Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/2025		
Owner Information		
Owner Name: Las Palmas Townhomes Homeowners Assn INC		Contact Person:
Address: 4347-4363 Tyler Cir Bldg		Home Phone:
City: St. Petersburg Fl	Zip: 33709	Work Phone:
County: PINELLAS		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2009	# of Stories: 2	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 though 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 2009. 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
☑ 1. Asphalt/Fiberglass Shingle	4/2/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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		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	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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/ NACHI	License or Certificate #: HI-829 / NACHI 10090703
Inspection Company: JML INSPECTIONS & SERVICES LLC		Phone: 727-683-1492

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 Statues, 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, Joseph Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: Joe Lamoureux **Date:** 5/22/2025

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:** 5/22/2025

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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4359


BOSCH

Date: 04/02/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-06867

ADDRESS:
4359 TYLER CIR ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:
re roof shingle to shingle 2 story 4/12 WHOLE BUILDING

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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 [illegible] OR ATTORNEY BEFORE

- NO INSPECTION WILL BE MA[illegible] PERMIT CARD [illegible] ARE READILY AVAILABLE
- SOME GENERAL INFORMATION [illegible]

☐ BUILDING	FOOTING INSPECTION [illegible] DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___	[illegible] INSPECTION DATE: ___ BY: ___	[illegible] SHEATH INSP. DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___
	[illegible] INSPECTION DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___	DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___
	[illegible] INSPECTION OK DATE: ___ BY: ___	[illegible] OK DATE: ___ BY: ___	SPECIAL INSPECTION OK DATE: ___ BY: ___	SPECIAL INSPECTION DATE: ___ BY: ___	[illegible] DATE: ___ BY: ___
☐ [illegible]	[illegible]	[illegible] OK	ROUGH IN INSPECTION OK	[illegible] INSPECTION	[illegible]

Access Portal

Home Building / Property Complaints Licensing Help

LIVE HELP offline

Accessibility Assistance | Announcements Register for an Account Reports (2) Login

Instructions and Help |

Permits resulting from Hurricane damage are not exempt from Substantial Damage Substantial Improvement rules.

tyler cir

Home Air Quality Build Code Enforce Consumer Protect Develop Environment Fertilizer Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record EBP-25-06867:
Express Building Permit
Record Status: Finaled
Expiration Date: 10/12/2025

Record Info Payments

Work Location

4359 TYLER CIR
ST PETERSBURG FL 33709 *

Record Details

Replacing a **water heater, AC unit** or **water softener**? Virtual inspections are now available for these permit types. Learn more.
Virtual inspections will be available for more permit types soon.

Licensed Professional:
John P McAuley mcauley21@live.com
MCAULEY ROOFING INC
6283 4th Ave S
St Petersburg, FL, 33707

Project Description:
re roof shingle to shingle 2 story 4/12 WHOLE BUILDING

Phone:7272409567

Mobile Phone:

Roofing Contractor CCC1334062

More Details

Print/View Permit

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/2025		
Owner Information		
Owner Name: Las Palmas Townhomes Homeowners Assn INC		Contact Person:
Address: 4346-4362 Tyler Cir		Home Phone:
City: St. Petersburg Fl	Zip: 33709	Work Phone:
County: PINELLAS		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2010	# of Stories: 2	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 though 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 2010. 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) ___/___/_____

☐ . 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
☑ 1. Asphalt/Fiberglass Shingle	3/28/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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		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	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 JL **Property Address** 4346-4362 Tyler Cir St. Petersburg Fl 33709

***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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/ NACHI	License or Certificate #: HI-829 / NACHI 10090703
Inspection Company: JML INSPECTIONS & SERVICES LLC		Phone: 727-683-1492

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 Statues, 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, Joseph Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: Joe Lamoureux **Date:** 5/22/2025

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:** 5/22/2025

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 JL **Property Address** 4346-4362 Tyler Cir St. Petersburg Fl 33709

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FIRE LANE

Date: 04/09/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: ESP-25-06540

ADDRESS:
4350 TYLER CIR, ST PETERSBURG, FL 33708

DESCRIPTION OF WORK:
65 square shingle to shingle re roof. 4/12 2 story. WHOLE BUILDING

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- ACTUAL OPENING INFORMATION IS ALSO AVAILABLE ON THE BACK OF THIS CARD.

☐ BUILDING					
☐ ELEC					
☐ PLBG					
☐ FUEL GAS					
☐ MECH					
☐ FIRE					


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Access Portal

Home Building / Property Complaints Licensing Help

LIVE HELP offline

Accessibility Assistance | Announcements Register for an Account Reports (2) Login

Instructions and Help |

Permits resulting from Hurricane damage are not exempt from Substantial Damage Substantial Improvement rules.

tyler cir

Home Air Quality Build Code Enforce Consumer Protect Develop Environment Fertilizer Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record EBP-25-06540:
Express Building Permit
Record Status: Finaled
Expiration Date: 10/13/2025

Record Info Payments

Work Location

4350 TYLER CIR
ST PETERSBURG FL 33709 *

Record Details

Replacing a **water heater, AC unit** or **water softener**? Virtual inspections are now available for these permit types. Learn more.
Virtual inspections will be available for more permit types soon.

Licensed Professional:

John P McAuley mcauley21@live.com
MCAULEY ROOFING INC
6283 4th Ave S
St Petersburg, FL, 33707

Project Description:

65 square shingle to shingle re roof. 4/12 2 story. WHOLE BUILDING

Phone:7272409567

Mobile Phone:

Roofing Contractor CCC1334062

More Details

Print/View Permit

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/2025		
Owner Information		
Owner Name: Las Palmas Townhomes Homeowners Assn INC		Contact Person:
Address: 4326-4342 Tyler Cir Bldg		Home Phone:
City: St. Petersburg Fl	Zip: 33709	Work Phone:
County: PINELLAS		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4/8/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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 JL **Property Address** Tyler Cir St. Petersburg Fl 33709

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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 ½" 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.

