

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



Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



## Felten Property Assessment Team

#### **CERTIFICATION OF WINDSTORM MITIGATION AFFIDAVIT(S)**

This is to certify the enclosed Windstorm Mitigation Inspection report prepared for Crystal Bay Condominium Association, Inc. is the result of work performed by Felten Property Assessment Team and one or more of the individuals listed below.

In addition, we certify that, to the best of our knowledge and belief:

- > All facts contained in this report are true and accurate.
- > FPAT has no present or prospective interest in the subject property of this report, and also has no personal interest with respect to the parties involved.
- > FPAT has no bias with respect to the subject property of this report or to the parties involved with this assignment.
- Our engagement in this assignment was not contingent upon producing or reporting predetermined results.
- Our compensation is not contingent on any action or event resulting from this report.
- We have the knowledge and experience to generate accurate windstorm mitigation affidavit(s) for insurance purposes on all buildings contained within this report.
- We have performed a physical inspection of the subject risk(s) contained in this report.
- ➤ This report meets or exceeds the standards of the Citizens Inspection Outreach Program.

#### <u>Key Staff:</u>

#### **Brad Felten**

Sr. Adjuster # E149535
Flood Certification # 06060373
Certified Wind & Hurricane Mitigation
Inspector

#### Ian Wright

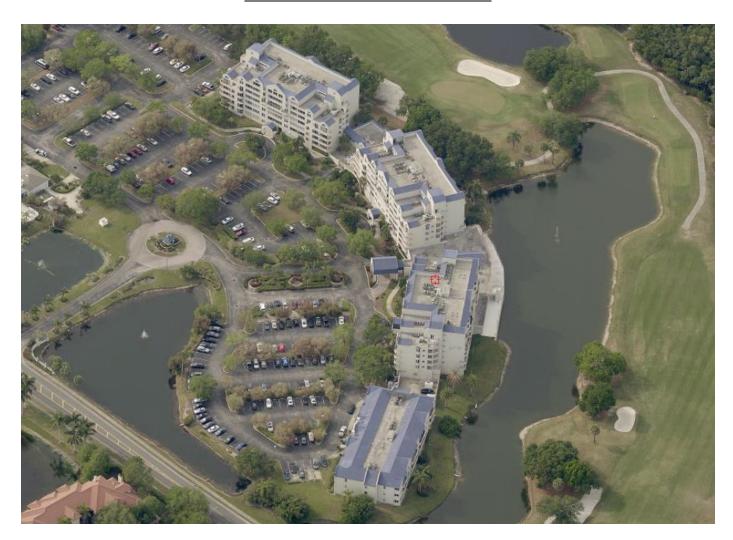
Sr. Adjuster # W273704 Certified Wind & Hurricane Mitigation Inspector

#### John Felten

Sr. Adjuster # D075772 Flood Certification # 05030007 Certified Building Contractor # CBC1255984 Certified Wind & Hurricane Mitigation Inspector

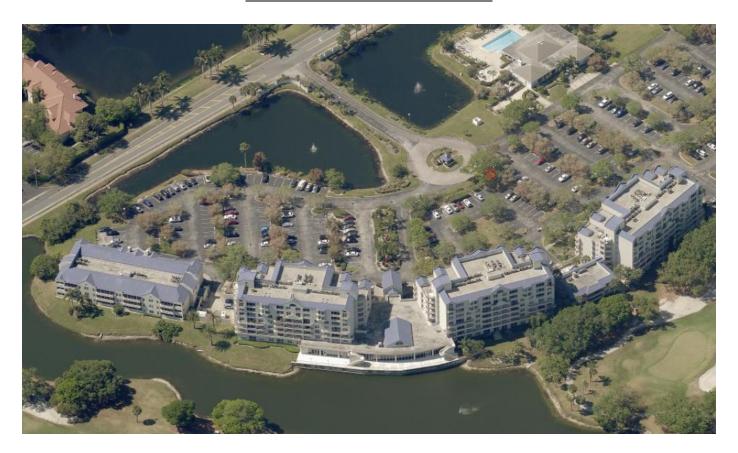


## **AERIAL MAPS OF PROPERTY**





### **AERIAL MAPS OF PROPERTY**





#### **OIR-B1-1802 RECAPITULATION OF BUILDING MITIGATION FEATURES**

#### Crystal Bay Condominium

Building	Roof Covering	Roof Deck Attachment	Roof-Wall Attachment	Roof Shape	SWR	Opening Protection
Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709	meet the minimum	Reinforced Concrete Roof Deck	Structural	Other Roof	No	None or Some Glazed Openings
Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601- 610, 701-709	meet the minimum	Reinforced Concrete Roof Deck	Structural	Other Roof	No	None or Some Glazed Openings
Building C, 2333 Feather Sound Dr, Units 101-109, 201-511, 601- 610, 701-709	meet the minimum	Reinforced Concrete Roof Deck	Structural	Other Roof	No	None or Some Glazed Openings
Building E, 2333 Feather Sound Dr, Units 101-103, 201-203	meet the minimum	Reinforced Concrete Roof Deck	Structural	Other Roof	No	None or Some Glazed Openings
Building F, 2323 Feather Sound Dr, Units 101-108, 201-310	No roof coverings meet the minimum requirements	Level C	Clips	Other Roof	No	None or Some Glazed Openings



#### MIT-BT-II & III RECAPITULATION OF BUILDING MITIGATION FEATURES

#### Crystal Bay Condominium

Building	Roof Covering	Roof Deck Attachment	SWR	Opening Protection
Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601- 610, 701-709	meet the minimum		No	None or Some Glazed Openings
Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601- 610, 701-709	meet the minimum		No	None or Some Glazed Openings
Building C, 2333 Feather Sound Dr, Units 101-109, 201-511, 601- 610, 701-709	meet the minimum		No	None or Some Glazed Openings





## RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



## Windstorm Mitigation Report (OIR-B1-1802)

Crystal Bay Condominium Association, Inc.

Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

Clearwater, FL 33762

Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



## Felten Property Assessment Team

# RECAPITULATION OF MITIGATION FEATURES For Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

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

Comments: The year of construction was verified as 1988 per Pinellas County

Property Appraiser.

2. Roof Covering: No roof coverings meet the minimum requirements

Comments: The pitched roof covering was replaced in 2002. The roof permit was

confirmed and the permit number is PER-H-CB247864. The flat roof covering was replaced in 2001. The roof permit was confirmed and the permit number is PER-H-CB247160. This roof was verified as not meeting the building code requirements outlined on the mitigation affidavit.

3. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

4. Roof to Wall Structural

Attachment:

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

5. Roof Geometry: Other Roof

Comments: The roof shape is made up of a combination of flat and pitched sections.

The pitched area of the roof comprises approximately 32% of the total

roof area.

6. SWR: No

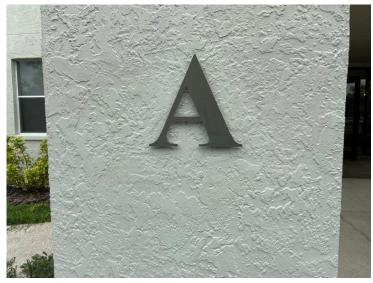
Comments: No SWR verified.

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** 







**Roof Construction** 







**Roof Construction** 





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

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

Inspection Date: 3/10/2022		
Owner Information		
Owner Name: Crystal Bay Condominium A	Contact Person: Beverly Neubecker	
Address: Building A, 2333 Feather Sound	Home Phone:	
City: Clearwater	Zip: 33762	Work Phone: (727) 726-8000 x302
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 1988	# of Stories: 7	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.	<b>Building Code</b> : Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
X	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	Provided for Compliance
[] 1. Asphalt/Fiberglass Shingle				
[] 2. Concrete/Clay Tile				[]
[X] 3. Metal	1/15/2002			[]
[] 4. Built Up				[]
[] 5. Membrane				[]
[X] 6. Other Polyurethane foam	12/28/2001			

- [] 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".
- [X] 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 fiel 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	H	Property Address Buildin	1g A	, 2333	3 Feather	Sound Dr.	Units	101-107,	201-511,	601-610,	701-709,
Clearwater			•								

<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.

