EDGEWATER CONDOMINIUMS OF BROWARD EWC - BUILDING 2 8977WILES ROAD CORAL SPRINGS, FLORIDA



FLORIDA TECHNICAL, INC.

114 WEST DAVIS BLVD

TAMPA, FLORIDA 33606

813-765-0264 * 813-699-8323 (FAX)

THOMAS.FLTECH@GMAIL.COM

Uniform Mitigation Verification Inspection Form

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

Inspection Date: Aug 25, 2022						
Owner Information						
Owner Name: EDGEWATER CONDOMIN	Contact Person: E. HE	Contact Person: E. HERRON				
Address: 8977 WILES ROAD			Home Phone:			
City: CORAL SPRINGS	Zip: 33067		Work Phone: 954-344	-3601		
County: BROWARD			Cell Phone:			
Insurance Company:			Policy #:			
Year of Home: 1986	# of Stories: 3		Email:			
NOTE: Any documentation used in valida accompany this form. At least one photog though 7. The insurer may ask additional	raph must accompa- questions regarding	ny this form to valid the mitigated featu	late each attribute marked re(s) verified on this form.	in questions 3		
 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 (MMDD/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.	Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
			•			
1. Asphalt/Fiberglass Shingle	 1/12	FL7804-R7	2013			
2. Concrete/Clay Tile 03/2	<u>ı, ı3</u>	1 L/ UU4-N/				
3. Metal/	/			\sqcup		
4. Built Up	/					
5. Membrane						
6. Other/						
 A. All roof coverings listed above meet the FBC with a FBC or Miami-Dade Product Approval listing current at time of installation OR have a roofing permit application date on or after 3/1/02 OR the roof is original and built in 2004 or later. B. All roof coverings have a 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? 						
			uss/rafter (snaced a maximus	m of 24" inches o c		
A. Plywood/Oriented strand board (OSB) roof sheathing attached to the roof truss/rafter (spaced a maximum of 24" inches o.c.) by staples or 6d nails spaced at 6" along the edge and 12" in the fieldOR- Batten decking supporting wood shakes or wood shinglesOR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that has an equivalent mean uplift less than that required for Options B or C below. B. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a maximum of 24"inches o.c.) by 8d common nails spaced a maximum of 12" inches in the fieldOR- Any system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent or greater resistance than 8d nails spaced a maximum of 12 inches in the field or has a mean uplift resistance of at least 103 psf.						
C. Plywood/OSB roof sheathing with a minimum thickness of 7/16"inch attached to the roof truss/rafter (spaced a mazed"inches o.c.) by 8d common nails spaced a maximum of 6" inches in the fieldOR- Dimensional lumber/Tongue & 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 Inspectors Initials TEC Property Address_8977 WILES ROAD CORAL SPRINGS						

*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.

