#### **Subject Property**



1842-1822 Morning Sun Lane Naples, FL 33908

#### **Client Information**

# Client Name Club Homes 1 at Heritage Greens

#### **Inspection Details**

Inspection Date: 04/23/2019

Inspection Time: 8:00 AM

#### **Inspection Conducted By**



#### **Kross Inspectors**

12155 Metro Parkway, Unit 4 Fort Myers, FL, 33966

Phone: (239) 677-4403 (877) 496-4662

Fax: (239) 214-2684

E'Mail: Office@krossinspectors.com Web: www.krossinspectors.com Inspected by:

Timothy Friis

Inspector's Signature:

Signature Date

4/23/2019

State Certified Home Inspector

Lim Fries

HI9125

<u>Uniform Mitigation Verification Inspection Form</u>

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

Inspection Date: 04/23/2019	9 Report Number 21	91		
Owner Information				
Owner Name: Club Homes 1	at Heritage Greens	Contact Person: Club Homes 1 at Heritage Greens		
Address: 1842-1822 Morning	Sun Lane	Home Phone:		
City: Naples	Zip: 33908	Work Phone:		
County:		Cell Phone:		
Insurance Company:		Policy #:		
Year of Home: 2001	# of Stories: Single Floor	Email: robr@guardianpropertymanagement.net		

iccompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.						
I. <u>Building Code:</u> 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 complia permit application with a date after 9.				provide a		
C. Unknown or does not meet the requ	uirements 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 //ear of Original Installation/Replacement OR indicate that no information was available to verify compliance for each roof covering dentified.						
2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance		
1. Asphalt/Fiberglass Shingle	01/ 23/ 2019		<u>2019</u>			
2. Concrete/Clay Tile	<u>11</u>					
3. Metal	<u>11</u>					
4. Built Up	<u>11</u>					
5. Membrane	<u>11</u>					
6. Other	<u>11</u>					
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-Da permit application after 9/1/1994 and				nly) a roofing		
C. One or more roof coverings do not meet the requirements of Answer "A" or "B".						
D. No roof coverings meet the require	ments of Answer "A" or "B".					
3. Roof Deck Attachment: What is the weake	st form of roof deck attachn	nent				
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 maximum of 24"inches o.c.) by 8d common nails spaced a maximum of 6" inches in the fieldOR- 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)ORAny system of screws, nails, adhesives, other deck fastening system or truss/rafter spacing that is shown to have an equivalent.						
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Inspectors Initials Property Address 1842-1822 Morning Sun Lane, Naples, FL, 33908
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or greater resistance than 80 182 psf.	common halls spaced a maximum of 6 inches in the field or has a mean uplift resistance of at leas
D. Reinforced Concrete Roo	f Deck
E. Other:	
F. Unknown or unidentified.	
G. No attic access.	
O. No attic access.	
	the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within 5 feet roof in determination of WEAKEST type)
A. Toe Nails	
top plate of the v	ored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the wall, or
Metal connector	rs that do not meet the minimal conditions or requirements of B, C, or D
Minimal conditions to quali	fy for categories B, C, or D. All visible metal connectors are:
	rafter with a minimum of three (3) nails, and
Attached to the blocking or truss/	wall top plate of the wall framing, or embedded in the bond beam, with less than a $\frac{1}{2}$ " gap from the rafter and blocked no more than 1.5" of the truss/rafter, and free of visible severe corrosion.
B. Clips	
Metal connector	s that do not wrap over the top of the truss/rafter, <b>or</b>
position requiren	s with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail nents of C or D, but is secured with a minimum of 3 nails.
	onsisting of a single strap that wraps over the top of the truss/rafter and is secured with a minimum of side and a minimum of 1 nail on the opposing side.
D. Double Wraps	
beam, on either	rs consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a ails on the front side, and a minimum of 1 nail on the opposing side, or
	s consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on both ured to the top plate with a minimum of three nails on each side.
E. Structural Anchor bolt	s structurally connected or reinforced concrete roof.
F. Other:	
G. Unknown or Unidentified	
H. No attic access	
5. Roof Geometry: What is the roof soost structure over unenclosed space	hape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of the e in the determination of roof perimeter or roof area for roof geometry classification).
A. Hip Roof Hip roof with	h 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 bui	lding with 5 or more units where at least 90% of the main roof area has a roof slope of
	2. Roof area with slope less than 2:12 sq ft; Total roof area sq ft
C. Other Roof Any roof that	t does not qualify as either (A) or (B) above.
A. SWR (also called Sealed	VR): (standard underlayments or hot mopped felts are not SWR)  Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling vent of roof covering loss.
B. No SWR	
C. Unknown or undetermined	ı.
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nspectors Initials Property A	ddress 1842-1822 Morning Sun Lane, Naples, FL, 33908