182 psf.	
[X] D. Reinforced Co	oncrete Roof Deck.
[] E. Other:	1
<ul><li>F. Unknown or union</li><li>G. No attic access.</li></ul>	dentified.
4. Roof to Wall Attac	<b>chment:</b> What is the <b>WEAKEST</b> roof to wall connection? (Do not include attachment of hip/valley jacks within or outside corner of the roof in determination of WEAKEST type)
[] A. Toe Nails	
top p	uss/rafter anchored to top plate of wall using nails driven at an angle through the truss/rafter and attached to the plate of the wall, or
[] Me	etal connectors that do not meet the minimal conditions or requirements of B, C, or D
	s to qualify for categories B, C, or D. All visible metal connectors are:
	cured to truss/rafter with a minimum of three (3) nails, <b>and</b> ached 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.
B. Clips	
[] Me posit	etal connectors that do not wrap over the top of the truss/rafter, <b>or</b> etal connectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail ion 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	imminum of 2 hans on the front side and a minimum of 1 han on the opposing side.
[] Me beam minii [] Me both	etal Connectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond in, on either side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a mum of 2 nails on the front side, and a minimum of 1 nail on the opposing side, or etal connectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on sides, and is secured to the top plate with a minimum of three nails on each side. hor bolts structurally connected or reinforced concrete roof.
F. Other:	
[] G. Unknown or uni	dentified
[] H. No attic access	
	What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of ver 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
[X] C. Other Roof	Any roof that does not qualify as either (A) or (B) above.
[] A. SWR (also calle sheathing or fe	Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) d Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling trusion in the event of roof covering loss.
[] C. Unknown or und	letermined.

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

Inspectors Initials Property Address Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709, Clearwater

\*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.

	ening Protection Level Chart		Glazed O <sub>l</sub>	oenings	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	Χ		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						
N	Opening Protection products that appear to be A or B but are not verified						
IV	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Χ				Χ	·

- [] 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

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

For Skylights Olly. ASTWE 1800 and ASTWE 1990
<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
☐ 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 <u>and</u> 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

Inspectors Initials Property Address Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709, Clearwater

the table above

<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.

#### FPAT File #MIT2216222

[] <u>N. I</u>	Exterior Opening Protection (unverified shutter sys protective coverings not meeting the requirements of			
	"B" with no documentation of compliance (Level N	in the table above).	·	
	N.1 All Non-Glazed openings classified as Level A, B, C, o	r N in the table above, or no No	on-Glazed	openings exist
	N.2 One or More Non-Glazed openings classified as Level I table above	D in the table above, and no No	n-Glazed	openings classified as Level X in the
	N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above		
[X] <u>X.</u>	None or Some Glazed Openings One or more Glazed	openings classified and Lev	el X in the	he table above.
	MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov	~		
Quali	fied Inspector Name: John Felten	License Type: CBC		License or Certificate #: CBC1255984
Inspe	ction Company: Felten Property Assessment Team		Phone:	866-568-7853
Quali	fied Inspector – I hold an active license as a	: (check one)		
П Но	me inspector licensed under Section 468.8314, Florida Statute ning approved by the Construction Industry Licensing Board	s who has completed the statut		er of hours of hurricane mitigation
	ilding code inspector certified under Section 468.607, Florida neral, building or residential contractor licensed under Section			
□ Pro	fessional engineer licensed under Section 471.015, Florida Sta	atutes.		
□ Pro	fessional architect licensed under Section 481.213, Florida Sta	atutes.		
	y other individual or entity recognized by the insurer as possessification form pursuant to Section 627.711(2), Florida Statutes		ns to prop	erly complete a uniform mitigation
	uals other than licensed contractors licensed under			
License	Section 471.015, Florida Statues, must inspect the strees under s.471.015 or s.489.111 may authorize a director conduct a mitigation verification inspection.			
	John Felten am a qualified inspector and leters and professional engineers only) I had my employere to be responsible for his/her work.			
Oualifi	ed Inspector Signature: Dat	e: 3/10/2022		
Quann	eu inspector Signature.	c. <u>3/ 10/ 2022</u>		
is subje	ividual or entity who knowingly or through gross neg ect to investigation by the Florida Division of Insuran	nce Fraud and may be sub	ject to a	dministrative action by the
	oriate licensing agency or to criminal prosecution. (So s this form shall be directly liable for the misconduct			
	ned the inspection.	t of employees as if the aut	<u>norizeu</u>	initigation hispector personany
	<b>eowner to complete:</b> I certify that the named Qualification nee identified on this form and that roof of identification			
		·		-
Signa	iture:	Date:		
obtaiı	dividual or entity who knowingly provides or utters n or receive a discount on an insurance premium to v meanor of the first degree. (Section 627.711(7), Flori	which the individual or ent		
The define	nitions on this form are for inspection purposes only and cannot bes.	e used to certify any product or o	constructio	on feature as offering protection from
Inspect Clearw	tors Initials Property Address Building A, 2333	3 Feather Sound Dr, Units 10	01-107, 2	201-511, 601-610, 701-709,

\*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.

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



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



## Windstorm Mitigation Report (OIR-B1-1802)

Crystal Bay Condominium Association, Inc.

Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

Clearwater, FL 33762

Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



## Felten Property Assessment Team

866.568.7853 | www.fpat.com

# RECAPITULATION OF MITIGATION FEATURES For Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

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

Comments: The year of construction was verified as 1988 per Pinellas County

Property Appraiser.

2. Roof Covering: No roof coverings meet the minimum requirements

Comments: The age of the roof covering is unknown. No permit information was

found with the local building department or provided by the association. If additional information becomes available, this report will be revised.

3. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

4. Roof to Wall Structural

Attachment:

701-709

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

5. Roof Geometry: Other Roof

Comments: The roof shape is made up of a combination of flat and pitched sections.

The pitched area of the roof comprises approximately 32% of the total

roof area.

6. SWR: No

Comments: No SWR verified.

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** 







**Roof Construction** 







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

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

Inspection Date: 3/10/2022	*	<u> </u>
Owner Information		
Owner Name: Crystal Bay Condominium A	Association, Inc.	Contact Person: Beverly Neubecker
Address: Building B, 2333 Feather Sound	Dr, Units 101-107, 201-511, 601-610, 701-	Home Phone:
City: Clearwater	Zip: 33762	Work Phone: (727) 726-8000 x302
County: Pinellas		Cell Phone:
Insurance Company:		Policy #:
Year of Home: 1988	# of Stories: 7	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.	<b>Building Code</b> : Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
X	[1] 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	Provided for Compliance
[] 1. Asphalt/Fiberglass Shingle				
[] 2. Concrete/Clay Tile				[]
[X] 3. Metal				[X]
[] 4. Built Up				[]
[] 5. Membrane				[]
[X] 6. Other Polyurethane foam				[X]

- [] 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".
- [X] 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 fiel 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 Property Address Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709, Clearwater

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182 psf.	
[X] D. Reinforced	d Concrete Roof Deck.
[] E. Other:	
F. Unknown or	
[] G. No attic acce	ess.
5 feet of the ins	Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within side 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
t	op plate of the wall, or
	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	itions 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.
B. Clips	of ording of dussification and offorced no more than 1.5 of the dussification, and free of visione severe correspond
	Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>
ŗ	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 Wrap	
	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 Wra	•
t r [	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.
[X] E. Structural. [] F. Other:	Anchor bolts structurally connected or reinforced concrete roof.
[] F. Other. [] G. Unknown of	r unidentified
H. No attic acce	
	<b>Y:</b> What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of are 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
[X] C. Other Roo	
5. <b>Secondary W</b> a	ater Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
sheathing	called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling print region in the quant of roof according loss.
[X] B. No SWR.	er intrusion in the event of roof covering loss.
[A] B. NOSWK. [] C. Unknown or	undetermined.

