

### **RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION**



Prepared Exclusively for Sunfish Bay Condominium Association, Inc.

As of 11-05-2025 | FPAT File# MUD2525702

## **Felten Property Assessment Team**

866.568.7853 | www.fpat.com



# **RECAPITULATION OF MITIGATION FEATURES For Bldg B, 1111 N Bayshore Blvd, Units 1-12, 15**

1. Building Code: Unknown or does not meet the requirements of Answer A or B

Comments: The year of construction was verified as 1973 per Pinellas County

Property Appraiser.

2. Roof Covering: FBC Equivalent

Comments: The roof covering was replaced in 2019. The roof permit was

confirmed and the permit number is BCP2019-050869. This roof was verified as meeting the building code requirements outlined on the

mitigation affidavit.

3. Roof Deck Attachment: Level C

Comments: Inspection verified 1/2" plywood roof deck attached with 8d nails at a

minimum 6" on the edge & 6" in the field.

4. Roof to Wall No Attic Access

Attachment:

Comments: At time of inspection there was no attic access.

5. Roof Geometry: Other Roof

Comments: Inspection verified a gable roof shape.

6. SWR: Yes

Comments: SWR was verified at time of inspection. The Secondary Water

Resistance verified is a self-adhering peel and stick.

7. Opening Protection: None or Some Glazed Openings

Comments: Inspection verified some opening protection. Not all glazed openings

were protected with impact resistant coverings.

**Address Verification** 



**Exterior Elevation** 



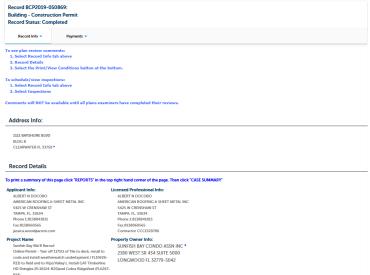




**Exterior Elevation** 

Roof Permit Information







**Roof Construction** 



**Roof Construction** 





**Roof Construction** 

**Roof Construction** 







## SUPPORTING DOCUMENTION OF WINDSTORM MITIGATION FEATURES LOCATED AT: Bldg B, 1111 N Bayshore Blvd, Units 1-12, 15

FPAT File #MUD2525702



#### **Uniform Mitigation Verification Inspection Form**

Maintain a cor	by of this	form and an	y documentation	provided w	vith the insuranc	e policy

Inspection Date: 11-05-2025								
Owner Information								
Owner Name: Sunfish Bay Condominium Association, Inc.  Contact Person: Jenny Kidd								
Address: Bldg B, 1111 N Bayshore Blvd, U	nits 1-12, 15	Home Phone:						
City: Clearwater Zip: 33759		Work Phone: (727) 726-8000						
County: Pinellas	Cell Phone:							
Insurance Company: Policy #:								
Year of Home: 1973	# of Stories: 2	Email: jkidd@ameritechmail.com						

acc	ompany this form. At least one plugh 7. The insurer may ask addit	notograph must acc	company this form	to validate each attribute m	arked in questions 3
[] 4	Building Code: Was the structure the HVHZ (Miami-Dade or Browar A. Built in compliance with the FBC 3/1/2002: Building Permit App. B. For the HVHZ Only: Built in comprovide a permit application with C. Unknown or does not meet the	d counties), South F : Year Built . For I lication Date (MM/DD/) apliance with the SF th a date after 9/1/19	Torida Building Coo nomes built in 2002 (YYYY) BC-94: Year Built 1994: Building Permi	de (SFBC-94)? /2003 provide a permit application. For homes built in 1	994, 1995, and 1996
	Roof Covering: Select all roof covering of Original Installation/Recovering identified.				mpliance for each roof
	2.1 Roof Covering Type:	Permit Application Date	FBC or MDC Product Approval #	Year of Original Installation or Replacement	No Information Provided for Compliance
	[X] 1. Asphalt/Fiberglass Shingle  [] 2. Concrete/Clay Tile  [] 3. Metal  [] 4. Built Up  [] 5. Membrane  [] 6. Other	05-24-2019		2019	0 0 0 0 0
	<ul> <li>A. All roof coverings listed above installation OR have a roofing</li> <li>B. All roof coverings have a Miamipermit application after 9/1/19</li> <li>C. One or more roof coverings do not not not coverings meet the requirement.</li> </ul>	permit application of Dade Product Appr 94 and before 3/1/20 of meet the requirem	date on or after 3/1/0 roval listing current 002 OR the roof is onents of Answer "A"	02 OR the roof is original and at time of installation OR (for original and built in 1997 or la	built in 2004 or later. the HVHZ only) a roofing
	Roof Deck Attachment: What is the A. Plywood/Oriented strand board of staples or 6d nails spaced at 6" a -OR- Any system of screws, nuplift less than that required for B. Plywood/OSB roof sheathing was a stranger of the st	(OSB) roof sheathin long the edge and 12 ails, adhesives, othe Options B or C belo	g attached to the ro 2" in the fieldOR- er deck fastening sy ow.	of truss/rafter (spaced a maxis Batten decking supporting wo stem or truss/rafter spacing the	od shakes or wood shingles nat has an equivalent mean

