





## Marakas Home Inspections

1025 Anclote Dr, Tarpon Springs Fl 34689 Johnminspections@gmail.com 727 433 2304



## **Uniform Mitigation Verification Inspection Form**

	or uns form and al	ny documentation provid	ica with the moutanc				
Inspection Date: 05/08/2025							
Owner Information							
Owner Name: Marylyn Pines, Build	ding D		Contact Person:				
Address: 2060 Marilyn St	T		Home Phone:				
City: Clearwater	Zip: 33765		Work Phone:				
County: Pinellas Cell Phone:							
Insurance Company:			Policy #:				
Year of Home: 1972	# of Stories:	Two	Email:				
NOTE: Any documentation used in accompany this form. At least one p though 7. The insurer may ask add	photograph must acco	ompany this form to validat	e each attribute marked	l in questions 3			
1. <b><u>Building Code</u></b> : Was the structure the HVHZ (Miami-Dade or Brown				for homes located in			
☐ A. Built in compliance with the date after 3/1/2002: Building I	<del>-</del>		2002/2003 provide a peri	mit application with a			
<ul> <li>□ B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1 provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)</li> <li>☑ C. Unknown or does not meet the requirements of Answer "A" or "B"</li> </ul>							
2. Roof Covering: Select all roof co OR Year of Original Installation/R	vering types in use. Pro	ovide the permit application d					
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			
1. Asphalt/Fiberglass Shingle	3/15/23	2023-030502	2023				
2. Concrete/Clay Tile							
				_			
3. Metal	<del></del>						
4. Built Up				Ц			
5. Membrane	9/12/24	BCP24-090348	2024				
6. Other							
<ul> <li>☑ A. All roof coverings listed ab installation OR have a roofing</li> <li>☐ B. All roof coverings have a N roofing permit application after</li> <li>☐ C. One or more roof coverings</li> <li>☐ D. No roof coverings meet the</li> </ul>	permit application dat Miami-Dade Product Aper 9/1/1994 and before s do not meet the require	e on or after 3/1/02 OR the repproval listing current at time 3/1/2002 OR the roof is originarements of Answer "A" or "B"	oof is original and built in e of installation OR (for the nal and built in 1997 or le	a 2004 or later. ne HVHZ only) a			
3. <b>Roof Deck Attachment</b> : What is to	the <u>weakest</u> form of ro	of deck attachment?					
<ul> <li>3. Roof Deck Attachment: What is the weakest form of roof deck attachment?</li> <li>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.</li> <li>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.</li> <li>C. Plywood/OSB roof sheathing with a minimum thickness of 7/16" attached to the roof truss/rafter (spaced a maximum of 2 inches o.c.) by 8d common nails spaced a maximum of 6" inches in the fieldOR- Dimensional lumber/Tongue &amp; 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</li> </ul>							
Inspectors Initials <u>IEM</u> Property A	ddress 2060 Marilyn	St	Clearwater	33765			

Inspector: Ioannis Marakas, HI11673

<sup>\*</sup>This verification form is valid for up to five (5) years provided no material changes have been made to the structure. OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

		or greater resist 182 psf.	ance than 8d common nails spaced a maximum of 6 inc	nes in the field or has a mean uplift resi	stance of at least
		•	Concrete Roof Deck.		
		E. Other:			
		F. Unknown or			
		G. No attic acc	ess.		
4.	5 f	eet of the inside of	chment: What is the <u>WEAKEST</u> roof to wall connected or outside corner of the roof in determination of WEAKE		alley jacks within
	V		Fruss/rafter anchored to top plate of wall using nails driv op plate of the wall, or	en at an angle through the truss/rafter a	and attached to the
			Metal connectors that do not meet the minimal condition	s or requirements of B, C, or D	
	Mi	nimal conditions	s to qualify for categories B, C, or D. All visible meta	l connectors are:	
			Secured to truss/rafter with a minimum of three (3) nails.		
		ti	Attached to the wall top plate of the wall framing, or embed blocking or truss/rafter <b>and</b> blocked no more than 1. corrosion.		
		B. Clips			
			Metal connectors that do not wrap over the top of the tru		
		p	Metal connectors with a minimum of 1 strap that wraps of cosition requirements of C or D, but is secured with a minimum of 1.	1	not meet the nail
			os Metal connectors consisting of a single strap that wraps ninimum of 2 nails on the front side and a minimum of 2	-	ecured with a
		D. Double Wra	aps		
		b a D b	Metal Connectors consisting of 2 separate straps that are beam, on either side of the truss/rafter where each strap variation minimum of 2 nails on the front side, and a minimum of Metal connectors consisting of a single strap that wraps to both sides, and is secured to the top plate with a minimum nechor bolts structurally connected or reinforced concret	wraps over the top of the truss/rafter and of 1 nail on the opposing side, <b>or</b> over the top of the truss/rafter, is secure m of three nails on each side.	d is secured with
		F. Other:			
		G. Unknown o			
		H. No attic acc	ess		
5.			That is the roof shape? (Do not consider roofs of porches wer unenclosed space in the determination of roof perime		
		A. Hip Roof	Hip roof with no other roof shapes greater than 10%		
		B. Flat Roof	Total length of non-hip features: feet; Total Roof on a building with 5 or more units where at lea	ast 90% of the main roof area has a roof	
	V	C. Other Roof	less than 2:12. Roof area with slope less than 2:12 _ Any roof that does not qualify as either (A) or (B) all		sq ft
6.	Sec	A. SWR (also of sheathing or foa	Resistance (SWR): (standard underlayments or hot-more called Sealed Roof Deck) Self-adhering polymer modificant adhesive SWR barrier (not foamed-on insulation) apparent intrusion in the event of roof covering loss.	ed-bitumen roofing underlayment appli	
		C. Unknown or	r undetermined.		
Ins	pect	tors Initials IEM	Property Address 2060 Marilyn St	Clearwater	33765

