection: Comments: | None or Some Glazed Openings Inspection verified no opening protection. |

Address Verification



Exterior Elevation



Exterior Elevation





Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit
 Information

Permit Number: 201901129

Full information regarding the selected permit

This permit expired on 02/03/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201901129

Description: RE-ROOF TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW & SHINGLE WITH GAF TIMBERLINE

Address: 130 Sabal CT # 18A, Oldsmar, FL 34677-4586

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 07/24/2019

Issued Date: 07/24/2019

Permit Expiration Date: 02/03/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Permit
 Information

Permit Number: 201901130

Full information regarding the selected permit

This permit expired on 02/03/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201901130

Description: RE-ROOF TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW & SHINGLE WITH GAF TIMBERLINE UNITS E, F, G, H

Address: 130 Sabal CT # 18E, Oldsmar, FL 34677-4586

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 07/24/2019

Issued Date: 07/24/2019

Permit Expiration Date: 02/03/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Construction





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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 130 Sabal Ct, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 7/24/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 130 Sabal Ct, Units A-H, 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:

- 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 1/2" 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

- 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.

D. 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: ; 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.

6. **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 *JA* Property Address 130 Sabal Ct, Units A-H, Oldsmar

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 130 Sabal Ct, Units A-H, Oldsmar

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- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer “A”, “B”, or “C” or systems that appear to meet Answer “A” or “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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (Scott Ackerman) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 130 Sabal Ct, Units A-H, Oldsmar

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RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

131 Sabal Ct, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 131 Sabal Ct, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900917 and 201900918. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.

Address Verification



Exterior Elevation



Exterior Elevation





Exterior Elevation



Exterior Elevation

Permit Number: 201900917
Full information regarding the selected permit
This permit expired on 01/22/2020
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

| | |
|-------------------------|---|
| Permit No: | 201900917 |
| Description: | RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK, DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAF TIMBERLINE |
| Address: | 131 SABAL CT A,B,C,D |
| General Contractor: | 131 Sabal CT # 12A, Oldsmar, FL 34677-4587 |
| Receipt Date: | 130405/WATERTIGHT ROOFING SERVICES, L |
| Issued Date: | 06/17/2019 |
| Permit Expiration Date: | 01/22/2020 |
| Permit Status: | COMPLT |
| Closed Date: | 05/19/2021 |
| Total Valuation: | 10000.00 |

Roof Permit Information

Roof Permit
Information

Permit Number: 201900918

Full information regarding the selected permit

This permit expired on 01/22/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201900918

Description: RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAT TIMBERLINE

Address: 131 SABAL CT E.F.G.H

131 Sabal CT # 12E, Oldsmar, FL 34677-4587

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 06/17/2019

Issued Date: 06/17/2019

Permit Expiration Date: 01/22/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00



Roof Construction



Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 131 Sabal Ct, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 6/17/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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

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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:

- 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 1/2" 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

- 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.

D. 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: ; 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.

6. **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 *JA* Property Address 131 Sabal Ct, Units A-H, Oldsmar

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

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*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (Scott Ackerman) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 131 Sabal Ct, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

132 Sabal Ct, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 132 Sabal Ct, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201901131 and 201901132. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit Information

Permit Number: 201901131
Full information regarding the selected permit
This permit expired on 02/03/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201901131
Description: RE-ROOF TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW & SHINGLE WITH GAF TIMBERLINE UNITS A, B, C, D
Address: 132 Sabal CT # 19A, Oldsmar, FL 34677-4588
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 07/24/2019
Issued Date: 07/24/2019
Permit Expiration Date: 02/03/2020
Permit Status: COMPLT
Closed Date: 05/18/2021
Total Valuation: 10000.00

Roof Permit Information

Permit Number: 201901132
Full information regarding the selected permit
This permit expired on 02/03/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201901132
Description: RE-ROOF TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW & SHINGLE WITH GAF TIMBERLINE UNITS E, F, G, H
Address: 132 Sabal CT # 19E, Oldsmar, FL 34677-4588
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 07/24/2019
Issued Date: 07/25/2019
Permit Expiration Date: 02/03/2020
Permit Status: COMPLT
Closed Date: 05/18/2021
Total Valuation: 10000.00

Roof Construction



SUPPORTING DOCUMENTATION OF WINDSTORM MITIGATION FEATURES
LOCATED AT: 132 Sabal Ct, Units A-H

FPAT File #MUD2320834



Roof Construction



Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 132 Sabal Ct, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 7/24/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 132 Sabal Ct, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 132 Sabal Ct, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 132 Sabal Ct, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (Scott Ackerman) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 132 Sabal Ct, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

133 Sabal Ct, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 133 Sabal Ct, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1988 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900920 and 201900921. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.