Inspectors Initials JL **Property Address** 4326-4342 Tyler Cir St. Petersburg Fl 33709

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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		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	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 JL **Property Address** 4326-4342 Tyler Cir St. Petersburg Fl 33709

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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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/ NACHI	License or Certificate #: HI-829 / NACHI 10090703
Inspection Company: JML INSPECTIONS & SERVICES LLC		Phone: 727-683-1492

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 Statues, 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, Joseph Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: Joe Lamoureux **Date:** 5/22/2025

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:** 5/22/2025

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 JL **Property Address** 4326-4342 Tyler Cir St. Petersburg Fl 33709

***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.**


BOSCH


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SWR

Access Portal

Home Building / Property Complaints Licensing Help

LIVE HELP offline

Accessibility Assistance | Announcements Register for an Account Reports (2) Login

Instructions and Help |

Permits resulting from Hurricane damage are not exempt from Substantial Damage Substantial Improvement rules.

tyler cir

Home Air Quality Build Code Enforce Consumer Protect Develop Environment Fertilizer Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record EBP-25-07313:
Express Building Permit
Record Status: Finaled
Expiration Date: 10/12/2025

Record Info Payments

Work Location

4330 TYLER CIR
ST PETERSBURG FL 33709 *

Record Details

Replacing a **water heater, AC unit** or **water softener**? Virtual inspections are now available for these permit types. Learn more.
Virtual inspections will be available for more permit types soon.

Licensed Professional:

John P McAuley mcauley21@live.com
MCAULEY ROOFING INC
6283 4th Ave S
St Petersburg, FL, 33707

Project Description:

BLDG 3
Re Roof Shingle to Shingle 2 story 4/12 pitch 65 Square

Phone:7272409567

Mobile Phone:

Roofing Contractor CCC1334062

More Details

Print/View Permit

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/25		
Owner Information		
Owner Name: Las PalmasTownhomes Homeowners Assn INC		Contact Person:
Address: 4250-4266 Tyler Cir		Home Phone:
City: St Petersburg	Zip: 33709	Work Phone:
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4 / 16 / 25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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		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	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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector NACHI	License or Certificate #: HI-10813 NACHI 15101212
Inspection Company: JML Inspections		Phone: 407-347-0467

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 Statues, 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, Tim Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: _____ **Date:** 5/22/25

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:** 5/22/25

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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***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.**

Date: 05/27/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-08073

ADDRESS:
4258 TYLER CIR, ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:
shingle to shingle re roof 65 square 4/12 pitch 2 story

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- SOME GENERAL INFORMATION IS AVAILABLE ON THE BACK OF THIS CARD

☐ BUILDING	FOOTING INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	LINTEL INSPECTION OK DATE: BY:	RF/WALL SHEATH INSP. OK DATE: BY:	RF/DRY-IN/FLASHING INSP. OK DATE: BY:
	WALL DRY-IN INSPECTION OK DATE: BY:	FRAME INSPECTION OK DATE: BY:	LATH INSPECTION OK DATE: BY:	INSULATION INSPECTION OK DATE: BY:	DRYWALL INSPECTION OK DATE: BY:
	FIREWALL INSPECTION OK DATE: BY:	RF COVERING INSP. OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL BLDG INSPECTION OK DATE: BY:
☐ ELEC	POLE INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL ELEC INSP. OK DATE: BY:
☐ PLBG	ROUGH-IN INSPECTION OK DATE: BY:	DWV/RF INSPECTION OK DATE: BY:	2ND ROUGH-IN INSPECTION OK DATE: BY:	SEWER INSPECTION OK DATE: BY:	WATER SRVC INSPECTION OK DATE: BY:
☐ FUEL GAS	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL G. INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL PLBG. INSPECTION OK DATE: BY:
☐ MECH	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL MECH INSPECTION OK DATE: BY:
☐ FIRE SPKLR	UNDERGROUND INSP. OK DATE: BY:	HYDROSTATIC INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE SPKLR INSP OK DATE: BY:
☐ FIRE MARSHAL	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE INSPECTION OK DATE: BY:

HABITAT INSP	# _____	# _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	FINAL HABITAT INSPECTION OK DATE: _____ BY: _____

This inspection placard contains Building Code inspection information pertaining to your job. Information regarding other agencies may be obtained by contacting the individual agencies.

Trades other than the Building require a sub-contractor list to be submitted by the primary contractor or owner doing their own work before the work can be started.

The work is not approved unless this placard is marked OK and initialed by the inspector. If the placard is not signed, do not continue work and call 727-464-3888 and ask for the Chief Inspector of the appropriate division.

Finals must be approved in each area checked. In addition to the building inspections, your project may require approval from:

Health Department	DRS/Engineering	Water Department
Fire Department	DRS/Environmental	Sewer Department

FEMA documentation and elevation data requirements:
At the time of slab inspection a signed "**Contractor Tie-in Certification**" or a "**Top of Block/Form**" survey must be posted (with the placard) on the job site for the inspection to pick up.
At the time of first vertical inspection, an **UNDER CONSTRUCTION FEMA ELEVATION CERTIFICATE** must be submitted.
At the time of frame inspection a sealed tie-in survey showing the "**Lowest Floor**" (V-zones must read "**bottom of lowest horizontal structural member**") must be posted with the placard on the job site for the inspection to pick up.
Notice of Nonconversion Acknowledgment recorded with the P.C. Clerk of the Court's Office is to be provided at the time of frame inspection.
At time of final building inspection a **FINAL FEMA ELEVATION CERTIFICATE** must be posted with the placard on the job site for the inspector to pick up.
No final inspection will be made until all correction notice fees from the appropriate division have been paid.

The general order of inspections is: (List is not all-inclusive please see links below for more information)

Inspection Type	IVR Code	Inspection Type	IVR Code
B - Footing	1002	B - Roof Flashing	1014
P - 1st rough Plumbing	1300	P - Wall Dry-in	1018
E - Under slab electrical	1102	B - Lath	1020
B - Slab	1004	B - Roof Covering when Complete	1024
B - Lintel	1006	B - Frame	1016
B - Rough Electrical	1104	B - Insulation	1010
P - Sewer	1306	B - Dry Wall	1022
P - Water Service	1308	B - Fire Wall	1028
M - 1st rough Mechanical	1200	P - Final Plumbing	1399
B - Roof Sheathing	1008	E - Final Electrical	1199
B - Wall Sheathing	1009	M - Final Mechanical	1299
P - Drain Waste Vent Through Roof	1312	G - Final Gas	1599
B - Roof Dry-in	1012	B - Final Building	1099

Schedule inspection on-line using the Pinellas County Access Portal at https://aca-prod.accela.com/pinellas
Or by using The Pinellas County Automated Inspection Phone Line 1-727-453-4000

Electrical releases will be emailed to the power company upon completion of all final inspections and notification by the appropriate departments.

This is a partial list of frequently requested information and is not intended as an all-inclusive reference. Additional inspection codes are available by visiting http://www.pinellascounty.org/build/inspection-numbers.htm.