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

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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		Х	Х	Χ		Х
Α	Verified cyclic pressure & large missile (9-lb for windows doors/4.5 lb for skylights)						
В	Verified cyclic pressure & large missile (4-8 lb for windows doors/2 lb for skylights)						
С	Verified plywood/OSB meeting Table 1609.1.2 of the FBC 2007						
D	Verified Non-Glazed Entry or Garage doors indicating compliance with ASTM E 330, ANSI/DASMA 108, or PA/TAS 202 for wind pressure resistance						
N	Opening Protection products that appear to be A or B but are not verified						
IN	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Χ				Χ	

- [] 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 Skylights Only: ASTM E 1886 <b>and</b> ASTM E 1996
	•	For Garage Doors Only: ANSI/DASMA 115
	☐ A.1 All No	n-Glazed openings classified as A in the table above, or no Non-Glazed openings exist
		More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level B, C, N, table above
	☐ A.3 One or	More Non-Glazed Openings is classified as Level B, C, N, or X in the table above
[] <u>B.</u>	are protec product ap	ening Protection- Cyclic Pressure and 4 to 8-lb Large Missile (2-4.5 lb for skylights only) All Glazed openings ted, at a minimum, with impact resistant coverings or products listed as windborne debris protection devices in the opproval system of the State of Florida or Miami-Dade County and meet the requirements of one of the following for ressure 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 No	n-Glazed openings classified as A or B in the table above, or no Non-Glazed openings exist
	☐ B.2 One or in the table	More Non-Glazed openings classified as Level D in the table above, and no Non-Glazed openings classified as Level C, N, or $X$ above
	☐ B.3 One or	More Non-Glazed openings is classified as Level C, N, or X in the table above
[] <u>C.</u>		ning Protection- Wood Structural Panels meeting FBC 2007 All Glazed openings are covered with plywood/OSB ne requirements of Table 1609.1.2 of the FBC 2007 (Level C in the table above).
	☐ C.1 All No	n-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

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

the table above

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[] <u>N. I</u>	Exterior Opening Protection (unverified shutter sys protective coverings not meeting the requirements of					
	"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 Leve	el X in the table above				
[X] <u>X.</u>	None or Some Glazed Openings One or more Glazed	openings classified and Lev	el X in the	he table above.		
	MITIGATION INSPECTIONS MUST I Section 627.711(2), Florida Statutes, prov	~				
Quali	fied Inspector Name: John Felten	License Type: CBC		License or Certificate #: CBC1255984		
Inspe	ction Company: Felten Property Assessment Team		Phone:	866-568-7853		
Quali	fied Inspector – I hold an active license as a	: (check one)				
П Но	me inspector licensed under Section 468.8314, Florida Statute ning approved by the Construction Industry Licensing Board	s who has completed the statut		er of hours of hurricane mitigation		
	ilding code inspector certified under Section 468.607, Florida neral, building or residential contractor licensed under Section					
□ Pro	fessional engineer licensed under Section 471.015, Florida Sta	atutes.				
□ Pro	fessional architect licensed under Section 481.213, Florida Sta	atutes.				
	y other individual or entity recognized by the insurer as possessification form pursuant to Section 627.711(2), Florida Statutes		ns to prop	erly complete a uniform mitigation		
	uals other than licensed contractors licensed under					
License	Section 471.015, Florida Statues, must inspect the strees under s.471.015 or s.489.111 may authorize a director conduct a mitigation verification inspection.					
	am a qualified inspector and letors and professional engineers only) I had my employere to be responsible for his/her work.					
Oualifi	ed Inspector Signature: Dat	e: 3/10/2022				
Quann	eu inspector Signature.	c. <u>3/ 10/ 2022</u>				
is subje	ividual or entity who knowingly or through gross ne ect to investigation by the Florida Division of Insuran	nce Fraud and may be sub	ject to a	dministrative action by the		
	oriate licensing agency or to criminal prosecution. (So					
	s this form shall be directly liable for the misconduct ned the inspection.	t of employees as if the aut	norizea	mitigation inspector personally		
	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 roof of identification was provided to me or my Authorized Representative.					
		·		-		
Signa	ture:	Date:				
obtaiı	dividual or entity who knowingly provides or utters an or receive a discount on an insurance premium to verneanor of the first degree. (Section 627.711(7), Flori	which the individual or ent				
The define	nitions on this form are for inspection purposes only and cannot bes.	e used to certify any product or o	constructio	on feature as offering protection from		
Inspect Clearw	tors Initials Property Address Building B, 2333	3 Feather Sound Dr, Units 10	01-107, 2	201-511, 601-610, 701-709,		

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## RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



Prepared Exclusively for Crystal Bay Condominium Association, Inc.

Clearwater, FL 33762

As of 3/10/2022 | FPAT File# MIT2216222



## Felten Property Assessment Team

866.568.7853 | www.fpat.com

701-709

## RECAPITULATION OF MITIGATION FEATURES For Building C, 2333 Feather Sound Dr, Units 101-109, 201-511, 601-610, 701-709

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

Comments: The year of construction was verified as 1988 per Pinellas County

Property Appraiser.

2. Roof Covering: No roof coverings meet the minimum requirements

Comments: The age of the roof covering is unknown. No permit information was

found with the local building department or provided by the association. If additional information becomes available, this report will be revised.

3. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

4. Roof to Wall Structural

Attachment:

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

5. Roof Geometry: Other Roof

Comments: The roof shape is made up of a combination of flat and pitched sections.

The pitched area of the roof comprises approximately 32% of the total

roof area.

6. SWR: No

Comments: No SWR verified.

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** 















**Roof Construction** 





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

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

<u> </u>						
Inspection Date: 3/10/2022						
Owner Information						
Owner Name: Crystal Bay Condominium A	Owner Name: Crystal Bay Condominium Association, Inc.  Contact Person: Beverly Neubecker					
Address: Building C, 2333 Feather Sound	Home Phone:					
City: Clearwater	Zip: 33762	Work Phone: (727) 726-8000 x302				
County: Pinellas		Cell Phone:				
Insurance Company:		Policy #:				
Year of Home: 1988	# of Stories: 7	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.	<b>Building Code</b> : Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
[]	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
ſΧ	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				
[] 2. Concrete/Clay Tile				[]
[X] 3. Metal				[X]
[] 4. Built Up				[]
[] 5. Membrane				[]
[X] 6. Other Polyurethane foam				[X]

- [] 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".
- [X] 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 fiel 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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182 psf.	
[X] D. Reinforced	d Concrete Roof Deck.
[] E. Other:	
F. Unknown or	
[] G. No attic acce	ess.
5 feet of the ins	Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within side 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
t	op plate of the wall, or
	Metal connectors that do not meet the minimal conditions or requirements of B, C, or D
	itions 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.
B. Clips	of ording of dussification and offorced no more than 1.5 of the dussification, and free of visione severe correspond
	Metal connectors that do not wrap over the top of the truss/rafter, <b>or</b>
ŗ	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 Wrap	
	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 Wra	•
t r [	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.
[X] E. Structural. [] F. Other:	Anchor bolts structurally connected or reinforced concrete roof.
[] F. Other. [] G. Unknown of	r unidentified
H. No attic acce	
	<b>Y:</b> What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of are 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
[X] C. Other Roo	
5. <b>Secondary W</b> a	ater Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
sheathing	called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the or foam adhesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling print region in the quant of roof according loss.
[X] B. No SWR.	er intrusion in the event of roof covering loss.
[A] B. NOSWK. [] C. Unknown or	undetermined.

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

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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		Х	Х	Χ		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						
N	Opening Protection products that appear to be A or B but are not verified						
IV	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Χ				Χ	·

- [] 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
  - ulletFlorida 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

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

	<ul> <li>For Skylights Only: ASTM E 1886 <u>and</u> ASTM E 1996</li> </ul>
	• 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
	$\square$ 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
[] <u>B.</u> ]	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 <u>and</u> 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.1</u>	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

**Inspectors Initials** Clearwater

the table above

inaccuracies found on the form.