Address Verification



Exterior Elevation



Exterior Elevation





Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit
 Information

Permit Number: 201900920

Full information regarding the selected permit

This permit expired on 01/22/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201900920

Description: RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAT TIMBERLINE

Address: 133 SABAL CT UNIT A,B,C,D
 133 Sabal CT # 20-A, Oldsmar, FL 34677-4589

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 06/17/2019

Issued Date: 06/17/2019

Permit Expiration Date: 01/22/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Permit
 Information

Permit Number: 201900921

Full information regarding the selected permit

This permit expired on 01/22/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201900921

Description: RE-ROOF-TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW + SHINGLE WITH GAT TIMBERLINE

Address: 133 SABAL CT UNIT E,F,G,H
 133 Sabal CT # 20-E, Oldsmar, FL 34677-4589

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 06/17/2019

Issued Date: 06/17/2019

Permit Expiration Date: 01/22/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Construction





Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 133 Sabal Ct, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1988 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 6/17/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 133 Sabal Ct, Units A-H, 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:

- 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 1/2" 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

- 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.

D. 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: ; 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.

6. **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 *JA* Property Address 133 Sabal Ct, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 133 Sabal Ct, Units A-H, Oldsmar

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- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer “A”, “B”, or C” or systems that appear to meet Answer “A” or “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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: **9/19/2023**

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 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 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  Property Address 133 Sabal Ct, Units A-H, Oldsmar

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RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

134 Sycamore Ln, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 134 Sycamore Ln, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900726 and 201900727. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation

Permit Number: 201900726

Full information regarding the selected permit

This permit expired on 01/22/2020

[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201900726

Description: TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGERPAW AND SHINGLE WITH GAF TIMBERLINE HD.

Address: 134 SYCAMORE LN, UNITS A,B,C,D

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 05/13/2019

Issued Date: 05/13/2019

Permit Expiration Date: 01/22/2020

Permit Status: COMPLT

Closed Date: 05/19/2021

Total Valuation: 10000.00

Roof Permit Information

Roof Permit Information

Permit Number: 201900727

Full information regarding the selected permit

This permit expired on 01/22/2020

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

Permit No: 201900727

Description: TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGERPAW AND SHINGLE WITH GAF TIMBERLINE HD.

Address: 134 SYCAMORE LANE UNITS E, F, G, H

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 05/13/2019

Issued Date: 05/13/2019

Permit Expiration Date: 01/22/2020

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Construction



Roof Construction





Roof Construction



Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 134 Sycamore Ln, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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) ___/___/_____

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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 5/13/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

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 134 Sycamore Ln, Units A-H, 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:

- 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 1/2" 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

- 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.

D. 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: ; 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.

6. **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 134 Sycamore Ln, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 134 Sycamore Ln, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 134 Sycamore Ln, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

135 Hunter Lake Dr, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 135 Hunter Lake Dr, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1986 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900501 and 201900502. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.

Address Verification



Exterior Elevation



Exterior Elevation





Exterior Elevation



Exterior Elevation

Permit Number: 201900501

Full information regarding the selected permit

This permit expired on 11/04/2019

[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

| | |
|---------------------|---|
| Permit No: | 201900501 |
| Description: | TEAR OFF SHINGLE DOWN TO DECK RE-ROOF UNIT# A,B,C,D |
| Address: | 135 Hunter Lake DR UNIT A, Oldsmar, FL 34677-4573 |
| General Contractor: | 130405/WATERTIGHT ROOFING SERVICES, L |
| Receipt Date: | 04/19/2019 |
| Issued Date: | 04/19/2019 |