Your opinion matters to us! Please take a moment to let us know about your experience:
http://www.pinellascounty.org/surveys/build

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/2025		
Owner Information		
Owner Name: Las Palmas Townhomes Homeowners Assn INC		Contact Person:
Address: 4303-4319 Tyler Cir Bldg		Home Phone:
City: St. Petersburg Fl	Zip: 33709	Work Phone:
County: PINELLAS		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4/8/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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		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	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 JL **Property Address** 4303-4319 Tyler Cir St. Petersburg Fl 33709

***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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/ NACHI	License or Certificate #: HI-829 / NACHI 10090703
Inspection Company: JML INSPECTIONS & SERVICES LLC		Phone: 727-683-1492

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 Statues, 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, Joseph Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: Joe Lamoureux **Date:** 5/22/2025

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.

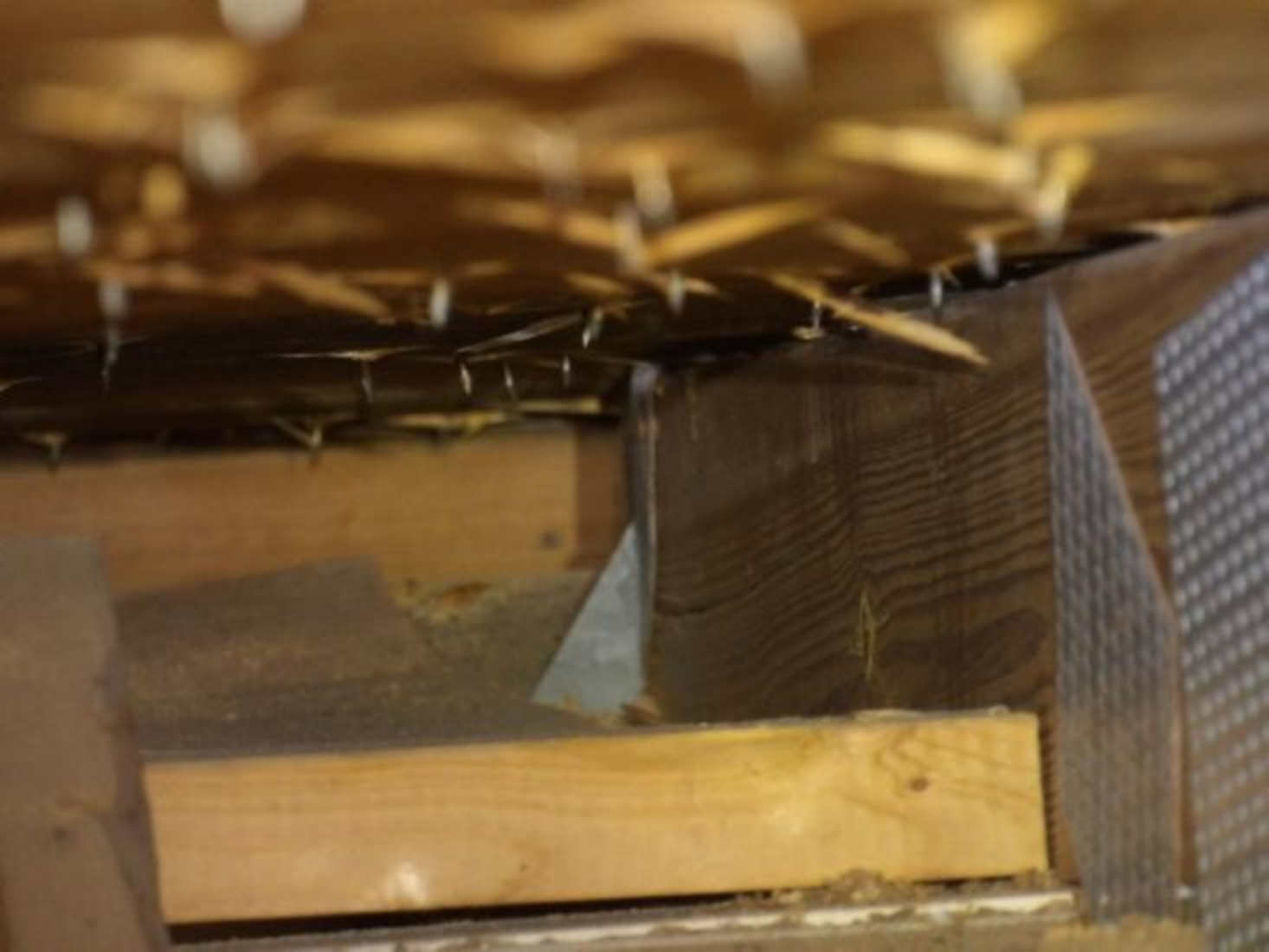
Signature: _____ **Date:** 5/22/2025

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)