- 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.
- [X] 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	H	Property	Address	Bldg B.	1111 N	Bavshore	Blvd.	Units	1-12.	15.	Clearwater
inspectors initials.		r r oper cj		<u></u>		Bu j bii e i e	221.00,	0 11110	·,	,	CICUI WILLIAM

<sup>\*</sup>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.

	or greater resistance than 8d common halfs spaced a maximum of 6 inches in the field or has a mean upifit resistance of at least
гл	182 psf.  D. Painforced Concrete Boof Dook
	D. Reinforced Concrete Roof Deck. E. Other:
Ц	F. Unknown or unidentified.
	G. No attic access.
4.	<b>Roof to Wall Attachment:</b> What is the <u>WEAKEST</u> 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, <b>and</b> []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 <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
П	B. Clips
	[] Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b> [] 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
ГΊ	minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.  D. Double Wraps
IJ	[] 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, <b>or</b>
	[] 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.
	<ul><li>E. Structural Anchor bolts structurally connected or reinforced concrete roof.</li><li>F. Other:</li></ul>
	G. Unknown or unidentified
	() H. No attic access
_	
5.	<b>Roof Geometry:</b> 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: ; Total roof system perimeter:
[]	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
[>	K] C. Other Roof  Any roof that does not qualify as either (A) or (B) above.
,	Consider Water Decates (CWD), (4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,
	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
<b>-</b>	from water intrusion in the event of roof covering loss.
	B. No SWR.
IJ	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			Glazed O	Non-Glazed Openings			
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.			Garage Doors	Skylights	Glass Block	Entry Doors	Garage Doors
N/A	Not Applicable- there are no openings of this type on the structure		Х	Х	Х		Χ
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
	Opening Protection products that appear to be A or B but are not verified						
N	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Χ				Х	

- 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
- [] <u>C. Exterior Opening Protection- Wood Structural Panels meeting FBC 2007</u> All Glazed openings are covered with plywood/OSB meeting the requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
  - ☐ C.1 All Non-Glazed openings classified as A, B, or C in the table above, or no Non-Glazed openings exist
  - ☐ C.2 One or More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level N or X in the table above
  - C.3 One or More Non-Glazed openings is classified as Level N or X in the table above

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P.	ΑТ	File	#MU	ID2	52	57	02

[] N. Exterior Opening Protection (unverified shutter syst	ems with no documentati	ion) All	Glazed openings are protected with					
protective coverings not meeting the requirements of "B" with no documentation of compliance (Level N i		r systems	s that appear to meet Answer "A" or					
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 Leve	l X in the table above							
[X] X. None or Some Glazed Openings One or more Glazed	openings classified and Lev	el X in tl	ne table above.					
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi	~							
Qualified Inspector Name: John Felten	License Type: CBC	wno muj	License or Certificate #: CBC1255984					
Inspection Company: Felten Property Assessment Team		Phone:	866-568-7853					
Qualified Inspector – I hold an active license as a:	(check one)		_					
☐ Home inspector licensed under Section 468.8314, Florida Statute:	· ·	orv numb	er of hours of hurricane mitigation					
training approved by the Construction Industry Licensing Board a			or or nears or narroune margarion					
<ul> <li>□ Building code inspector certified under Section 468.607, Florida</li> <li>□ General, building or residential contractor licensed under Section</li> </ul>								
☐ Professional engineer licensed under Section 471.015, Florida Sta	itutes.							
☐ Professional architect licensed under Section 481.213, Florida Sta	itutes.							
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 S	Section 489.111, Florida St	atutes, o	or professional engineer licensed					
under Section 471.015, Florida Statues, must inspect the str								
<u>Licensees under s.471.015 or s.489.111 may authorize a direction experience to conduct a mitigation verification inspection.</u>	ct employee who possesses	s the req	uisite skill, knowledge, and					
	n 6 1.1	•						
I, <u>John Felten</u> am a qualified inspector and I contractors and professional engineers only) I had my emplo								
and I agree to be responsible for his/her work.	yee ( <u>joshua i terson</u> ) peri	ioi iii tiic	inspection					
, , , , ,								
R. H.								
Qualified Inspector Signature:Date	e: <u>11-05-2025</u>							
An individual or entity who knowingly or through gross neg								
is subject to investigation by the Florida Division of Insuran appropriate licensing agency or to criminal prosecution. (See								
certifies this form shall be directly liable for the misconduct								
performed the inspection.								
Homeowner to complete: I certify that the named Qualifie residence identified on this form and that proof of identification								
Signature:	Signature: Date:							
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 huminous	e used to certify any product or o	constructio	on feature as offering protection from					

hurricanes.

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OIR-B1-1802 (Rev. 01/12) Adopted by Rule 69O-170.0155

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