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7. <u>Opening Protection:</u> What is the <u>weakest</u> 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	
N/A	Not Applicable- there are no openings of this type on the structure						
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTME 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						
LIN	Other protective coverings that cannot be identified as A, B, or C						
X No Wind borne 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):
<ul> <li>ASTM E 1886 and ASTM E 1996 (Large Missile – 4.5 lb.)</li> <li>SSTD 12 (Large Missile – 4 lb. to 8 lb.)</li> <li>For Skylights Only: ASTM E 1886 and ASTM E 1996 (Large Missile - 2 to 4.5 lb.)</li> </ul>
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.
<u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> 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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protective coverings not meeting		vith no documentation) All Glazed openings are protected with A", "B", or C" or systems that appear to meet Answer "A" or "B" with .		
N.1 All Non-Glazed openi	ngs classified as Level A, B, C, o	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-Gla	zed openings is classified as Le	vel X in the table above.		
X. None or Some Glazed Oper	nings One or more Glazed openi	ngs classified and Level X in the table above.		
		ERTIFIED BY A QUALIFIED INSPECTOR. listing of individuals who may sign this form.		
Qualified Inspector Name: Timothy Friis	License Type: State Certified Home Ins	<u>License or Certificate #:</u> HI9125		
Inspection Company: Kross Inspectors		Phone: (239) 677-4403		
Hurricane mitigation inspector cer Building code inspector certified u General, building or residential co Professional architect licensed und Professional engineer licensed und	tified by the My Safe Florida Hounder Section 468.607, Florida suntractor licensed under Section der Section 481.213, Florida Stader Section 471.015, Florida Stader Section 471.015, Florida Staded by the insurer as possessing to	Statutes. 489.111, Florida Statutes. atutes.		
		489.111, Florida Statutes, or professional engineer licensed		
Licensees under s.471.015 or s.489. experience to conduct a mitigation vol. I, Timothy Friis am a qualified inspect contractors and professional engineers and I agree to be responsible for his/ Qualified Inspector Signature An individual or entity who knowingly subject to investigation by the Floridalicensing agency or to criminal prose	and 11 may authorize a direct emperification inspection.  tor and I personally performed is only) I had my employee (	personally and not through employees or other persons. loyee who possesses the requisite skill, knowledge, and the inspection or (licensed) perform the inspection  Date: 04/23/2019 provides a false or fraudulent mitigation verification form is and may be subject to administrative action by the appropriate Florida Statutes) The Qualified Inspector who certifies this form thorized mitigation inspector personally performed the		
Homeowner to complete:   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 o				
Signature:		Date: 04/23/2019		
	remium to which the individual	dulent mitigation verification form with the intent to obtain or or entity is not entitled commits a misdemeanor of the first		
Inspectors Initials Property Add	ress 1842-1822 Morning Sun L	ot be used to certify any product or construction feature as offering  ane, Naples, FL, 33908		

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## **Photo Report**

#### 1.



<u>Location:</u> Exterior <u>System:</u> Wind Mitigation <u>Condition:</u> Front <u>Explanation:</u> Photo of Front showing Glazed and Non Glazed openings <u>Impact Consequences:</u> Style of roof should be evident if accessibility allows

Recommended Action: Predominant Roof Covering should be viewable if access allows

Click here to find out more about this item

#### 2.



<u>Location:</u> Exterior <u>System:</u> Wind Mitigation <u>Condition:</u> Right <u>Explanation:</u> Photo of right Side showing Glazed and Non Glazed openings <u>Impact Consequences:</u> Style of roof should be evident if accessibility allows <u>Procumented Action:</u> Predominant Prof Covering should be viewable if access

Recommended Action: Predominant Roof Covering should be viewable if access allows

Click here to find out more about this item

#### 3.



<u>Location:</u> Exterior <u>System:</u> Wind Mitigation <u>Condition:</u> Left <u>Explanation:</u> Photo of left Side showing Glazed and Non Glazed openings <u>Impact Consequences:</u> Style of roof should be evident if accessibility allows <u>Recommended Action:</u> Predominant Roof Covering should be viewable if access allows

Click here to find out more about this item

4.