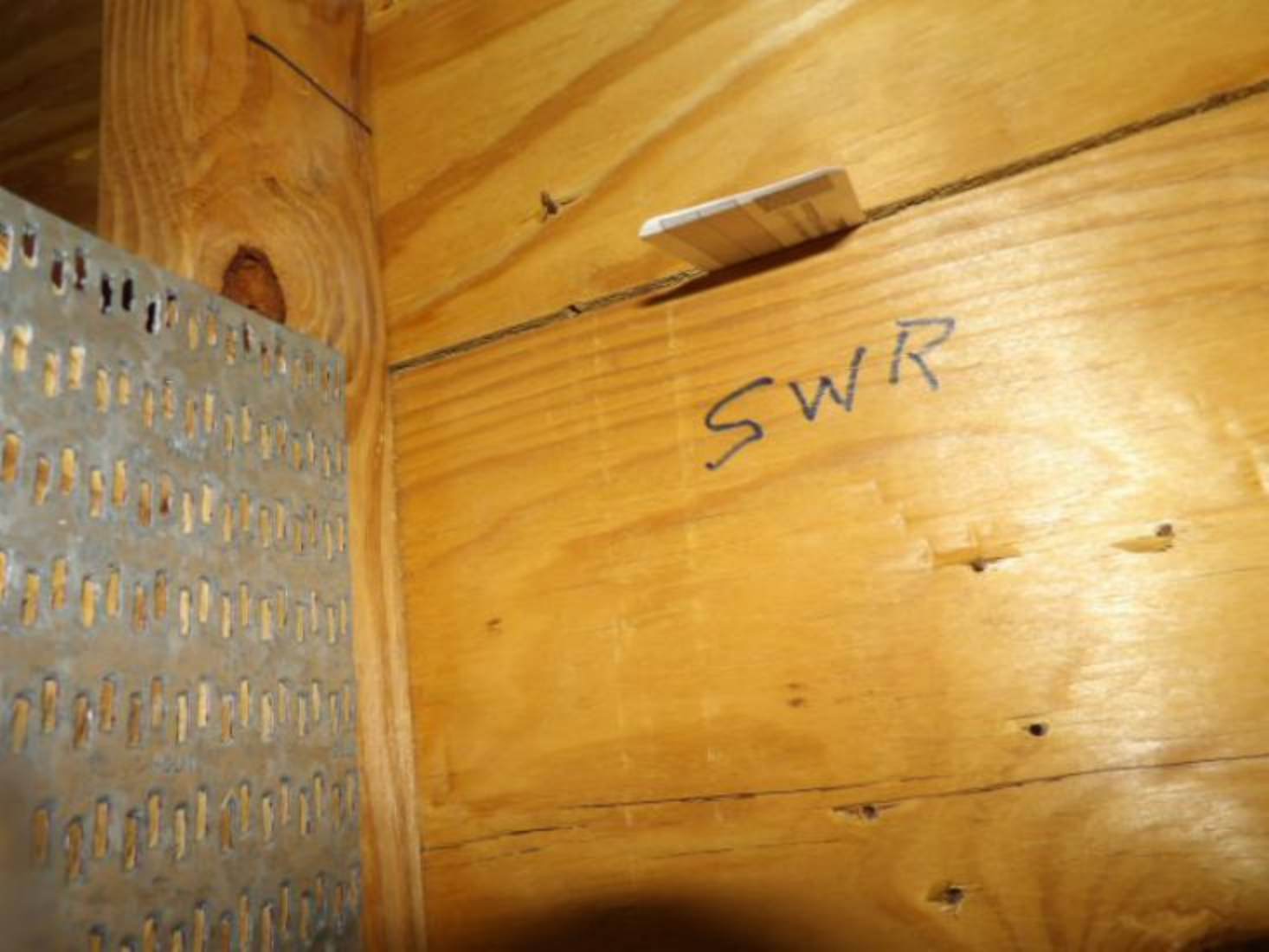
The definitions on this form are for inspection purposes only and cannot be used to certify any product or construction feature as offering protection from hurricanes.

Inspectors Initials JL **Property Address** 4303-4319 Tyler Cir St. Petersburg Fl 33709

***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.**




BOSCH


SWR


SWR

Access Portal

Home Building / Property Complaints Licensing Help

LIVE HELP offline

Accessibility Assistance | Announcements Register for an Account Reports (2) Login

Instructions and Help |

Permits resulting from Hurricane damage are not exempt from Substantial Damage Substantial Improvement rules.

tyler cir

Home Air Quality Build Code Enforce Consumer Protect Develop Environment Fertilizer Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record EBP-25-07391:
Express Building Permit
Record Status: Finaled
Expiration Date: 10/15/2025

Record Info Payments

Work Location

4311 TYLER CIR
ST PETERSBURG FL 33709 *

Record Details

Replacing a **water heater, AC unit** or **water softener**? Virtual inspections are now available for these permit types. Learn more.
Virtual inspections will be available for more permit types soon.

Licensed Professional:

John P McAuley mcauley21@live.com
MCAULEY ROOFING INC
6283 4th Ave S
St Petersburg, FL, 33707

Project Description:

BLDG 4
Re roof shingle to shingle 2 story 4/12 65 squares

Phone:7272409567

Mobile Phone:

Roofing Contractor CCC1334062

More Details

Print/View Permit

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/2025		
Owner Information		
Owner Name: Las Palmas Townhomes Homeowners Assn INC		Contact Person:
Address: 4302-4322 Tyler Cir Bldg		Home Phone:
City: St. Petersburg Fl	Zip: 33709	Work Phone:
County: PINELLAS		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4/8/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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		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	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 JL **Property Address** 4302-4322 Tyler Cir St. Petersburg Fl 33709

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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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Joseph Lamoureux	License Type: FL Home Inspector/ NACHI	License or Certificate #: HI-829 / NACHI 10090703
Inspection Company: JML INSPECTIONS & SERVICES LLC		Phone: 727-683-1492

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.

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I, Joseph Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: Joe Lamoureux **Date:** 5/22/2025

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:** 5/22/2025

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)

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Inspectors Initials JL **Property Address** 4302-4322 Tyler Cir St. Petersburg Fl 33709

***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.**


FIRE LANE

Access Portal

Home Building / Property Complaints Licensing Help

LIVE HELP offline

Accessibility Assistance | Announcements Register for an Account Reports (2) Login

Instructions and Help |

Permits resulting from Hurricane damage are not exempt from Substantial Damage Substantial Improvement rules.

tyler cir

Home Air Quality Build Code Enforce Consumer Protect Develop Environment Fertilizer Plan Utilities PCCLB Water/Nav

Search Permits Schedule an Inspection

Record EBP-25-07396:
Express Building Permit
Record Status: Finaled
Expiration Date: 10/15/2025

Record Info Payments

Work Location

4314 TYLER CIR
ST PETERSBURG FL 33709 *

Record Details

Replacing a **water heater, AC unit** or **water softener**? Virtual inspections are now available for these permit types. Learn more.
Virtual inspections will be available for more permit types soon.

Licensed Professional:

John P McAuley mcauley21@live.com
MCAULEY ROOFING INC
6283 4th Ave S
St Petersburg, FL, 33707

Project Description:

BLDG 5
shingle to shingle re roof 65 squares 4/12 2 story

Phone:7272409567

Mobile Phone:

Roofing Contractor CCC1334062

More Details

Print/View Permit

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/25		
Owner Information		
Owner Name: Las PalmasTownhomes Homeowners Assn INC		Contact Person:
Address: 4275 - 4291 Tyler Cir		Home Phone:
City: St Petersburg	Zip: 33709	Work Phone:
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4 / 15 / 25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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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***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.**

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		
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	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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector NACHI	License or Certificate #: HI-10813 NACHI 15101212
Inspection Company: JML Inspections		Phone: 407-347-0467

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 Statues, 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, Tim Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: _____ **Date:** 5/22/25

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:** 5/22/25

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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***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.**

Date: 05/26/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-07825

ADDRESS:

4283 TYLER CIR, ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:

Re Roof Shingle to Shingle 2 Story 4/12 65 sq Whole Building

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- SOME GENERAL INFORMATION IS AVAILABLE ON THE BACK OF THIS CARD

☐ BUILDING	FOOTING INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	LINTEL INSPECTION OK DATE: BY:	RF/WALL SHEATH INSP. OK DATE: BY:	RF/DRY-IN/FLASHING INSP. OK DATE: BY:
	WALL DRY-IN INSPECTION OK DATE: BY:	FRAME INSPECTION OK DATE: BY:	LATH INSPECTION OK DATE: BY:	INSULATION INSPECTION OK DATE: BY:	DRYWALL INSPECTION OK DATE: BY:
	FIREWALL INSPECTION OK DATE: BY:	RF COVERING INSP. OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL BLDG INSPECTION OK DATE: BY:
☐ ELEC	POLE INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL ELEC INSP. OK DATE: BY:
☐ PLBG	ROUGH-IN INSPECTION OK DATE: BY:	DWV/RF INSPECTION OK DATE: BY:	2ND ROUGH-IN INSPECTION OK DATE: BY:	SEWER INSPECTION OK DATE: BY:	WATER SRVC INSPECTION OK DATE: BY:
☐ FUEL GAS	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL G. INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL PLBG. INSPECTION OK DATE: BY:
☐ MECH	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL MECH INSPECTION OK DATE: BY:
☐ FIRE SPKLR	UNDERGROUND INSP. OK DATE: BY:	HYDROSTATIC INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE SPKLR INSP OK DATE: BY:
☐ FIRE MARSHAL	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE INSPECTION OK DATE: BY:

HABITAT INSP	# _____	# _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	FINAL HABITAT INSPECTION OK DATE: _____ BY: _____

This inspection placard contains Building Code inspection information pertaining to your job. Information regarding other agencies may be obtained by contacting the individual agencies.

Trades other than the Building require a sub-contractor list to be submitted by the primary contractor or owner doing their own work before the work can be started.

The work is not approved unless this placard is marked OK and initialed by the inspector. If the placard is not signed, do not continue work and call 727-464-3888 and ask for the Chief Inspector of the appropriate division.

Finals must be approved in each area checked. In addition to the building inspections, your project may require approval from:

Health Department	DRS/Engineering	Water Department
Fire Department	DRS/Environmental	Sewer Department

FEMA documentation and elevation data requirements:
At the time of slab inspection a signed "**Contractor Tie-in Certification**" or a "**Top of Block/Form**" survey must be posted (with the placard) on the job site for the inspection to pick up.
At the time of first vertical inspection, an **UNDER CONSTRUCTION FEMA ELEVATION CERTIFICATE** must be submitted.
At the time of frame inspection a sealed tie-in survey showing the "**Lowest Floor**" (V-zones must read "**bottom of lowest horizontal structural member**") must be posted with the placard on the job site for the inspection to pick up.
Notice of Nonconversion Acknowledgment recorded with the P.C. Clerk of the Court's Office is to be provided at the time of frame inspection.
At time of final building inspection a **FINAL FEMA ELEVATION CERTIFICATE** must be posted with the placard on the job site for the inspector to pick up.
No final inspection will be made until all correction notice fees from the appropriate division have been paid.

The general order of inspections is: (List is not all-inclusive please see links below for more information)

Inspection Type	IVR Code	Inspection Type	IVR Code
B - Footing	1002	B - Roof Flashing	1014
P - 1st rough Plumbing	1300	P - Wall Dry-in	1018
E - Under slab electrical	1102	B - Lath	1020
B - Slab	1004	B - Roof Covering when Complete	1024
B - Lintel	1006	B - Frame	1016
B - Rough Electrical	1104	B - Insulation	1010
P - Sewer	1306	B - Dry Wall	1022
P - Water Service	1308	B - Fire Wall	1028
M - 1st rough Mechanical	1200	P - Final Plumbing	1399
B - Roof Sheathing	1008	E - Final Electrical	1199
B - Wall Sheathing	1009	M - Final Mechanical	1299
P - Drain Waste Vent Through Roof	1312	G - Final Gas	1599
B - Roof Dry-in	1012	B - Final Building	1099

Schedule inspection on-line using the Pinellas County Access Portal at https://aca-prod.accela.com/pinellas
Or by using The Pinellas County Automated Inspection Phone Line 1-727-453-4000

Electrical releases will be emailed to the power company upon completion of all final inspections and notification by the appropriate departments.

This is a partial list of frequently requested information and is not intended as an all-inclusive reference. Additional inspection codes are available by visiting http://www.pinellascounty.org/build/inspection-numbers.htm.

Your opinion matters to us! Please take a moment to let us know about your experience:
http://www.pinellascounty.org/surveys/build


4291


BOSCH


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Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/25		
Owner Information		
Owner Name: Las PalmasTownhomes Homeowners Assn INC		Contact Person:
Address: 4270-4290 Tyler Cir		Home Phone:
City: St Petersburg	Zip: 33709	Work Phone:
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4 / 14 / 25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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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***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.**

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		
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	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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector NACHI	License or Certificate #: HI-10813 NACHI 15101212
Inspection Company: JML Inspections		Phone: 407-347-0467

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 Statues, 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, Tim Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: _____ **Date:** 5/22/25

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:** 5/22/25

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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***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.**

Date: 05/26/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-07822

ADDRESS:

4282 TYLER CIR, ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:

Re Roof Shingle to Shingle 2 story 4/12 65 squares Whole Building

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- SOME GENERAL INFORMATION IS AVAILABLE ON THE BACK OF THIS CARD

☐ BUILDING	FOOTING INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	LINTEL INSPECTION OK DATE: BY:	RF/WALL SHEATH INSP. OK DATE: BY:	RF/DRY-IN/FLASHING INSP. OK DATE: BY:
	WALL DRY-IN INSPECTION OK DATE: BY:	FRAME INSPECTION OK DATE: BY:	LATH INSPECTION OK DATE: BY:	INSULATION INSPECTION OK DATE: BY:	DRYWALL INSPECTION OK DATE: BY:
	FIREWALL INSPECTION OK DATE: BY:	RF COVERING INSP. OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL BLDG INSPECTION OK DATE: BY:
☐ ELEC	POLE INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL ELEC INSP. OK DATE: BY:
☐ PLBG	ROUGH-IN INSPECTION OK DATE: BY:	DWV/RF INSPECTION OK DATE: BY:	2ND ROUGH-IN INSPECTION OK DATE: BY:	SEWER INSPECTION OK DATE: BY:	WATER SRVC INSPECTION OK DATE: BY:
☐ FUEL GAS	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL G. INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL PLBG. INSPECTION OK DATE: BY:
☐ MECH	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL MECH INSPECTION OK DATE: BY:
☐ FIRE SPKLR	UNDERGROUND INSP. OK DATE: BY:	HYDROSTATIC INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE SPKLR INSP OK DATE: BY:
☐ FIRE MARSHAL	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE INSPECTION OK DATE: BY:

HABITAT INSP	# _____	# _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	FINAL HABITAT INSPECTION OK DATE: _____ BY: _____

This inspection placard contains Building Code inspection information pertaining to your job. Information regarding other agencies may be obtained by contacting the individual agencies.