Property Address Building C, 2333 Feather Sound Dr, Units 101-109, 201-511, 601-610, 701-709,

☐ 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

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#### FPAT File #MIT2216222

[] N. Exterior Opening Protection (unverified shutter system protective coverings not meeting the requirements of a "B" with no documentation of compliance (Level N in	Answer "A", "B", or C" or syste						
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.1 An 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] X. None or Some Glazed Openings One or more Glazed openings classified and Level X in the table above.							
MITIGATION INSPECTIONS MUST BI Section 627.711(2), Florida Statutes, provid	~						
Qualified Inspector Name: John Felten License Type: CBC License or Certificate #: CBC1255984							
Inspection Company: Felten Property Assessment Team	Phor	ne: 866-568-7853					
Qualified Inspector – I hold an active license as a:	(check one)						
Home inspector licensed under Section 468.8314, Florida Statutes training approved by the Construction Industry Licensing Board ar	who has completed the statutory nur						
<ul> <li>☐ Building code inspector certified under Section 468.607, Florida S</li> <li>☐ General, building or residential contractor licensed under Section 4</li> </ul>							
$\hfill \Box$ Professional engineer licensed under Section 471.015, Florida Stat	utes.						
Professional architect licensed under Section 481.213, Florida Stat							
Any other individual or entity recognized by the insurer as possess verification form pursuant to Section 627.711(2), Florida Statutes.		roperly complete a uniform mitigation					
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,							
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 roof of identification was provided to me or my Authorized Representative.							
Signature: Date:							
An individual or entity who knowingly provides or utters a	folso or fraudulant mitigation	varification form with the intent to					
obtain or receive a discount on an insurance premium to wl misdemeanor of the first degree. (Section 627.711(7), Florid	hich the individual or entity is						
The definitions on this form are for inspection purposes only and cannot be hurricanes.	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						
Inspectors Initials Property Address Building C, 2333	Feather Sound Dr. Units 101-109	o, 201-511, 601-610, 701-709,					

\*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.

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

Clearwater



### RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



Prepared Exclusively for Crystal Bay Condominium Association, Inc.

Clearwater, FL 33762

As of 3/10/2022 | FPAT File# MIT2216222



Felten Property Assessment Team

866.568.7853 | www.fpat.com

## RECAPITULATION OF MITIGATION FEATURES For Building E, 2333 Feather Sound Dr, Units 101-103, 201-203

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

Comments: The year of construction was verified as 1988 per Pinellas County

Property Appraiser.

2. Roof Covering: No roof coverings meet the minimum requirements

Comments: The age of the roof covering is unknown. No permit information was

found with the local building department or provided by the association. If additional information becomes available, this report will be revised.

3. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

4. Roof to Wall Structural

Attachment:

Comments: Inspection verified a roof structure composed of cast-in-place or pre-cast

structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

5. Roof Geometry: Other Roof

Comments: The roof shape is made up of a combination of flat and pitched sections.

The flat area of the roof comprises approximately 52% of the total roof

area.

6. SWR: No

Comments: No SWR verified.

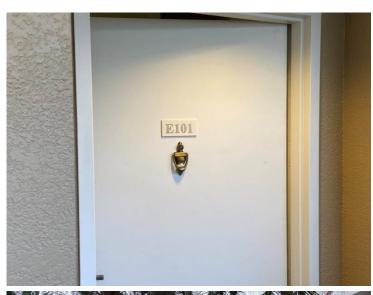
7. Opening Protection: None or Some Glazed Openings

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

were protected with impact resistant coverings.

Address Verification









**Roof Construction** 

**Roof Construction** 









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

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

Inspection Date: 3/10/2022				
Owner Information				
Owner Name: Crystal Bay Condomin	Contact Person: Beverly Neubecker			
Address: Building E, 2333 Feather Sound Dr, Units 101-103, 201-203		Home Phone:		
City: Clearwater Zip: 33762		Work Phone: (727) 726-8000 x302		
County: Pinellas		Cell Phone:		
Insurance Company:	•	Policy #:		
Year of Home: 1988 # 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.	<b>Building Code</b> : Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
[]	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
ſΧ	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	Provided for Compliance
[] 1. Asphalt/Fiberglass Shingle				
[] 2. Concrete/Clay Tile				[]
[X] 3. Metal				[X]
[] 4. Built Up				[]
[] 5. Membrane				[]
[X] 6. Other Polyurethane foam				[X]

- [] 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".
- [X] 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 fiel 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 Property Address Building E, 2333 Feather Sound Dr, Units 101-103, 201-203, Clearwater

<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.

182 psi.	
[X] D. Reinforced Concrete I	Roof Deck.
<ul><li>[] E. Other:</li><li>[] F. Unknown or unidentifie</li></ul>	d
G. No attic access.	u.
4. Roof to Wall Attachment	What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within de corner of the roof in determination of WEAKEST type)
[] Truss/raft top plate of	
[] Metal con	nectors that do not meet the minimal conditions or requirements of B, C, or D
	alify for categories B, C, or D. All visible metal connectors are:
[]Attached to	truss/rafter with a minimum of three (3) nails, <b>and</b> of the wall top plate of the wall framing, or embedded in the bond beam, with less than a ½" gap from the king or truss/rafter <b>and</b> blocked no more than 1.5" of the truss/rafter, <b>and</b> free of visible severe corrosion.
-	nectors that do not wrap over the top of the truss/rafter, <b>or</b>
[] Metal con	nectors with a minimum of 1 strap that wraps over the top of the truss/rafter and does not meet the nail uirements of C or D, but is secured with a minimum of 3 nails.
C. Single Wraps	
minimu	onnectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with a m of 2 nails on the front side and a minimum of 1 nail on the opposing side.
D. Double Wraps	
beam, on eit	nnectors consisting of 2 separate straps that are attached to the wall frame, or embedded in the bond her side of the truss/rafter where each strap wraps over the top of the truss/rafter and is secured with a 2 nails on the front side, and a minimum of 1 nail on the opposing side, <b>or</b>
both sides, a	nectors consisting of a single strap that wraps over the top of the truss/rafter, is secured to the wall on and is secured to the top plate with a minimum of three nails on each side.
	ts structurally connected or reinforced concrete roof.
<ul><li>[] F. Other:</li><li>[] G. Unknown or unidentifie</li></ul>	
H. No attic access	u
	the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall of nclosed space in the determination of roof perimeter or roof area for roof geometry classification).
	o roof with no other roof shapes greater than 10% of the total roof system perimeter.  cal length of non-hip features: ; Total roof system perimeter:
[] B. Flat Roof Roo	of on a building with 5 or more units where at least 90% of the main roof area has a roof slope of less n 2:12. Roof area with slope less than 2:12: sq ft; Total roof area: sq ft
	y roof that does not qualify as either (A) or (B) above.
[] A. SWR (also called Seale sheathing or foam ad	nnce (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR) d Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the hesive SWR barrier (not foamed-on insulation) applied as a supplemental means to protect the dwelling in the event of roof covering loss.

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

Inspectors Initials Property Address Building E, 2333 Feather Sound Dr, Units 101-103, 201-203, Clearwater

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 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.		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		Х	X	Χ		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						
N	Opening Protection products that appear to be A or B but are not verified						
I N	Other protective coverings that cannot be identified as A, B, or C						
Х	No Windborne Debris Protection	Χ				Χ	

- [] 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

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

• For Skylights Only: ASTM E 1886 <u>and</u> ASTM E 1996
<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
☐ 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 <u>and</u> 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

the table above



Inspectors Initials Property Address Building E, 2333 Feather Sound Dr, Units 101-103, 201-203, Clearwater

☐ 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

\*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.