Roof Permit Information

Roof Permit Information

Permit Number: 201900502

Full information regarding the selected permit

This permit expired on 11/04/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

▼ Main

Permit No: 201900502

Description: TEAR OFF SHINGLE DOWN TO DECK RE-ROOF UNIT# E,F,G,H

Address: 135 Hunter Lake DR UNIT E, Oldsmar, FL 34677-4573

General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 04/19/2019

Issued Date: 04/19/2019

Roof Construction



Roof Construction





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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 135 Hunter Lake Dr, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1986 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 4/19/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 135 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 *JA* Property Address 135 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 135 Hunter Lake Dr, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer “A”, “B”, or C” or systems that appear to meet Answer “A” or “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, and 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: **9/19/2023**

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 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 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  Property Address 135 Hunter Lake Dr, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

136 Sycamore Ln, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834



Felten Property Assessment Team

866.568.7853 | www.fpat.com

RECAPITULATION OF MITIGATION FEATURES For 136 Sycamore Ln, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900604 and 201900605. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation

Exterior Elevation



Permit Number: 201900604

Full information regarding the selected permit

This permit expired on 11/06/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
| <p>Main</p> <p>Permit No: 201900604</p> <p>Description: REROOF - TEAR OFF SHINGLES DOWN TO DECK, DRY IN WITH GAF TIGERPAW & SHINGLE WITH GAF TIMBERLINE</p> <p>136 SYCAMORE LANE UNITS A,B,C,D</p> <p>Address: 136 Sycamore LN # 10A, Oldsmar, FL 34677-4525</p> <p>General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L</p> <p>Receipt Date: 05/02/2019</p> <p>Issued Date: 05/07/2019</p> <p>Permit Expiration Date: 11/06/2019</p> <p>Permit Status: COMPLT</p> <p>Closed Date: 05/10/2019</p> <p>Total Valuation: 10000.00</p> | | | | | | | |

Roof Permit Information

Permit Number: 201900605

Full information regarding the selected permit

This permit expired on 11/06/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
| <p>Main</p> <p>Permit No: 201900605</p> <p>Description: REROOF - TEAR OFF SHINGLES DOWN TO DECK, DRY IN WITH GAF TIGERPAW & SHINGLE WITH GAF TIMBERLINE</p> <p>136 SYCAMORE LANE UNITS E,F,G,H</p> <p>Address: 136 Sycamore LN # 10E, Oldsmar, FL 34677-4525</p> <p>General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L</p> <p>Receipt Date: 05/02/2019</p> <p>Issued Date: 05/07/2019</p> <p>Permit Expiration Date: 11/06/2019</p> <p>Permit Status: COMPLT</p> <p>Closed Date: 05/18/2021</p> <p>Total Valuation: 10000.00</p> | | | | | | | |

Roof Permit Information



Roof Construction



Roof Construction

Roof Construction





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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 136 Sycamore Ln, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 5/7/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 136 Sycamore Ln, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 136 Sycamore Ln, Units A-H, Oldsmar

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 136 Sycamore Ln, Units A-H, Oldsmar

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- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (Scott Ackerman) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 136 Sycamore Ln, Units A-H, Oldsmar

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RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

137 Hunter Lake Dr, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 137 Hunter Lake Dr, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1986 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900499 and 201900500. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit
Information

Permit Number: 201900499
Full information regarding the selected permit
This permit expired on 10/27/2019
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

Permit No: 201900499
Description: TEAR OFF SHINGLE DOWN TO DECK RE-ROOF UNIT# A,B,C,D
Address: 137 Hunter Lake DR UNIT A, Oldsmar, FL 34677-4574
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 04/19/2019
Issued Date: 04/19/2019

Roof Permit
Information

Permit Number: 201900500
Full information regarding the selected permit
This permit expired on 10/27/2019
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

Permit No: 201900500
Description: TEAR OFF SHINGLE DOWN TO DECK RE-ROOF UNIT# E,F,G,H
Address: 137 Hunter Lake DR UNIT E, Oldsmar, FL 34677-4574
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 04/19/2019
Issued Date: 04/19/2019