Trades other than the Building require a sub-contractor list to be submitted by the primary contractor or owner doing their own work before the work can be started.

The work is not approved unless this placard is marked OK and initialed by the inspector. If the placard is not signed, do not continue work and call 727-464-3888 and ask for the Chief Inspector of the appropriate division.

Finals must be approved in each area checked. In addition to the building inspections, your project may require approval from:

Health Department	DRS/Engineering	Water Department
Fire Department	DRS/Environmental	Sewer Department

FEMA documentation and elevation data requirements:
At the time of slab inspection a signed "**Contractor Tie-in Certification**" or a "**Top of Block/Form**" survey must be posted (with the placard) on the job site for the inspection to pick up.
At the time of first vertical inspection, an **UNDER CONSTRUCTION FEMA ELEVATION CERTIFICATE** must be submitted.
At the time of frame inspection a sealed tie-in survey showing the "**Lowest Floor**" (V-zones must read "**bottom of lowest horizontal structural member**") must be posted with the placard on the job site for the inspection to pick up.
Notice of Nonconversion Acknowledgment recorded with the P.C. Clerk of the Court's Office is to be provided at the time of frame inspection.
At time of final building inspection a **FINAL FEMA ELEVATION CERTIFICATE** must be posted with the placard on the job site for the inspector to pick up.
No final inspection will be made until all correction notice fees from the appropriate division have been paid.

The general order of inspections is: (List is not all-inclusive please see links below for more information)

Inspection Type	IVR Code	Inspection Type	IVR Code
B - Footing	1002	B - Roof Flashing	1014
P - 1st rough Plumbing	1300	P - Wall Dry-in	1018
E - Under slab electrical	1102	B - Lath	1020
B - Slab	1004	B - Roof Covering when Complete	1024
B - Lintel	1006	B - Frame	1016
B - Rough Electrical	1104	B - Insulation	1010
P - Sewer	1306	B - Dry Wall	1022
P - Water Service	1308	B - Fire Wall	1028
M - 1st rough Mechanical	1200	P - Final Plumbing	1399
B - Roof Sheathing	1008	E - Final Electrical	1199
B - Wall Sheathing	1009	M - Final Mechanical	1299
P - Drain Waste Vent Through Roof	1312	G - Final Gas	1599
B - Roof Dry-in	1012	B - Final Building	1099

Schedule inspection on-line using the Pinellas County Access Portal at https://aca-prod.accela.com/pinellas
Or by using The Pinellas County Automated Inspection Phone Line 1-727-453-4000

Electrical releases will be emailed to the power company upon completion of all final inspections and notification by the appropriate departments.

This is a partial list of frequently requested information and is not intended as an all-inclusive reference. Additional inspection codes are available by visiting http://www.pinellascounty.org/build/inspection-numbers.htm.

Your opinion matters to us! Please take a moment to let us know about your experience:
http://www.pinellascounty.org/surveys/build


4290

2
FT & IN
INCHES
3
4
16FT
5


BOSCH


2 3 4 5 6 7 8 9 10 11

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/25		
Owner Information		
Owner Name: Las PalmasTownhomes Homeowners Assn INC		Contact Person:
Address: 4230 - 4246 Tyler Cir		Home Phone:
City: St Petersburg	Zip: 33709	Work Phone:
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4/21/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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

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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 ½" 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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***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.**

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		
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	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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector NACHI	License or Certificate #: HI-10813 NACHI 15101212
Inspection Company: JML Inspections		Phone: 407-347-0467

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 Statues, 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, Tim Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: _____ **Date:** 5/22/25

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:** 5/22/25

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 TL **Property Address** 4230 - 4246 Tyler Cir St Pertersburg Fl 33709

***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.**

Date: 05/26/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-08399

ADDRESS:

4238 TYLER CIR, ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:

65 Square shingle to shingle re roof 4/12 2 story

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- SOME GENERAL INFORMATION IS AVAILABLE ON THE BACK OF THIS CARD

☐ BUILDING	FOOTING INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	LINTEL INSPECTION OK DATE: BY:	RF/WALL SHEATH INSP. OK DATE: BY:	RF/DRY-IN/FLASHING INSP. OK DATE: BY:
	WALL DRY-IN INSPECTION OK DATE: BY:	FRAME INSPECTION OK DATE: BY:	LATH INSPECTION OK DATE: BY:	INSULATION INSPECTION OK DATE: BY:	DRYWALL INSPECTION OK DATE: BY:
	FIREWALL INSPECTION OK DATE: BY:	RF COVERING INSP. OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL BLDG INSPECTION OK DATE: BY:
☐ ELEC	POLE INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL ELEC INSP. OK DATE: BY:
☐ PLBG	ROUGH-IN INSPECTION OK DATE: BY:	DWV/RF INSPECTION OK DATE: BY:	2ND ROUGH-IN INSPECTION OK DATE: BY:	SEWER INSPECTION OK DATE: BY:	WATER SRVC INSPECTION OK DATE: BY:
☐ FUEL GAS	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL G. INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL PLBG. INSPECTION OK DATE: BY:
☐ MECH	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL MECH INSPECTION OK DATE: BY:
☐ FIRE SPKLR	UNDERGROUND INSP. OK DATE: BY:	HYDROSTATIC INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE SPKLR INSP OK DATE: BY:
☐ FIRE MARSHAL	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE INSPECTION OK DATE: BY:

HABITAT INSP	# _____	# _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	FINAL HABITAT INSPECTION OK DATE: _____ BY: _____

This inspection placard contains Building Code inspection information pertaining to your job. Information regarding other agencies may be obtained by contacting the individual agencies.

Trades other than the Building require a sub-contractor list to be submitted by the primary contractor or owner doing their own work before the work can be started.

The work is not approved unless this placard is marked OK and initialed by the inspector. If the placard is not signed, do not continue work and call 727-464-3888 and ask for the Chief Inspector of the appropriate division.