FPAT File #MIT2216222	FP	$\Delta T$	File	#M	ITT2	21	62	22
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[] N. Exterior Opening Protection (unverified shutter sys protective coverings not meeting the requirements of "B" with no documentation of compliance (Level N is	Answer "A", "B", or C" or	
☐ N.1 All Non-Glazed openings classified as Level A, B, C, o	r N in the table above, or no No	on-Glazed openings exist
☐ N.2 One or More Non-Glazed openings classified as Level I table above	O in the table above, and no No	n-Glazed openings classified as Level X in the
☐ N.3 One or More Non-Glazed openings is classified as Leve	el X in the table above	
$[X] \ \underline{\textbf{X. None or Some Glazed Openings}} \ \text{One or more Glazed}$	openings classified and Lev	el X in the table above.
MITIGATION INSPECTIONS MUST I	BE CERTIFIED BY A QUAL	LIFIED INSPECTOR.
Section 627.711(2), Florida Statutes, prov	ides a listing of individuals	who may sign this form.
Qualified Inspector Name: John Felten	License Type: CBC	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 training approved by the Construction Industry Licensing Board		
<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	atutes.	
☐ Professional architect licensed under Section 481.213, Florida Sta	atutes.	
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes		ns to properly complete a uniform mitigation
Individuals other than licensed contractors licensed under Sunder Section 471.015, Florida Statues, must inspect the structure Licensees under s.471.015 or s.489.111 may authorize a direct experience to conduct a mitigation verification inspection.  I, John Felten am a qualified inspector and licentractors and professional engineers only) I had my employand I agree to be responsible for his/her work.	uctures personally and no ect employee who possesses	t through employees or other persons. s the requisite skill, knowledge, and e inspection or (licensed
Qualified Inspector Signature: Date	e: <u>3/10/2022</u>	
An individual or entity who knowingly or through gross nest is subject to investigation by the Florida Division of Insuran appropriate licensing agency or to criminal prosecution. (Secretifies this form shall be directly liable for the misconduct performed the inspection.	nce Fraud and may be sub ection 627.711(4)-(7), Flori	ject to administrative action by the da Statutes) The Qualified Inspector who
Homeowner to complete: I certify that the named Qualific residence identified on this form and that roof of identification		
Signature:	Date:	
An individual or entity who knowingly provides or utters obtain or receive a discount on an insurance premium to v misdemeanor of the first degree. (Section 627.711(7), Flori	vhich the individual or ent	

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 Property Address Building E, 2333 Feather Sound Dr, Units 101-103, 201-203, Clearwater

\*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.



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



Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



Felten Property Assessment Team

866.568.7853 | www.fpat.com

# RECAPITULATION OF MITIGATION FEATURES For Building F, 2323 Feather Sound Dr, Units 101-108, 201-310

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

Comments: The year of construction was verified as 1994 per Pinellas County

Property Appraiser.

2. Roof Covering: No roof coverings meet the minimum requirements

Comments: The age of the roof covering is unknown. No permit information was

found with the local building department or provided by the association. If additional information becomes available, this report will be revised.

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 Clips

Attachment:

Comments: Inspection verified hurricane clips fastened with a minimum of three

nails.

5. Roof Geometry: Other Roof

Comments: The roof shape is made up of a combination of flat and pitched sections.

The flat area of the roof comprises approximately 25% of the total roof

area.

6. SWR: No

Comments: No SWR verified.

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** 







**Roof Construction** 

**Roof Construction** 







**Roof Construction** 







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

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

Inspection Date: 3/10/2022				
Owner Information				
Owner Name: Crystal Bay Condominium A	Association, Inc.	Contact Person: Beverly Neubecker		
Address: Building F, 2323 Feather Sound Dr, Units 101-108, 201-310		Home Phone:		
City: Clearwater Zip: 33762		Work Phone: (727) 726-8000 x302		
County: Pinellas		Cell Phone:		
Insurance Company:		Policy #:		
Year of Home: 1994	# of Stories: 3	Email:		

NOTE: Any documentation used in validating the compliance or existence of each construction or mitigation attribute must accompany this form. At least one photograph must accompany this form to validate each attribute marked in questions 3 though 7. The insurer may ask additional questions regarding the mitigated feature(s) verified on this form.

1.	<b>Building Code</b> : Was the structure built in compliance with the Florida Building Code (FBC 2001 or later) OR for homes located in
	the HVHZ (Miami-Dade or Broward counties), South Florida Building Code (SFBC-94)?
[]	A. Built in compliance with the FBC: Year Built . For homes built in 2002/2003 provide a permit application with a date after
	3/1/2002: Building Permit Application Date (MM/DD/YYYY)
	B. For the HVHZ Only: Built in compliance with the SFBC-94: Year Built For homes built in 1994, 1995, and 1996
	provide a permit application with a date after 9/1/1994: Building Permit Application Date (MM/DD/YYYY)//
X	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	Provided for Compliance
[] 1. Asphalt/Fiberglass Shingle				[]
[] 2. Concrete/Clay Tile				[]
[X] 3. Metal				[X]
[] 4. Built Up				[]
[] 5. Membrane				[]
[X] 6. Other Polyurethane foam				[X]

- [] 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".
- [X] 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 fiel 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 Property Address Building F, 2323 Feather Sound Dr, Units 101-108, 201-310, Clearwater

<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.

#### **FPAT File #MIT2216222**

	12 psi.
	nforced Concrete Roof Deck.
[] E. Oth	
	known or unidentified.
[] G. No	attic access.
5 feet	to Wall Attachment: What is the <u>WEAKEST</u> roof to wall connection? (Do not include attachment of hip/valley jacks within the inside or outside corner of the roof in determination of WEAKEST type)
[] A. To	
	[] 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
	[] Metal connectors that do not meet the minimal conditions of requirements of B, C, of B
<u>Minin</u>	nal conditions to qualify for categories B, C, or D. All visible metal connectors are:
	[X]Secured to truss/rafter with a minimum of three (3) nails, <b>and</b> [X]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.
[X] B. C	
[A] D. C	[X] 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 nation position requirements of C or D, but is secured with a minimum of 3 nails.
[] C. Sin	gle Wraps
	Metal connectors consisting of a single strap that wraps over the top of the truss/rafter and is secured with minimum of 2 nails on the front side and a minimum of 1 nail on the opposing side.
[] D. Do	uble 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, <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.
	actural Anchor bolts structurally connected or reinforced concrete roof.
[] F. Oth	
	known or unidentified
[] H. No	attic access
	Geometry: What is the roof shape? (Do not consider roofs of porches or carports that are attached only to the fascia or wall out structure over unenclosed space in the determination of roof perimeter or roof area for roof geometry classification).
[] A. Hip	PRoof 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. Fla	
[X] C. O	ther Roof Any roof that does not qualify as either (A) or (B) above.
6 Sagan	dary Water Resistance (SWR): (standard underlayments or hot-mopped felts do not qualify as an SWR)
[] A. SW	(R (also called Sealed Roof Deck) Self-adhering polymer modified-bitumen roofing underlayment applied directly to the heathing 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.
	known or undetermined.

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

Inspectors Initials Property Address Building F, 2323 Feather Sound Dr, Units 101-108, 201-310, Clearwater

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 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		X	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							
N	Opening Protection products that appear to be A or B but are not verified							
IV	Other protective coverings that cannot be identified as A, B, or C							
Х	No Windborne Debris Protection	Χ				Χ	·	

- [] 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 F 1886 and ASTM F 1996

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

1 of Skylights Offly. Als I'M L 1000 and Als I'M L 1770
<ul> <li>For Garage Doors Only: ANSI/DASMA 115</li> </ul>
☐ 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 <u>and</u> 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



the table above

Inspectors Initials Property Address Building F, 2323 Feather Sound Dr, Units 101-108, 201-310, Clearwater

☐ 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

\*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.

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N. Exterior Opening Protection (unverified shutter system) protective coverings not meeting the requirements of "B" with no documentation of compliance (Level N is	Answer "A", "B", or C" o		
☐ N.1 All Non-Glazed openings classified as Level A, B, C, or	N in the table above, or no No	on-Glazed	openings exist
N.2 One or More Non-Glazed openings classified as Level Γ table above	in the table above, and no No	on-Glazed	openings classified as Level X in the
N.3 One or More Non-Glazed openings is classified as Leve	X in the table above		
[X] X. None or Some Glazed Openings One or more Glazed		el X in th	ne table above.
MITIGATION INSPECTIONS MUST B Section 627.711(2), Florida Statutes, provi			
Qualified Inspector Name: John Felten	License Type: CBC		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 Statutes training approved by the Construction Industry Licensing Board a			er of hours of hurricane mitigation
<ul> <li>☐ Building code inspector certified under Section 468.607, Florida S</li> <li>☐ General, building or residential contractor licensed under Section</li> </ul>			
Professional engineer licensed under Section 471.015, Florida Sta	tutes.		
Professional architect licensed under Section 481.213, Florida Sta	tutes.		
Any other individual or entity recognized by the insurer as posses verification form pursuant to Section 627.711(2), Florida Statutes		ns to prop	erly complete a uniform mitigation
Individuals other than licensed contractors licensed under Sunder Section 471.015, Florida Statues, must inspect the structures under s.471.015 or s.489.111 may authorize a dire	uctures personally and no	t through	h employees or other persons.
experience to conduct a mitigation verification inspection.			
I, <u>John Felten</u> am a qualified inspector and I contractors and professional engineers only) I had my emploand I agree to be responsible for his/her work.			
R. A.			
Qualified Inspector Signature: Date	e: <u>3/10/2022</u>		
An individual or entity who knowingly or through gross negits subject to investigation by the Florida Division of Insurant appropriate licensing agency or to criminal prosecution. (Secertifies this form shall be directly liable for the misconduct performed the inspection.	ce Fraud and may be sub ction 627.711(4)-(7), Flori	ject to ad ida Statu	Iministrative action by the tes) The Qualified Inspector who
<b>Homeowner to complete:</b> I certify that the named Qualifier residence identified on this form and that roof of identification	-		
Signature:	Date:		
An individual or entity who knowingly provides or utters a obtain or receive a discount on an insurance premium to w misdemeanor of the first degree. (Section 627.711(7), Florid	hich the individual or ent		

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 Property Address Building F, 2323 Feather Sound Dr, Units 101-108, 201-310, Clearwater

\*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.



### RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



# Windstorm Mitigation Report (MIT-BT II & III)

Crystal Bay Condominium Association, Inc.
Building A, 2333 Feather Sound Dr
Clearwater, FL 33762

Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



# RECAPITULATION OF MITIGATION FEATURES For Building A, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

1. Roof Covering: No roof coverings meet the minimum requirements

Comments: The pitched roof covering was replaced in 2002. The roof permit was

confirmed and the permit number is PER-H-CB247864. The flat roof covering was replaced in 2001. The roof permit was confirmed and the permit number is PER-H-CB247160. This roof was verified as not meeting the building code requirements outlined on the mitigation

affidavit.

2. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-

cast structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

3. SWR: No

Comments: No SWR verified.

4. 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** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



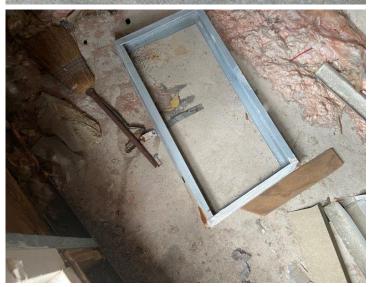
**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 

# CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

This Mitigation Inspection Form must be completed to capture mitigation features applicable to a Type II (4 to 6 story) or Type III (7 or more story) building. This Inspection Form is required for either residential condominium unit owners or commercial residential applicants requesting mitigation credits in such buildings.

WIND LOSS MITIGATION INFORMATION							
PREMISES #:	1	SUBJECT OF INSURANCE: Crystal Bay Condominium Association, Inc.	POLICY#:				
BUILDING #:	1	STREET ADDRESS: Building A, 2333 Feather Sound Dr. Units 101-107, 201-511, 601-610, 701-709, Clearwater,					
# STORIES:	7	BLDG DESCRIPTION:7-Story Residential Condominium Building					
BUILDING TYPE:		[]    (4 to 6 stories)					

Terrain Exposure Category must be provided for each insured location.

I hereby certify that the building or unit at the address indicated above **TERRAIN EXPOSURE CATEGORY** as defined under the Florida Building Code is (Check One): **[X] Exposure C** or **[] Exposure B** 

Certification below for purposes of **TERRAIN EXPOSURE CATEGORY** above does not require personal inspection of the premises.

**Certification of Wind Speed** is required to establish the basic wind speed of the location (Complete for Terrain B only if Year Built On or After Jan. 1, 2002).

I hereby certify that the basic WIND SPEED of the building or unit at the address indicated above based upon county wind speed lines defined under the Florida Building Code (FBC) is (Check One): 

[] ≥100 or [] ≥110 or [X] ≥120

**Certification of Wind Design** is required when the buildings is constructed in a manner to exceed the basic wind speed design established for the structure location (Complete for Terrain B only if Year Built On or After Jan.1, 2002).

I hereby certify that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code (FBC) WIND DESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☐ ≥120

Certification for the purpose of establishing the basic **WIND SPEED or WIND SPEED DESIGN** above does not require personal inspection of the premises.

#### Specify the type of mitigation device(s) installed:

# Roof Covering Material: SPF & Metal Date of Installation: 2001 & 2002 [X] Level A (Non FBC Equivalent) – Type II or III One or more roof coverings that do not meet the FBC Equivalent definition below. [] Level B (FBC Equivalent) – Type II or III Single-Ply, Modified Bitumen, Sprayed Polyurethane foam, Metal, Tile, Built-up, Asphalt Shingle or Rolled Roofing, or other roof covering membranes/products that at a minimum meet the 2001 or later Florida Building Code or the 1994 South Florida Building Code and have a Miami-Dade NOA or FBC 2001 Product Approval listing that is/was current at the time of installation. All mechanical equipment must be adequately tied to the roof deck to resist overturning and sliding during high winds. Any flat roof covering with flashing or coping must be mechanically attached to the structure with face fasteners (no clip/cleat systems), and asphalt roof coverings on flat roofs must be 10 years old or less.

<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.

# CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

FPAT File # MIT2216222

2.	Roof Deck Attachment [] No Attic Access
	Devel A – Wood or Other Deck Type II only
	Roof deck composed of sheets of structural panels (plywood or OSB). <i>Or</i>
	Architectural (non-structural) metal panels that require a solid decking to support weight and loads.  Or
	Other roof decks that do not meet Levels B or C below.
	Devel B – Metal Deck Type II or III
	Metal roof deck made of structural panels fastened to open-web steel bar joists and integrally attached to the wall.
	[X] Level C - Reinforced Concrete Roof Deck Type, II or III A roof structure composed of cast-in-place or pre-cast structural concrete designed to be self-supporting and integrally attached to wall/support system.
3.	Secondary Water Resistance [X] None
	[] Underlayment
	A self-adhering polymer modified bitumen roofing underlayment (thin rubber sheets with peel and stick underside located beneath the roof covering and normal felt underlayment) with a minimum width of 6" meeting the requirements of ASTM D 1970 installed over all plywood/OSB joints to protect from water intrusion. All secondary water resistance products must be installed per the manufacturer's recommendations. Roofing felt or similar paper based products are not acceptable for secondary water resistance.
	Toamed Adhesive
	A foamed polyurethane sheathing adhesive applied over all joints in the roof sheathing to protect interior from water intrusion.
4.	Opening Protection [X] None or Some
	[] Class A (Hurricane Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (9 lb.) impact requirements of:
	□ SSTD12;
	☐ ASTM E 1886 and ASTM E 1996;
	☐ Miami-Dade PA 201, 202, and 203;
	☐ Florida Building Code TAS 201, 202 and 203.
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.
	Class B (Basic Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (4.5 lb.) impact requirements of:
	☐ ASTM E 1886 and ASTM E 1996
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.

<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.

#### CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

**FPAT File #** MIT2216222

#### **CERTIFICATION**

I certify that I hold an active license as a: (CHECK ONE OF THE FOLLOWING)

⊠G	eneral or buil	ding contractor licensed	under Section 489.	111, Florida	Statutes.		
□в	uilding code	inspector certified under	Section 468.607, FI	orida Statut	tes.		
☐ Professional architect licensed under Section 481.213, Florida Statutes.							
Professional engineer licensed under Section 471.015, Florida Statutes.							
	tion Form. In m	sonally inspected the premise y professional opinion, based					
This Mitigation Inspection Form and the information set forth in it are provided solely for the purpose of verifying that certain structural or picharacteristics exist at the Location Address listed above and for the purpose of permitting the Named Insured to receive a property insurance premium discount on insurance provided by Citizens Property Insurance Corporation and for no other purpose. The undersigned does make a health or safety certification or warranty, express or implied, of any kind, and nothing in this Form shall be construed to impose on undersigned or on any entity to which the undersigned is affiliated any liability or obligation of any nature to the named insured or to any oth person or entity.							surance does not e on the
Name of C	ompany:	Felten Property Ass	sessment Team		Phone:	(866)-568-7853	-
Name of In	spector	John Felten	License Type	CBC	License#	CBC1255984	
Inspection	Date:	3/10/2022					
Signature:		RAT.			Date:	3/10/2022	-
Applicant/l Signature*					Date:		
	•				Date.		<u>-</u>

<sup>\*</sup>Applicant /Insured's signature must be from the Board President and another member of the board for condo and homeowner's associations or an officer of the named insured for all other business entities.