Ir	spec	tors I	nitials _	Property Address 8977 WILES ROAD	CORAL	SPRINGS	33067
		<u>B.</u> N <u>C.</u> U	lwelling f No SWR. Jnknown	from water intrusion in the event of roof covering loss. or undetermined.		rosso mo	
6.	Sec X	<u>A.</u> S	SWR (also	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify o called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing undor foam adhesive SWR barrier (not foamed-on insulation) applied as a supplementary of the second self-adhering polymer modified as a supplementary of the second sel	lerlaymen	nt applied directl	y to the
	X	C. C	ther Root	less than 2:12. Roof area with slope less than 2:12 sq ft; Total roof Any roof that does not qualify as either (A) or (B) above.	л area	sq ft	
		<u>B.</u> F	Flat Roof	Total length of non-hip features: feet; Total roof system perimeter: Roof on a building with 5 or more units where at least 90% of the main roof less than 2:12. Roof area with slope less than 2:12.	f area has	a roof slope of	
		<u>A.</u> I	Hip Roof	Hip roof with no other roof shapes greater than 10% of the total roof system			
5.				What is the roof shape? (Do not consider roofs of porches or carports that are atta over unenclosed space in the determination of roof perimeter or roof area for roof			
		Н. 1	No attic ac	ecess			
				or unidentified			
			Structural Other:	Anchor bolts structurally connected or reinforced concrete roof.			
	_			Metal connectors consisting of a single strap that wraps over the top of the truss, both sides, and is secured to the top plate with a minimum of three nails on each		secured to the w	all on
				Metal Connectors consisting of 2 separate straps that are attached to the wall fra beam, on either side of the truss/rafter where each strap wraps over the top of the a minimum of 2 nails on the front side, and a minimum of 1 nail on the opposing	e truss/raf	fter and is secure	
		D. I	Double W	minimum of 2 nails on the front side and a minimum of 1 nail on the opposing s raps	ide.		
		C. S	ingle Wra	Metal connectors consisting of a single strap that wraps over the top of the t		er and is secured	d with a
	∇	G 0		Metal connectors with a minimum of 1 strap that wraps over the top of the truss/position requirements of C or D, but is secured with a minimum of 3 nails.	ratter and	d does not meet	tne naii
				Metal connectors that do not wrap over the top of the truss/rafter, or	/mo 64 a.m. a.m.	d door not most	4la a a al 1
		<u>B.</u> (Clips				
			\boxtimes	Attached to the wall top plate of the wall framing, or embedded in the bond bear the blocking or truss/rafter and blocked no more than 1.5" of the truss/rafter, an corrosion.			from
	1711	11111141		Secured to truss/rafter with a minimum of three (3) nails, and			
	Mi	nimal	conditio	Metal connectors that do not meet the minimal conditions or requirements of B, ns to qualify for categories B, C, or D. All visible metal connectors are:	C, or D		
				the top plate of the wall, or		arter und uttuen	ca to
	Ш	<u>A.</u> 1	Foe Nails	Truss/rafter anchored to top plate of wall using nails driven at an angle through	the truss/i	rafter and attach	ed to
4.		eet of	the inside	achment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attace or outside corner of the roof in determination of WEAKEST type)	hment of	f hip/valley jacks	s within
		G. N	No attic ac	ccess.			
				or unidentified.			
	H			d Concrete Roof Deck.			
		182	psf.	stance than 8d common nails spaced a maximum of 6 inches in the field or has a	ı mean up	olift resistance o	f at least

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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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. Non-Glazed **Opening Protection Level Chart Glazed Openings Openings** Place an "X" in each row to identify all forms of protection in use for each Windows opening type. Check only one answer below (A thru X), based on the weakest Garage Glass Entry Garage or Entry Skylights form of protection (lowest row) for any of the Glazed openings and indicate **Doors Block** Doors **Doors** Doors the weakest form of protection (lowest row) for Non-Glazed openings. Not Applicable-- there are no openings of this type on the structure X Α Verified cyclic pressure & large missile (9--Ib for windows doors/4.5 lb for skylights) В 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 Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E D 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance Opening Protection products that appear to be A or B but are not verified Ν Other protective coverings that cannot be identified as A, B, or C Х No Windborne Debris Protection A. Exterior Openings Cyclic Pressure and 9-lb Large Missile (4.5 lb for skylights only) All Glazed openings are protected at a minimum, with impact resistant coverings or products listed as wind borne debris protection devices in the product approval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for "Cyclic Pressure and Large Missile Impact" (Level A in the table above). Miami-Dade County PA 201, 202, and 203 Florida Building Code Testing Application Standard (TAS) 201, 202, and 203 American Society for Testing and Materials (ASTM) E 1886 and ASTM E 1996 Southern Standards Technical Document (SSTD) 12 For Skylights Only: ASTM E 1886 and ASTM E 1996 For Garage Doors Only: ANSI/DASMA 115 A.1 All Non-Glazed openings classified as A in the table above, or no Non-Glazed openings exist A.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, or X in the table above A.3 One or More Non-Glazed Openings is classified as Level B, C, N, or X in the table above 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 TEC Property Address_8977 WILES ROAD