Finals must be approved in each area checked. In addition to the building inspections, your project may require approval from:

Health Department	DRS/Engineering	Water Department
Fire Department	DRS/Environmental	Sewer Department

FEMA documentation and elevation data requirements:
At the time of slab inspection a signed "**Contractor Tie-in Certification**" or a "**Top of Block/Form**" survey must be posted (with the placard) on the job site for the inspection to pick up.
At the time of first vertical inspection, an **UNDER CONSTRUCTION FEMA ELEVATION CERTIFICATE** must be submitted.
At the time of frame inspection a sealed tie-in survey showing the "**Lowest Floor**" (V-zones must read "**bottom of lowest horizontal structural member**") must be posted with the placard on the job site for the inspection to pick up.
Notice of Nonconversion Acknowledgment recorded with the P.C. Clerk of the Court's Office is to be provided at the time of frame inspection.
At time of final building inspection a **FINAL FEMA ELEVATION CERTIFICATE** must be posted with the placard on the job site for the inspector to pick up.
No final inspection will be made until all correction notice fees from the appropriate division have been paid.

The general order of inspections is: (List is not all-inclusive please see links below for more information)

Inspection Type	IVR Code	Inspection Type	IVR Code
B - Footing	1002	B - Roof Flashing	1014
P - 1st rough Plumbing	1300	P - Wall Dry-in	1018
E - Under slab electrical	1102	B - Lath	1020
B - Slab	1004	B - Roof Covering when Complete	1024
B - Lintel	1006	B - Frame	1016
B - Rough Electrical	1104	B - Insulation	1010
P - Sewer	1306	B - Dry Wall	1022
P - Water Service	1308	B - Fire Wall	1028
M - 1st rough Mechanical	1200	P - Final Plumbing	1399
B - Roof Sheathing	1008	E - Final Electrical	1199
B - Wall Sheathing	1009	M - Final Mechanical	1299
P - Drain Waste Vent Through Roof	1312	G - Final Gas	1599
B - Roof Dry-in	1012	B - Final Building	1099

Schedule inspection on-line using the Pinellas County Access Portal at https://aca-prod.accela.com/pinellas
Or by using The Pinellas County Automated Inspection Phone Line 1-727-453-4000

Electrical releases will be emailed to the power company upon completion of all final inspections and notification by the appropriate departments.

This is a partial list of frequently requested information and is not intended as an all-inclusive reference. Additional inspection codes are available by visiting http://www.pinellascounty.org/build/inspection-numbers.htm.

Your opinion matters to us! Please take a moment to let us know about your experience:
http://www.pinellascounty.org/surveys/build


4246


BOSCH


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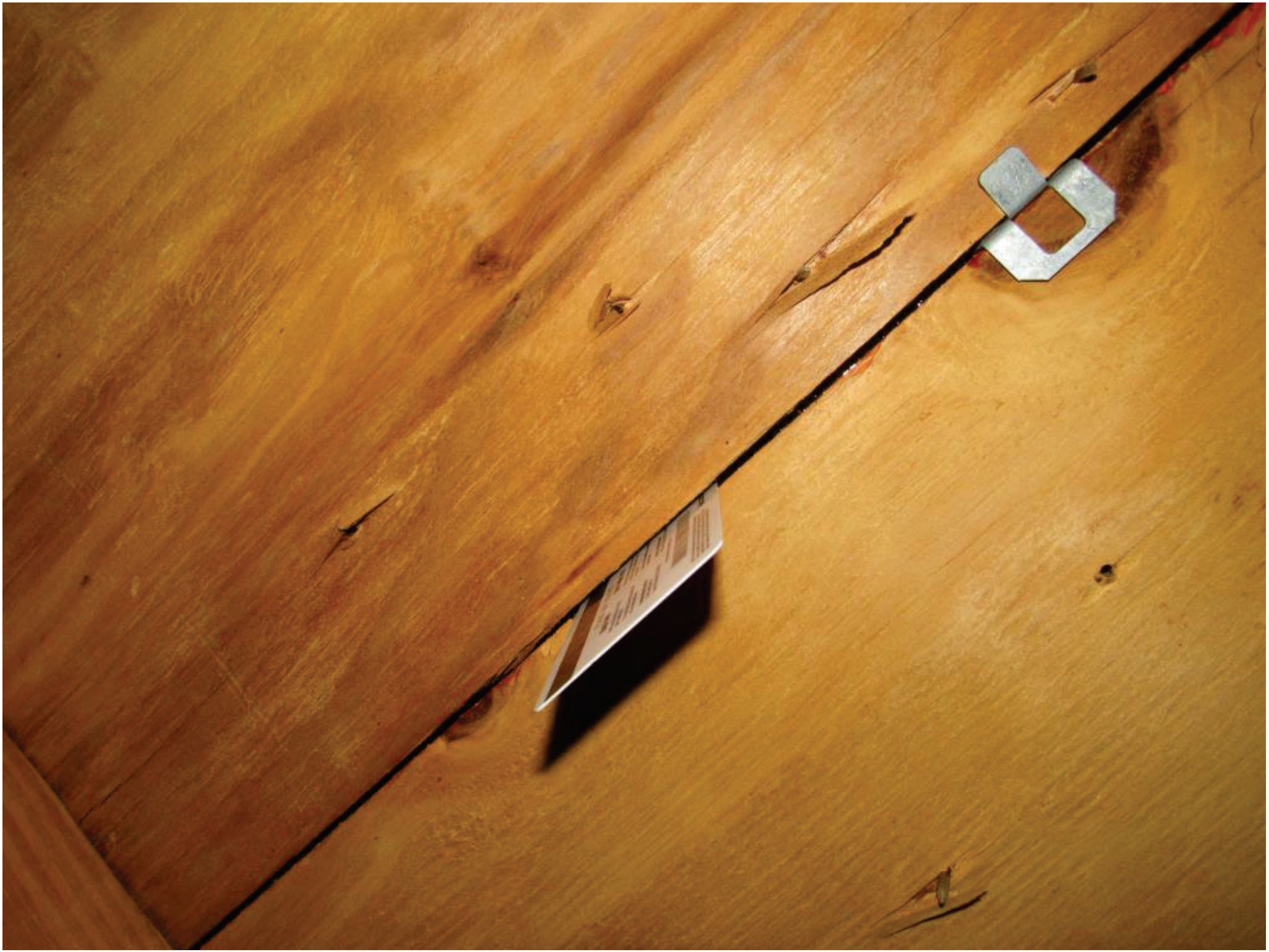

Uniform Mitigation Verification Inspection Form

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

Inspection Date: 5/22/25		
Owner Information		
Owner Name: Las PalmasTownhomes Homeowners Assn INC		Contact Person:
Address: 4231- 4247 Tyler Cir		Home Phone:
City: St Petersburg	Zip: 33709	Work Phone:
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 2007	# of Stories: 2	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 though 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 2007. 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
☑ 1. Asphalt/Fiberglass Shingle	4/21/25			☐
☐ 2. Concrete/Clay Tile	___/___/_____			☐
☐ 3. Metal	___/___/_____			☐
☐ 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".