<sup>&</sup>quot;Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

<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.



### RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



# Windstorm Mitigation Report (MIT-BT II & III)

Crystal Bay Condominium Association, Inc.
Building B, 2333 Feather Sound Dr
Clearwater, FL 33762

Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



# RECAPITULATION OF MITIGATION FEATURES For Building B, 2333 Feather Sound Dr, Units 101-107, 201-511, 601-610, 701-709

1. Roof Covering: No roof coverings meet the minimum requirements

Comments: The age of the roof covering is unknown. No permit information was

found with the local building department or provided by the

association. If additional information becomes available, this report

will be revised.

2. Roof Deck Attachment: Reinforced Concrete Roof Deck

Comments: Inspection verified a roof structure composed of cast-in-place or pre-

cast structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

3. SWR: No

Comments: No SWR verified.

4. 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



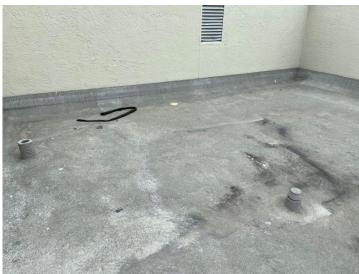
**Exterior Elevation** 



**Roof Construction** 



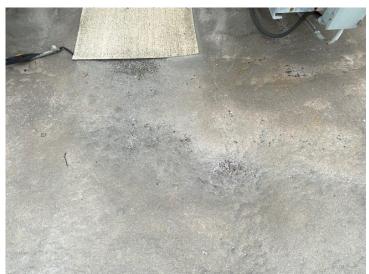
**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 

# CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

This Mitigation Inspection Form must be completed to capture mitigation features applicable to a Type II (4 to 6 story) or Type III (7 or more story) building. This Inspection Form is required for either residential condominium unit owners or commercial residential applicants requesting mitigation credits in such buildings.

WIND LOSS MITIGATION INFORMATION							
PREMISES #:	1	SUBJECT OF INSURANCE: Crystal Bay Condominium Association, Inc.	POLICY#:				
BUILDING #:	1	STREET ADDRESS: Building B. 2333 Feather Sound Dr. Units 101-107, 201-511, 601-610, 701-709, Clearwater.					
# STORIES:	7	BLDG DESCRIPTION:7-Story Residential Condominium Building					
BUILDING TYPE:		[]    (4 to 6 stories) [X]     (7 or more stories)					

Terrain Exposure Category must be provided for each insured location.

I hereby certify that the building or unit at the address indicated above **TERRAIN EXPOSURE CATEGORY** as defined under the Florida Building Code is (Check One): **[X] Exposure C** or **[] Exposure B** 

Certification below for purposes of **TERRAIN EXPOSURE CATEGORY** above does not require personal inspection of the premises.

**Certification of Wind Speed** is required to establish the basic wind speed of the location (Complete for Terrain B only if Year Built On or After Jan. 1, 2002).

I hereby certify that the basic WIND SPEED of the building or unit at the address indicated above based upon county wind speed lines defined under the Florida Building Code (FBC) is (Check One): 

[] ≥100 or [] ≥110 or [X] ≥120

**Certification of Wind Design** is required when the buildings is constructed in a manner to exceed the basic wind speed design established for the structure location (Complete for Terrain B only if Year Built On or After Jan.1, 2002).

I hereby certify that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code (FBC) WIND DESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☐ ≥120

Certification for the purpose of establishing the basic **WIND SPEED or WIND SPEED DESIGN** above does not require personal inspection of the premises.

#### Specify the type of mitigation device(s) installed:

1. Roof Coverings			
Roof Covering Material: SPF & Me	tal	Date of Installation:	N/A
	<b>Equivalent) – Type II or III</b> gs that do not meet the FBC Equivalent defin	ition below.	
[] Level B (FBC Equival	ent) – Type II or III		
other roof covering memb	nen, Sprayed Polyurethane foam, Metal, Tilo oranes/products that at a minimum meet the de and have a Miami-Dade NOA or FBC 20	2001 or later Florida Building	g Code or the 1994
winds. Any flat roof cover	t must be adequately tied to the roof deck to ing with flashing or coping must be mechani stems), and asphalt roof coverings on flat ro	cally attached to the structur	e with face

<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.

# CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

FPAT File # MIT2216222

2.	Roof Deck Attachment [] No Attic Access
	Devel A – Wood or Other Deck Type II only
	Roof deck composed of sheets of structural panels (plywood or OSB). <i>Or</i>
	Architectural (non-structural) metal panels that require a solid decking to support weight and loads.  Or
	Other roof decks that do not meet Levels B or C below.
	Devel B – Metal Deck Type II or III
	Metal roof deck made of structural panels fastened to open-web steel bar joists and integrally attached to the wall.
	[X] Level C - Reinforced Concrete Roof Deck Type, II or III A roof structure composed of cast-in-place or pre-cast structural concrete designed to be self-supporting and integrally attached to wall/support system.
3.	Secondary Water Resistance [X] None
	[] Underlayment
	A self-adhering polymer modified bitumen roofing underlayment (thin rubber sheets with peel and stick underside located beneath the roof covering and normal felt underlayment) with a minimum width of 6" meeting the requirements of ASTM D 1970 installed over all plywood/OSB joints to protect from water intrusion. All secondary water resistance products must be installed per the manufacturer's recommendations. Roofing felt or similar paper based products are not acceptable for secondary water resistance.
	Toamed Adhesive
	A foamed polyurethane sheathing adhesive applied over all joints in the roof sheathing to protect interior from water intrusion.
4.	Opening Protection [X] None or Some
	[] Class A (Hurricane Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (9 lb.) impact requirements of:
	□ SSTD12;
	☐ ASTM E 1886 and ASTM E 1996;
	☐ Miami-Dade PA 201, 202, and 203;
	☐ Florida Building Code TAS 201, 202 and 203.
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.
	Class B (Basic Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (4.5 lb.) impact requirements of:
	☐ ASTM E 1886 and ASTM E 1996
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.

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#### CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

**FPAT File #** MIT2216222

#### **CERTIFICATION**

I certify that I hold an active license as a: (CHECK ONE OF THE FOLLOWING)

⊠G	eneral or buil	ding contractor licensed	under Section 489.	111, Florida	Statutes.		
□в	uilding code	inspector certified under	Section 468.607, FI	orida Statut	tes.		
☐ Professional architect licensed under Section 481.213, Florida Statutes.							
Professional engineer licensed under Section 471.015, Florida Statutes.							
	tion Form. In m	sonally inspected the premise y professional opinion, based					
This Mitigation Inspection Form and the information set forth in it are provided solely for the purpose of verifying that certain structural or picharacteristics exist at the Location Address listed above and for the purpose of permitting the Named Insured to receive a property insurance premium discount on insurance provided by Citizens Property Insurance Corporation and for no other purpose. The undersigned does make a health or safety certification or warranty, express or implied, of any kind, and nothing in this Form shall be construed to impose on undersigned or on any entity to which the undersigned is affiliated any liability or obligation of any nature to the named insured or to any oth person or entity.							surance does not e on the
Name of C	ompany:	Felten Property Ass	sessment Team		Phone:	(866)-568-7853	-
Name of In	spector	John Felten	License Type	CBC	License#	CBC1255984	
Inspection	Date:	3/10/2022					
Signature:		RAT.			Date:	3/10/2022	-
Applicant/l Signature*					Date:		
	•				Date.		<u>-</u>

<sup>\*</sup>Applicant /Insured's signature must be from the Board President and another member of the board for condo and homeowner's associations or an officer of the named insured for all other business entities.

<sup>&</sup>quot;Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

<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.



### RESERVE STUDIES | INSURANCE APPRAISALS | WIND MITIGATION



# Windstorm Mitigation Report (MIT-BT II & III)

Crystal Bay Condominium Association, Inc.
Building C, 2333 Feather Sound Dr
Clearwater, FL 33762

Prepared Exclusively for Crystal Bay Condominium Association, Inc.