Roof Construction

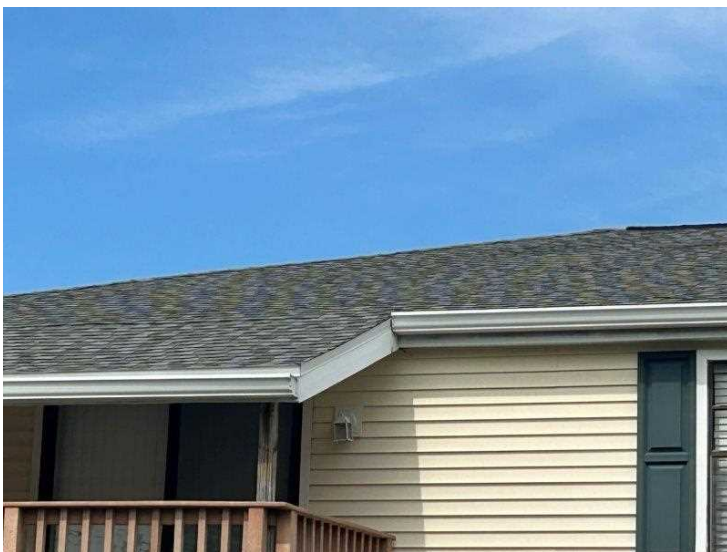




Roof Construction



Roof Construction



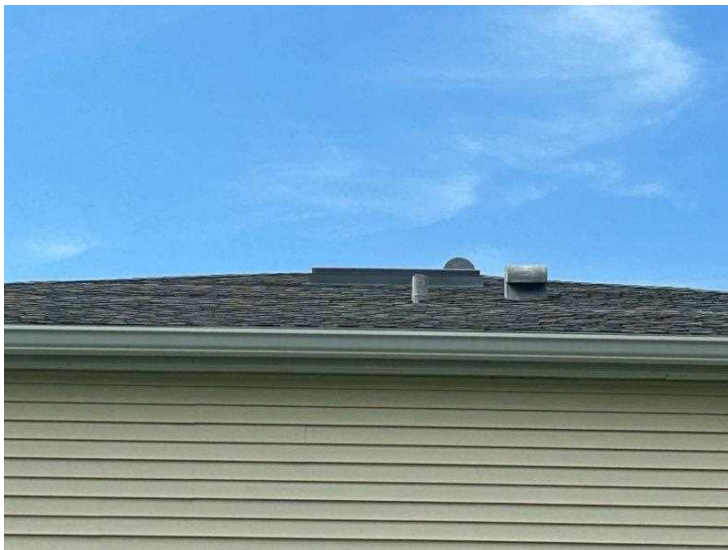
Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 137 Hunter Lake Dr, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1986 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 4/19/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 137 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 *JA* Property Address 137 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 137 Hunter Lake Dr, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer “A”, “B”, or C” or systems that appear to meet Answer “A” or “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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: **9/19/2023**

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 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 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  Property Address 137 Hunter Lake Dr, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

138 Hunter Lake Dr, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 138 Hunter Lake Dr, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900602 and 201900603. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.

Address Verification



Exterior Elevation



Exterior Elevation





Exterior Elevation



Exterior Elevation

Permit Number: 201900602
Full information regarding the selected permit
This permit expired on 11/04/2019
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

Main

| | |
|-------------------------|---|
| Permit No: | 201900602 |
| Description: | REROOF - TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGERPAW & SHINGLE WITH GAF TIMBERLINE |
| Address: | 138 HUNTER LAKE DR. UNIT A,B,C,D 138 Hunter Lake DR UNIT A, Oldsmar, FL 34677-4536 |
| General Contractor: | 130405/WATERTIGHT ROOFING SERVICES, L |
| Receipt Date: | 05/02/2019 |
| Issued Date: | 05/07/2019 |
| Permit Expiration Date: | 11/04/2019 |
| Permit Status: | COMPLT |
| Closed Date: | 05/18/2021 |
| Total Valuation: | 10000.00 |

Roof Permit Information

Permit Number: 201900603

Full information regarding the selected permit

This permit expired on 11/04/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