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 TL **Property Address** 4231- 4247 Tyler Cir St Pertersburg Fl 33709

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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 ½" 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.

Inspectors Initials TL **Property Address** 4231- 4247 Tyler Cir St Pertersburg Fl 33709

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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		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	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 TL **Property Address** 4231- 4247 Tyler Cir St Pertersburg Fl 33709

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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.
Section 627.711(2), Florida Statutes, provides a listing of individuals who may sign this form.

Qualified Inspector Name: Tim Lamoureux	License Type: FL Home Inspector NACHI	License or Certificate #: HI-10813 NACHI 15101212
Inspection Company: JML Inspections		Phone: 407-347-0467

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 Statues, 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, Tim Lamoureux **(print name) am a qualified inspector and I personally performed the inspection or (*licensed contractors and professional engineers only*) I had my employee (_____) perform the inspection (print name of inspector) and I agree to be responsible for his/her work.**

Qualified Inspector Signature: _____ **Date:** 5/22/25

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:** 5/22/25

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 TL **Property Address** 4231- 4247 Tyler Cir St Pertersburg Fl 33709

***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.**

Date: 05/27/2025

Pinellas County

BUILDING & DEVELOPMENT REVIEW SERVICES

PERMIT #: EBP-25-08394

ADDRESS:

4239 TYLER CIR, ST PETERSBURG, FL 33709

DESCRIPTION OF WORK:

65 square shingle to shingle re roof 4/12 2 story

- ALL CATEGORIES CHECKED REQUIRE INSPECTION
- ELECTRIC, PLUMBING, GAS AND MECHANICAL, ROUGH INSPECTIONS MUST BE APPROVED PRIOR TO FRAME INSPECTION

THIS SPACE IS FOR TERMITE TREATMENT STICKERS

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

- NO INSPECTION WILL BE MADE UNLESS A PERMIT CARD IS CONSPICUOUSLY POSTED AND APPROVED PLANS ARE READILY AVAILABLE.
- SOME GENERAL INFORMATION IS AVAILABLE ON THE BACK OF THIS CARD

☐ BUILDING	FOOTING INSPECTION OK DATE: BY:	SLAB INSPECTION OK DATE: BY:	LINTEL INSPECTION OK DATE: BY:	RF/WALL SHEATH INSP. OK DATE: BY:	RF/DRY-IN/FLASHING INSP. OK DATE: BY:
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☐ MECH	1ST ROUGH-IN INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL MECH INSPECTION OK DATE: BY:
☐ FIRE SPKLR	UNDERGROUND INSP. OK DATE: BY:	HYDROSTATIC INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE SPKLR INSP OK DATE: BY:
☐ FIRE MARSHAL	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	SPECIAL INSPECTION OK DATE: BY:	FINAL FIRE INSPECTION OK DATE: BY:

HABITAT INSP	# _____	# _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	SPECIAL INSPECTION OK DATE: _____ BY: _____	FINAL HABITAT INSPECTION OK DATE: _____ BY: _____

This inspection placard contains Building Code inspection information pertaining to your job. Information regarding other agencies may be obtained by contacting the individual agencies.

Trades other than the Building require a sub-contractor list to be submitted by the primary contractor or owner doing their own work before the work can be started.

The work is not approved unless this placard is marked OK and initialed by the inspector. If the placard is not signed, do not continue work and call 727-464-3888 and ask for the Chief Inspector of the appropriate division.

Finals must be approved in each area checked. In addition to the building inspections, your project may require approval from:

Health Department	DRS/Engineering	Water Department
Fire Department	DRS/Environmental	Sewer Department

FEMA documentation and elevation data requirements:
At the time of slab inspection a signed "**Contractor Tie-in Certification**" or a "**Top of Block/Form**" survey must be posted (with the placard) on the job site for the inspection to pick up.
At the time of first vertical inspection, an **UNDER CONSTRUCTION FEMA ELEVATION CERTIFICATE** must be submitted.
At the time of frame inspection a sealed tie-in survey showing the "**Lowest Floor**" (V-zones must read "**bottom of lowest horizontal structural member**") must be posted with the placard on the job site for the inspection to pick up.
Notice of Nonconversion Acknowledgment recorded with the P.C. Clerk of the Court's Office is to be provided at the time of frame inspection.
At time of final building inspection a **FINAL FEMA ELEVATION CERTIFICATE** must be posted with the placard on the job site for the inspector to pick up.
No final inspection will be made until all correction notice fees from the appropriate division have been paid.

The general order of inspections is: (List is not all-inclusive please see links below for more information)

Inspection Type	IVR Code	Inspection Type	IVR Code
B - Footing	1002	B - Roof Flashing	1014
P - 1st rough Plumbing	1300	P - Wall Dry-in	1018
E - Under slab electrical	1102	B - Lath	1020
B - Slab	1004	B - Roof Covering when Complete	1024
B - Lintel	1006	B - Frame	1016
B - Rough Electrical	1104	B - Insulation	1010
P - Sewer	1306	B - Dry Wall	1022
P - Water Service	1308	B - Fire Wall	1028
M - 1st rough Mechanical	1200	P - Final Plumbing	1399
B - Roof Sheathing	1008	E - Final Electrical	1199
B - Wall Sheathing	1009	M - Final Mechanical	1299
P - Drain Waste Vent Through Roof	1312	G - Final Gas	1599
B - Roof Dry-in	1012	B - Final Building	1099

Schedule inspection on-line using the Pinellas County Access Portal at https://aca-prod.accela.com/pinellas
Or by using The Pinellas County Automated Inspection Phone Line 1-727-453-4000

Electrical releases will be emailed to the power company upon completion of all final inspections and notification by the appropriate departments.

This is a partial list of frequently requested information and is not intended as an all-inclusive reference. Additional inspection codes are available by visiting http://www.pinellascounty.org/build/inspection-numbers.htm.

Your opinion matters to us! Please take a moment to let us know about your experience:
http://www.pinellascounty.org/surveys/build