<u>Location:</u> Exterior <u>System:</u> Wind Mitigation <u>Condition:</u> Back <u>Explanation:</u> Photo of back showing Glazed and Non Glazed openings <u>Impact Consequences:</u> Style of roof should be evident if accessibility allows <u>Recommended Action:</u> Predominant Roof Covering should be viewable if access allows

Click here to find out more about this item

#### 5.



Location: Attic System: Wind Mitigation Condition: Photo Of Plywood Thickness

Explanation: Field Measument Impact Consequences: NA Recommended Action: NA

Click here to find out more about this item

### 6.







<u>Location:</u> Attic <u>System:</u> Wind Mitigation <u>Condition:</u> Photo showing detail of a Field Nailing <u>Fyplanation:</u> Field Nailing Detail Photo

<u>Explanation:</u> Field Nailing Detail Photo <u>Impact Consequences:</u> No Comment <u>Recommended Action:</u> No Comment

Click here to find out more about this item

#### **7**.







<u>Location:</u> Attic <u>System:</u> Wind Mitigation <u>Condition:</u> Photo showing detail of a Single Wrap Detail <u>Explanation:</u> Single Wraps Metal Straps must be secured to every rafter and or truss with a minimum of 3 nails wrapping over and securing to the opposite side of the rafter and or truss with a minimum of 1 nail. The Strap must be attached to the top

plate of the wall frame or embedded in the bond beam in at least one place.

Impact Consequences: No Comment Recommended Action: No Comment

Click here to find out more about this item

#### 8.



<u>Location:</u> Throughout <u>System:</u> Wind Mitigation <u>Condition:</u> Permit information <u>Explanation:</u> Documentation photo of roof covering.

Impact Consequences: Documentation photo supporting findings in section two, three and six of the Wind Mitigation Form. Original or copied documents retained within the inspector work file with verification information regarding roof cover, field nailing or SWR upgrades.

Recommended Action: Review

Click here to find out more about this item

Dear Club Homes 1 at Heritage Greens

Thank you for allowing Kross Inspectors the opportunity to provide you with your Uniform Wind Mitigation Verification Inspection Needs.

The user of this inspection report should note that the Florida Office of Insurance Regulation requires the information recorded within this report to reflect the ownership details and property condition effective as of the inspection date.

This inspection may have been requested for benefit of a party other than the current property owner as part of a pre purchase inspection. The Inspector has completed this assignment using a hypothetical scenario that the owner of the property is the Client listed below. The scenario further includes an extraordinary assumption that the Owner address will be the same as the subject property address. This hypothecial scenario is incorporated within in order assist insurers with issuing new coverage for the subject property naming our client as the insured and the new owner as of the new policy effective date. Our Client:

Club Homes 1 at Heritage Greens 1818-1798 Moming Sun Lane Naples 33908

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Thank you for choosing Kross Inspectors for you inspection needs

Sincerely

Timothy Friis Kross Inspectors

#### **Professional Services Certification and Disclosure**

I have personally made an inspection of the property that is the subject of this Report.

I do not have any undisclosed conflict of interest with the client, nor any undisclosed commissions, rebates, profits or other benefits resulting from the completion of this assignment.

I have not accepted any disclosed or undisclosed commissions, rebates, profits, or other benefit from Real Estate Brokers, Agents, or any other parties having financial interest in the subject property.

Kross Inspectors, and the designated inspector for this assignment, have not been offered or provided any disclosed or undisclosed financial compensation directly or indirectly to any Real Estate Broker, Agent, or Real Estate Company for inclusion on lists of preferred and/or affiliated inspectors or inspection companies.

I have not and shall not communicate any information about this inspection to anyone except the named client without prior consent of the client, except where it may affect the safety of others or violate a law or statute.

I have not offered to perform any repairs to the subject property nor shall I accept or induce a referral fee from any contractor of which I refer a client to for repairs.



**Kross Inspectors** 

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E'Mail: Office@krossinspectors.com Web: www.krossinspectors.com Inspected by:

Timothy Friis

Inspector's Signature:

Lim Fries

Signature Date

4/23/2019

State Certified Home Inspector

HI9125