CORAL SPRINGS

33067

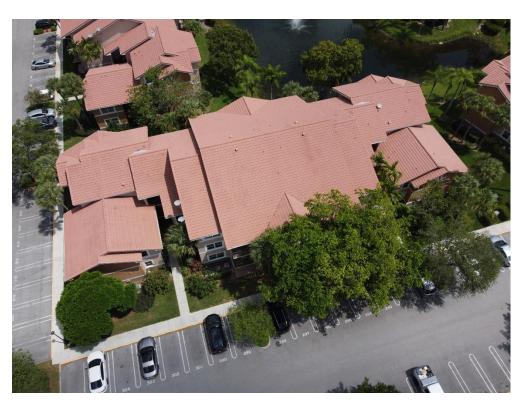
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	<u>ystems with no documentation)</u> A	All Glazed openings are protected with
protective coverings not meeting the requirements of Ar with no documentation of compliance (Level N in the ta		nat appear to meet Answer "A" or "B"
N.1 All Non-Glazed openings classified as Level A, B, C, or		d openings exist
N.2 One or More Non-Glazed openings classified as Level I table above		
N.3 One or More Non-Glazed openings is classified as Leve	l X in the table above	
X. None or Some Glazed Openings One or more Glaze	d openings classified and Level X i	n the table above.
MITIGATION INSPECTIONS MUST B	RE CERTIFIED BY A QUALIFIED	INSPECTOR.
Section 627.711(2), Florida Statutes, prov		
Qualified Inspector Name: THOMAS E. CHEEVER	License Type: PROFFESIONAL ENGINEER	License or Certificate #: P.E. 36054
Inspection Company: FLORIDA TECHNICAL, INC.	Phone: 813-76	65-0264
Qualified Inspector – I hold an active license as a	: (check one)	
Home inspector licensed under Section 468.8314, Florida Statute training approved by the Construction Industry Licensing Board a		ber of hours of hurricane mitigation
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 Sta	ntutes.	
Professional architect licensed under Section 481.213, Florida Sta	ntutes.	
Any other individual or entity recognized by the insurer as possess verification form pursuant to Section 627.711(2), Florida Statutes	• • • •	perly complete a uniform mitigation
Individuals other than licensed contractors licensed under Sunder Section 471.015, Florida Statues, must inspect the str		
Licensees under s.471.015 or s.489.111 may authorize a dire		
experience to conduct a mitigation verification inspection.		(1) This Item Has Reen Electronically Signed
I, THOMAS E. CHEEVER am a qualified inspector a	nd I personally performed the ins	The Signature Must Be Verified On Any Electronic Copies.
contractors and professional engineers only) I had my emplo	yee () po	erform
	(print name of inspe	
	\1	140.30034
and I agree to be responsible for his/her work.		
and I agree to be responsible for his/her work. Qualified Inspector Signature:	Date:	
-	Date:	* * * 0 13:09:45
Qualified Inspector Signature: An individual or entity who knowingly or through gross negulation by the Florida Division of Insurance	Date: gligence provides a false or fraud e Fraud and may be subject to ad	-04'00' ulent mitigation verification form is ministrative action by the
Qualified Inspector Signature: An individual or entity who knowingly or through gross negulation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (See	Date:Date:Date:Date:Date:Date:Date:Date:Date:	-04'00' ulent mitigation verification form is ministrative action by the tutes) The Qualified Inspector who
Qualified Inspector Signature: An individual or entity who knowingly or through gross nesubject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Secertifies this form shall be directly liable for the misconduction)	Date:Date:Date:Date:Date:Date:Date:Date:Date:	-04'00' ulent mitigation verification form is ministrative action by the tutes) The Qualified Inspector who
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An individual or entity who knowingly or through gross nessubject to investigation by the Florida Division of Insurance appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduct performed the inspection. Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification	Date: gligence provides a false or fraud e Fraud and may be subject to ad ection 627.711(4)-(7), Florida Stat t of employees as if the authorized I Inspector or his or her employee of h was provided to me or my Author	on 13:09:45 -04'00' ulent mitigation verification form is ministrative action by the tutes) The Qualified Inspector who mitigation inspector personally did perform an inspection of the ized Representative.
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inaccuracies found on the form.

BUILDING 2 – ROOF PHOTOS







TEAR OFF OLD ROOF - 2013



NEW TILE SET - 2013



STRAP PHOTO - 2013



DURING TEAR OFF - 2013



TU POLY-STICK INSTALLATION - 2013



SWR INSTRALLATION - 2013



SHEATHING NAILS - 2013



NAIL SPACING - 2013



TILE LOADED FOR INSTALL - 2013