As of 3/10/2022 | FPAT File# MIT2216222



### **RECAPITULATION OF MITIGATION FEATURES** For Building C, 2333 Feather Sound Dr, Units 101-109, 201-511, 601-610, 701-709

1. Roof Covering: No roof coverings meet the minimum requirements

The age of the roof covering is unknown. No permit information was Comments:

found with the local building department or provided by the

association. If additional information becomes available, this report

will be revised.

2. Roof Deck Attachment: **Reinforced Concrete Roof Deck** 

Comments: Inspection verified a roof structure composed of cast-in-place or pre-

cast structural concrete designed to be self-supporting and integrally

attached to the wall / support system.

3. SWR: No

> No SWR verified. Comments:

4. Opening Protection: **None or Some Glazed Openings** 

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

were protected with impact resistant coverings.



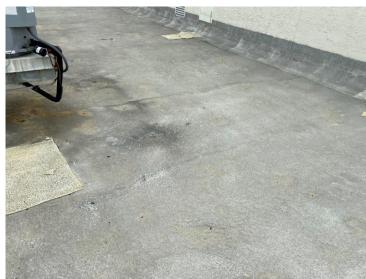
Address Verification



**Exterior Elevation** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 



**Roof Construction** 

# CITIZENS PROPERTY INSURANCE CORPORATION BUILDING TYPE II AND III MITIGATION INSPECTION FORM

This Mitigation Inspection Form must be completed to capture mitigation features applicable to a Type II (4 to 6 story) or Type III (7 or more story) building. This Inspection Form is required for either residential condominium unit owners or commercial residential applicants requesting mitigation credits in such buildings.

WIND LOSS MITIGATION INFORMATION							
PREMISES #:	1	SUBJECT OF INSURANCE: Crystal Bay Condominium Association, Inc.	POLICY#:				
BUILDING #:	1	STREET ADDRESS: Building C. 2333 Feather Sound Dr. Units 101-109, 201-511, 601-610, 701-709, Clearwater.					
# STORIES:	# STORIES: 7 BLDG DESCRIPTION:7-Story Residential Condominium Building						
BUILDING TYPE:		[]    (4 to 6 stories) [X]     (7 or more stories)					

Terrain Exposure Category must be provided for each insured location.

I hereby certify that the building or unit at the address indicated above **TERRAIN EXPOSURE CATEGORY** as defined under the Florida Building Code is (Check One): **[X] Exposure C** or **[] Exposure B** 

Certification below for purposes of **TERRAIN EXPOSURE CATEGORY** above does not require personal inspection of the premises.

**Certification of Wind Speed** is required to establish the basic wind speed of the location (Complete for Terrain B only if Year Built On or After Jan. 1, 2002).

I hereby certify that the basic WIND SPEED of the building or unit at the address indicated above based upon county wind speed lines defined under the Florida Building Code (FBC) is (Check One): 

[] ≥100 or [] ≥110 or [X] ≥120

**Certification of Wind Design** is required when the buildings is constructed in a manner to exceed the basic wind speed design established for the structure location (Complete for Terrain B only if Year Built On or After Jan.1, 2002).

I hereby certify that the building or unit at the address indicated above is designed and mitigated to the Florida Building Code (FBC) WIND DESIGN of (Check One): ☐ ≥100 or ☐ ≥110 or ☐ ≥120

Certification for the purpose of establishing the basic **WIND SPEED or WIND SPEED DESIGN** above does not require personal inspection of the premises.

#### Specify the type of mitigation device(s) installed:

# Roof Covering Material: SPF & Metal Date of Installation: U/k [X] Level A (Non FBC Equivalent) – Type II or III One or more roof coverings that do not meet the FBC Equivalent definition below. [] Level B (FBC Equivalent) – Type II or III Single-Ply, Modified Bitumen, Sprayed Polyurethane foam, Metal, Tile, Built-up, Asphalt Shingle or Rolled Roofing, or other roof covering membranes/products that at a minimum meet the 2001 or later Florida Building Code or the 1994 South Florida Building Code and have a Miami-Dade NOA or FBC 2001 Product Approval listing that is/was current at the time of installation. All mechanical equipment must be adequately tied to the roof deck to resist overturning and sliding during high winds. Any flat roof covering with flashing or coping must be mechanically attached to the structure with face fasteners (no clip/cleat systems), and asphalt roof coverings on flat roofs must be 10 years old or less.

<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.

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2.	Roof Deck Attachment [] No Attic Access						
	Level A – Wood or Other Deck Type II only						
	Roof deck composed of sheets of structural panels (plywood or OSB). <i>Or</i>						
	Architectural (non-structural) metal panels that require a solid decking to support weight and loads.  Or						
	Other roof decks that do not meet Levels B or C below.						
	Level B – Metal Deck Type II or III						
	Metal roof deck made of structural panels fastened to open-web steel bar joists and integrally attached to the w						
	[X] Level C - Reinforced Concrete Roof Deck Type, II or III A roof structure composed of cast-in-place or pre-cast structural concrete designed to be self-supporting and integrally attached to wall/support system.						
3.	Secondary Water Resistance [X] None						
	[] Underlayment						
	A self-adhering polymer modified bitumen roofing underlayment (thin rubber sheets with peel and stick underside located beneath the roof covering and normal felt underlayment) with a minimum width of 6" meeting the requirements of ASTM D 1970 installed over all plywood/OSB joints to protect from water intrusion. All secondary water resistance products must be installed per the manufacturer's recommendations. Roofing felt or similar paper based products are not acceptable for secondary water resistance.						
	Toamed Adhesive						
	A foamed polyurethane sheathing adhesive applied over all joints in the roof sheathing to protect interior from water intrusion.						
4.	Opening Protection [X] None or Some						
	[] Class A (Hurricane Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (9 lb.) impact requirements of:						
	□ SSTD12;						
	☐ ASTM E 1886 and ASTM E 1996;						
	☐ Miami-Dade PA 201, 202, and 203;						
	☐ Florida Building Code TAS 201, 202 and 203.						
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.						
	Class B (Basic Impact) – All glazed openings (windows, skylights, sliding glass doors, doors with windows, etc) less than 30 feet above grade must be protected with impact resistant coverings (e.g. shutters), impact resistant doors, and/or impact resistant glazing that meet the Large Missile (4.5 lb.) impact requirements of:						
	☐ ASTM E 1886 and ASTM E 1996						
	All glazed openings less than 30 feet above grade shall meet the Large Missile Test standard referenced above. All glazed openings between 30 and 60 feet above grade must meet the Small Missile Test of the respective standard. For buildings located in the HVHZ (High Velocity Hurricane Zone) all glazed openings greater than 60 feet above grade must also meet the Small Missile Test of the respective standard.						

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#### **CERTIFICATION**

I certify that I hold an active license as a: (CHECK ONE OF THE FOLLOWING)

□ Genera	l or build	ing contractor licensed	d under Section 489.	111, Florida	Statutes.		
☐ Buildin	ıg code ir	nspector certified unde	r Section 468.607, FI	orida Statu	tes.		
☐ Profess	sional ar	chitect licensed under	Section 481.213, Flo	rida Statute	s.		
☐ Profes	sional en	gineer licensed under S	Section 471.015, Flor	ida Statutes	S.		
		onally inspected the premise professional opinion, based					
characteristics premium disc make a health	s exist at the count on in h or safety or on any e	on Form and the information he Location Address listed a surance provided by Citize certification or warranty, exentity to which the undersign	bove and for the purposens Property Insurance press or implied, of any	e of permitting Corporation a kind, and noth	g the Named Insur and for no other p ning in this Form s	red to receive a property in ourpose. The undersigned shall be construed to impos	surance does not se on the
Name of Company:		Felten Property Assessment Team			Phone:	(866)-568-7853	_
Name of Inspector		John Felten	License Type	CBC	License #	CBC1255984	_
Inspection Date:	_	3/10/2022					-
Signature:	_	RAT.			Date:	3/10/2022	-
Applicant/Insured Signature*:	d's _				Date:		_

<sup>\*</sup>Applicant /Insured's signature must be from the Board President and another member of the board for condo and homeowner's associations or an officer of the named insured for all other business entities.

<sup>&</sup>quot;Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

<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.