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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		Glazed Openings				Non-Glazed Openings	
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.			Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable - there are no openings of this type on the structure		<b>/</b>	<b>/</b>	1		<b>/</b>
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
14	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	<b>V</b>				~	

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
- 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

C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

Inspectors Initials IEM Property Address 2060 Marilyn St

• For Garage Doors Only: ANSI/DASMA 115

the table above

☐ 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, o 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 <u>and</u> 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

Inspector: Ioannis Marakas, HI11673

33765

Clearwater

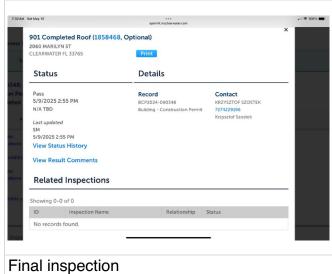
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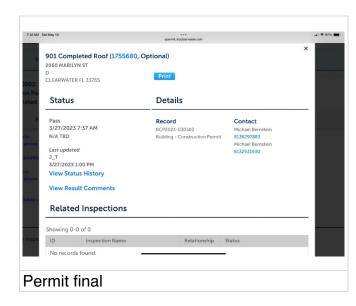
☐ N. Exterior Opening Protection (unverified shutter s	ystems with no documenta	ation) All Glazed openings a	are protected with		
protective coverings not meeting the requirements of Ar		stems that appear to meet Ar	iswer "A" or "B"		
with no documentation of compliance (Level N in the ta	· · · · · · · · · · · · · · · · · · ·				
□ N.1 All Non-Glazed openings classified as Level A, B, C, o					
	O in the table above, and no No	on-Glazed openings classified a	s Level X in the		
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above				
X. None or Some Glazed Openings One or more Glaze	ed openings classified and L	evel X in the table above.			
MITIGATION INSPECTIONS MUST B	E CERTIFIED BY A QUA	LIFIED INSPECTOR.			
Section 627.711(2), Florida Statutes, provi	des a listing of individuals	who may sign this form.			
Qualified Inspector Name: Ioannis Marakas	License Type: Home Inspector	License or Certificate # :			
Inspection Company:	Home inspector	Phone:			
Marakas Home Inspections		727 433 2304			
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			ne 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 St	atutes.				
Professional architect licensed under Section 481.213, Florida St	atutes.				
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes		ons to properly complete a unifo	rm mitigation		
Individuals other than licensed contractors licensed under	Section 489.111, Florida S	tatutes, or professional eng	ineer licensed		
under Section 471.015, Florida Statues, must inspect the str					
Licensees under s.471.015 or s.489.111 may authorize a dire	ect employee who possesse	s the requisite skill, knowle	edge, and		
experience to conduct a mitigation verification inspection.					
I, <u>loannis Marakas</u> am a qualified inspector and I personally performed the inspection or ( <i>licensed</i> (print name)					
contractors and professional engineers only ) I had my empl	ovee ( N/A	) perform the inspection	on		
	(print name of inspe				
and I agree to be responsible for his/her work.					
Qualified Inspector Signature: Date:					
An individual or entity who knowingly or through gross ne	gligence provides a false o	r fraudulent mitigation ver	ification form is		
subject to investigation by the Florida Division of Insurance					
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.					
	11 4 1' 1	1 - 1:1 6	. C.1		
Homeowner to complete: I certify that the named Qualified residence identified on this form and that proof of identification	-	• • •			
Signature:I	Date: 05/08/2025	<del></del>			
An individual or entity who knowingly provides or utters a	false or fraudulent mitiga	tion 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 onlas offering protection from hurricanes.	y and cannot be used to co	ertify any product or const	ruction feature		
		Olares	00705		
Inspectors Initials <u>IEM</u> Property Address 2060 Marilyn St	[	Clearwater	33765		

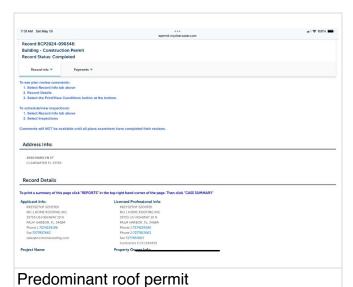
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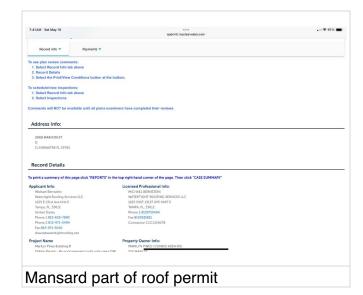






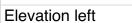














Elevation front









Elevation rear





Nail detection device



Nail spacing



8d nail



Deck thickness



Roof to wall attachment clips



Roof covering TPO