- Main

Permit No: 201900603

Description: REROOF - TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGERPAW & SHINGLE WITH GAF TIMBERLINE

Address: 138 HUNTER LAKE DR, UNITS E,F,G,H

General Contractor: 138 Hunter Lake DR UNIT E, Oldsmar, FL 34677-4536

130405/WATERTIGHT ROOFING SERVICES, L

Receipt Date: 05/02/2019

Issued Date: 05/07/2019

Permit Expiration Date: 11/04/2019

Permit Status: COMPLT

Closed Date: 05/18/2021

Total Valuation: 10000.00

Roof Permit Information



Roof Construction



Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 138 Hunter Lake Dr, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 5/7/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 138 Hunter Lake Dr, Units A-H, 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:

- 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 1/2" 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

- 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.

D. 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: ; 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.

6. **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 *JA* Property Address 138 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 138 Hunter Lake Dr, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 138 Hunter Lake Dr, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

139 Hunter Lake Dr, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 139 Hunter Lake Dr, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1986 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900478 and 201900479. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Address Verification



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation



Exterior Elevation

Roof Permit Information

Permit Number: 201900478
Full information regarding the selected permit
This permit expired on 10/19/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

▼ Main

Permit No: 201900478
Description: TEAR OFF SHINGLES DOWN TO DECK RE-ROOF
Address: 139 Hunter Lake DR UNIT A, Oldsmar, FL 34677-4575
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 04/15/2019
Issued Date: 04/15/2019
Permit Expiration Date: 10/19/2019
Permit Status: COMPLT
Closed Date: 05/18/2021
Total Valuation: 10000.00

Roof Permit Information

Permit Number: 201900479
Full information regarding the selected permit
This permit expired on 10/19/2019

Show Last Completed Inspection

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
|--------|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|

▼ Main

Permit No: 201900479
Description: TEAR OFF SHINGLES DOWN TO DECK RE-ROOF
Address: 139 Hunter Lake DR UNIT E, Oldsmar, FL 34677-4575
General Contractor: 130405/WATERTIGHT ROOFING SERVICES, L
Receipt Date: 04/15/2019
Issued Date: 04/15/2019
Permit Expiration Date: 10/19/2019
Permit Status: COMPLT
Closed Date: 04/22/2019
Total Valuation: 10000.00

Roof Construction





Roof Construction



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 139 Hunter Lake Dr, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1986 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 4/15/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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 139 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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 139 Hunter Lake Dr, Units A-H, Oldsmar

***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.**

OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials  Property Address 139 Hunter Lake Dr, Units A-H, Oldsmar

*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.

- N. Exterior Opening Protection (unverified shutter systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: 9/19/2023

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 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 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  Property Address 139 Hunter Lake Dr, Units A-H, Oldsmar

*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.



RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION

Windstorm Mitigation Report (OIR-B1-1802)

The Gardens Of Forest Lakes Condominium Association, Inc.

140 Hunter Lake Dr, Units A-H

Oldsmar, Florida 34677

Prepared Exclusively for The Gardens Of Forest Lakes Condominium Association, Inc.

As of 9/19/2023 | FPAT File# MUD2320834

Felten Property Assessment Team

866.568.7853 | www.fpat.com



RECAPITULATION OF MITIGATION FEATURES For 140 Hunter Lake Dr, Units A-H

- 1. Building Code:** **Unknown or does not meet the requirements of Answer A or B**
Comments: The year of construction was verified as 1987 per Pinellas County Property Appraiser.
- 2. Roof Covering:** **FBC Equivalent**
Comments: The roof covering was replaced in 2019. The roof permits were confirmed and the permit numbers are 201900599 and 201900600. This roof was verified as meeting the building code requirements outlined on the mitigation affidavit.
- 3. Roof Deck Attachment:** **Level C**
Comments: Inspection verified 7/16" OSB roof deck attached with 8d nails at a minimum 6" on the edge & 6" in the field.
- 4. Roof to Wall Attachment:** **Clips**
Comments: Inspection verified hurricane clips fastened with a minimum of three nails.
- 5. Roof Geometry:** **Hip Roof**
Comments: Inspection verified a hip roof shape.
- 6. SWR:** **No**
Comments: At the time of inspection, no SWR was verified.
- 7. Opening Protection:** **None or Some Glazed Openings**
Comments: Inspection verified no opening protection.



