



CONSTRUCTION

Uniform Mitigation Verification Inspection

Donald C Nielsen

State Certified General Contractor CGC049839

120 Bardmoor Cir

Daytona Beach, Florida 32114

386-214-8348



Beacon Point Condo

4590 S Atlantic Ave

Ponce Inlet, Florida 32127

Clubhouse Building

Uniform Mitigation Verification Inspection Form

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

Inspection Date: May 4, 2018		
Owner Information		
Owner Name: Beacon Point Condo Clubhouse Building		Contact Person: Judy Rooney
Address: 4590 S Atlantic Ave		Home Phone:
City: Ponce Inlet	Zip: 32127	Work Phone: 724-355-7696
County: Volusia	FL	Cell Phone:
Insurance Company:		Policy #:
Year of Home: 1974	# of Stories: 3	Email:

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 type="checkbox"/> 1. Asphalt/Fiberglass Shingle	____/____/____	_____ Permit Number	_____ 2018	<input type="checkbox"/>
<input type="checkbox"/> 2. Concrete/Clay Tile	____/____/____	BLBC000031-	2018	<input type="checkbox"/>
<input checked="" type="checkbox"/> 3. Metal	01-15-18	2018	2018	<input type="checkbox"/>
<input type="checkbox"/> 4. Built Up	____/____/____	_____ 2018	_____ 2018	<input type="checkbox"/>
<input type="checkbox"/> 5. Membrane	____/____/____	_____ 2018	_____ 2018	<input type="checkbox"/>
<input type="checkbox"/> 6. Other _____	____/____/____	_____ 2018	_____ 2018	<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-

Inspectors Initials DCN Property Address 4590 S Atlantic Ave Ponce Inlet FL 32127

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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 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: _____ feet; Total roof system perimeter: _____ feet
- 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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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	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
A	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
N	Opening Protection products that appear to be A or B but are not verified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other protective coverings that cannot be identified as A, B, or C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
X	No Windborne Debris Protection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- 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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Front Elevation



Right Side Elevation



Rear Elevation



Left Side Elevation



Roof Deck Attachment 8d



Roof Deck Nail Spacing 6"



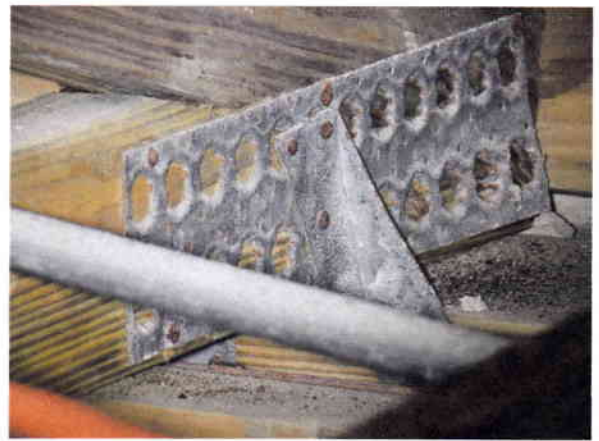
clips 3 nails



clips with 3 nails



Clips with 3 nails



clips with 3 nails















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6

6

5



6

5

6

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Town of Ponce Inlet
4300 S. Atlantic Avenue
Ponce Inlet, FL 32127

Permit

Permit NO. BLDC-000030-2018
Permit Type: Building (Non-Residential)
Work Classification: Roof
Permit Status: Issued

Issue Date: 01/15/2018

Expiration: 07/14/2018

Location Address

4590 S ATLANTIC AV, PONCE INLET, FL 32127

Parcel Number

1916340800001

Contacts

Beacon Point Condo Assoc.
4590 S Atlantic AVE, Ponce Inlet, FL 32127

Owner

Roofing & Reconstruction Contractors of
America (RRCA)
434 N Halifax AVE, Daytona Beach, FL 32118
(386) 366-8277

Contractor

mwillen0703@gmail.com

Description: Re-roof metal FL11651.2 on south building
Due to hurricane

Valuation: \$220,280.00

Total Sq Feet: 0.00

Inspection Requests:

REQUEST MUST BE IN BY 8AM OF THE DAY
REQUESTED 366-216-2168

FEES	AMOUNT
Total:	

Payments	AMT PAID
Total Fees	
Amount Due:	

Required Inspections:

Inspection Type

Final Roof

Roof Deck/Trailing

Roof Dry-in/Flashing

Conditions

- Affidavits will only be accepted if we are provided with photos of the home from the street and time date stamped of the roofing that did not get inspected by the town. PRIOR approval from the Building Official is REQUIRED.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.



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mwillen0703@gmail.com

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Due to hurricane

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Total Sq Feet: 0.00

Inspection Requests:

REQUEST MUST BE IN BY BAM OF THE DAY
REQUESTED 386-236-2168

FEES	Amount
Total:	

Payments	Am't Paid
Total Fees	
Amount Due:	

Required Inspections:
Inspection Type
Final Roof
Roof Deck/Nailing
Roof Dry-in/Flashing

Conditions

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Continued... 1/15/2018



COLD SHOWER

NO SMOKING
No Smoking Allowed in Building
Smoking is restricted to designated areas. No smoking in the building or on the grounds.
No open flames, candles, incense, or other fire-producing devices are allowed.
If you see a fire, call 911 immediately.



NO SMOKING



NO POSTING
NO LOITERING
NO VANDALISM
NO DRUGS
NO ALCOHOL
NO WEAPONS
NO FIREARMS
NO GAMING
NO BICYCLES
NO MOTORCYCLES
NO SKATEBOARDS
NO SCOOTERS
NO STROLLER
NO WHEELCHAIR
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