Exterior Elevation

Permit Number: 201900599
 Full information regarding the selected permit
 This permit expired on 11/04/2019
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|---|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
| <p>- Main</p> <p>Permit No: 201900599 Description: RE-ROOF -TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGER PAW & SHINGLE WITH GAF TIMBETLINE. 140 HUNTER LAKE DR. UNITS A,B,C,D Address: 140 Hunter Lake DR UNIT B, Oldsmar, FL 34677-4576 General Contractor: 130405WATERTIGHT ROOFING SERVICES, L Receipt Date: 05/02/2019 Issued Date: 05/07/2019 Permit Expiration Date: 11/04/2019 Permit Status: COMPLT Closed Date: 05/18/2021 Total Valuation: 10000.00</p> | | | | | | | |

Roof Permit Information

Permit Number: 201900600
 Full information regarding the selected permit
 This permit expired on 11/04/2019
[Show Last Completed Inspection](#)

| Permit | Parcel | Contacts | Valuations | Inspections Requested | Inspections Scheduled | Inspections Completed | Notes |
|---|--------|----------|------------|-----------------------|-----------------------|-----------------------|-------|
| <p>- Main</p> <p>Permit No: 201900600 Description: REROOF - TEAR OFF SHINGLES DOWN TO DECK. DRY IN WITH GAF TIGERPAW & SHINGLE WITH GAF TIMBERLINE. 140 HUNTER LAKE DR. UNIT E,F,G,H Address: 140 Hunter Lake DR UNIT E, Oldsmar, FL 34677-4576 General Contractor: 130405WATERTIGHT ROOFING SERVICES, L Receipt Date: 05/02/2019 Issued Date: 05/07/2019 Permit Expiration Date: 11/04/2019 Permit Status: COMPLT Closed Date: 05/18/2021 Total Valuation: 10000.00</p> | | | | | | | |

Roof Permit Information



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

| | | |
|---|-----------------|----------------------------------|
| Inspection Date: 9/19/2023 | | |
| Owner Information | | |
| Owner Name: The Gardens Of Forest Lakes Condominium Association, Inc. | | Contact Person: David Fedash |
| Address: 140 Hunter Lake Dr, Units A-H | | Home Phone: |
| City: Oldsmar | Zip: 34677 | Work Phone: (727) 726-8000 |
| County: Pinellas | | Cell Phone: |
| Insurance Company: | | Policy #: |
| Year of Home: 1987 | # of Stories: 2 | Email: Dfedash@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 through 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"
- 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 |
|---|-------------------------|-------------------------------|--|--|
| <input checked="" type="checkbox"/> 1. Asphalt/Fiberglass Shingle | 5/7/2019 | _____ | 2019 | <input type="checkbox"/> |
| <input type="checkbox"/> 2. Concrete/Clay Tile | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 3. Metal | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 4. Built Up | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 5. Membrane | _____ | _____ | _____ | <input type="checkbox"/> |
| <input type="checkbox"/> 6. Other | _____ | _____ | _____ | <input type="checkbox"/> |

- 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".

- 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

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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:

- 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 1/2" 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
 - 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.

- D. 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: ; 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.

6. **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.

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 690-170.0155

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 | | X |
| A | Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights) | | | | | | |
| B | Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights) | | | | | | |
| C | 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 | | | | | | |
| | Other protective coverings that cannot be identified as A, B, or C | | | | | | |
| X | 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
 - 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.)
- 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 the table above
- 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 systems with no documentation)** All Glazed openings are protected with protective coverings not meeting the requirements of Answer "A", "B", or "C" or systems that appear to meet Answer "A" or "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 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 in the table above
 - N.3 One or More Non-Glazed openings is classified as Level X in the table above
- 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. <i>Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.</i> | | |
| 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 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, John Felten am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (**Scott Ackerman**) perform the inspection and I agree to be responsible for his/her work.

Qualified Inspector Signature:  Date: **9/19/2023**

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 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 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.

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