STRUCTURAL SAFETY INSPECTION REPORT FORM

| Inspection Firm or Individual Name: | | | | | |
|---|------------------------------------|--------|-------------------|------------------------------|--------------------------------|
| Address: | | | | | |
| Telephone Number: | | | | | KOLES KILL |
| Inspection Commenced Date: | Inspection Cor | mplet | ed Date: | | |
| No Repairs Required Repairs are Required as Outlined in the Attached Inspection Report | | | | | |
| Florida Licensed Professional: Engineer Architect Architect | | | | MINIMINIA AM D. CENS. COM | |
| Name: | | | | N | lo. 43904 |
| License Number: | | | RON | S V | TATE OF |
| Threshold Building – Certified Special Inspector | Yes No | | | | OR IDE CHIMINE WMMINIMINING |
| | | | L | | Seal |
| I am qualified to practice in the discipline in which | i I am hereby signing, | | | | |
| Signature: | Date: | | | | |
| This report has been based upon the minimum insp Board of Rules and Appeals Policy #05-05. To the bes present condition of the structure based upon careful e | st of my knowledge and ability, th | is rep | ort represents an | accur | ate appraisal of the |
| 1. DESCRIPTION OF STRUCTURE | | | | | |
| a. Name on Title: | | | | | |
| b. Street Address: | | | | | |
| c. Legal Description: | | | | | |
| d. Owner's Name: | | | | | |
| e. Owner's Mailing Address: | | | | | |
| f. Email Address: Contact Number: | | | | | |
| g. Folio Number of Property on which building is located: | | | | | |
| h. Building Code Occupancy Classification: | | | | | |
| i. Present Use: | | | | | |
| j. General Description: Type of Construction: | | | | | |
| x. Square Footage: Number of Stories: | | | | | |
| I. Is this a Threshold Building (per F.S. 553.71): | | | Yes | | No |

| m. | Special Features: | | | | |
|------|------------------------------------|--------------------|----------------------|------|------------------------|
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| n. | Describe any Additions to the Orig | inal Structure: | | | |
| 0. | Additional Comments: | | | | |
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| 2. F | PRESENT CONDITION OF STE | | | | |
| | a. General Alignment (Note: Go | od, Fair, Poor, Ex | xplain if Significar | nt): | |
| 1. | Bulging: | Good | Fair | Poor | Significant (Explain): |
| 2. | Settlement: | Good | Fair | Poor | Significant (Explain): |
| 3. | Deflections: | Good | Fair | Poor | Significant (Explain): |
| 4. | Expansion: | Good | Fair | Poor | Significant (Explain): |
| 5. | Contraction: | Good | Fair | Poor | Significant (Explain): |

| b. Portion Showing Distress (Note: Beams, Columns, Structural Walls, Floor, Roofs, Other): |
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| c. Surface Conditions – Describe General Conditions of Finishes, (Noting Cracking, Spalling, Peeling, Signs of Moisture Penetration, and Strains): |
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| d. Cracks – Note the Location of Significant Members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1mm in width; MEDIUM if between 1mm and 2mm in width; WIDE if over 2mm: |
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| e. General Extent of Deterioration – Cracking or Spalling Concrete or Masonry, Oxidation of Metals; Rot or Borer Attack in Wood: |
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| f. Note Previous Patching or Repairs: |
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| g. Nature of Present Loading Indicate Residential, Commercial, and Other Estimated Magnitude: |
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| 3. INSPECTIONS |

a.

Date of Notice of Required Inspection:

Date(s) of Actual Inspection:

| c. Name and Qualifications of the Individual Preparing Report: |
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| d. Description of Laboratory or Other Formal Testing, if required, rather than Manual or Visual Procedures: |
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| e. Structural Repairs: |
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| f. Has the Property Record been Researched for any Current Code Violations or Unsafe Structure Yes No |
| Cases? |
| Explanation/Comments: |
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| 4. SUPPORTING DATA ATTACHED |
| a. Sheets of Written Data: |
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| b. Photographs: |
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| c. Drawings or Sketches: |
| d. Test Reports: |
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| 5 EQUINDATION |
| 5. FOUNDATION |
| a. Describe Building Foundation: |
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| b. Describe any Cracks or Separation in the Walls, Columi | ns or Beams that Signal Differential Settlement: |
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| c. Is there Additional Sub-Soil Investigation Required?1. If yes, explain: | Yes No |
| 6. MASONRY BEARING WALL – Indicate Good, Fair o | r Poor on Appropriate Lines |
| a. Concrete Masonry Units: | Good Fair Poor |
| b. Clay Tile or Cotta Units: | Good Fair Poor |
| c. Reinforced Concrete Tie Columns: | Good Fair Poor |
| d. Reinforced Concrete Tie Beams: | Good Fair Poor |
| e. Lintel: | Good Fair Poor |
| f. Other Type Bond Beams: | Good Fair Poor |
| g. Masonry Finishes – Exterior: | |
| 1. Stucco: | Good Fair Poor |
| 2. Veneer: | Good Fair Poor |
| 3. Paint Only: | Good Fair Poor |
| 4. Other: | Good Fair Poor |
| 4a. Explain: | |
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| h. | Cracks – Describe Beams, Columns, or Others, Including Locations: |
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| i. | Spalling – Describe Beams, Columns, or Others, Including Locations: |
| j. | Rebar Corrosion – Check Appropriate Line: 1. None Visible 2. Minor – Patching Will Suffice 3. Significant – Patching Will Suffice 4. Significant – Structural Repairs Required 4a. Describe: |
| k. | Were Samples Chipped Out for Examination in Spalled Areas? 1. No 2. Yes – Describe Color, Texture, Aggregate, and General Quality: |
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| 7. FLO | OR AND ROOF SYSTEM |
|--------|--|
| a. | Roof: |
| 1. | Describe the Type and Condition of the Current Roof: |
| 2. | Note Water Tanks, Cooling Towers, Air Conditioning Equipment, Signs, Other Heavy Equipment and Condition of Support: |
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| 3. | Note Types of Drains, Scuppers, and Condition: |
| 4. | Describe Parapet Construction and Current Condition: |
| 5. | Describe Mansard Construction and Current Condition: |

| 6. | Describe any Roofing Framing Member with Obvious Overloading, Overstress, Deterioration, or Excessive Deflection: |
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| 7. | Note any Expansion Joint and Condition: |
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| b. | Floor System(s): |
| 1. | Describe Type of System Framing, Material, Spans, and Condition: |
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| 2. | Balconies – Indicate Location, Framing System, Material, and Condition: |
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| | Chaire and Carolators, Indicate Lacation Cramina Cratera Material and Canditions |
| 3. | Stairs and Escalators – Indicate Location, Framing System, Material, and Condition: |
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| 4. | Ramps – Indicate Location, Framing System, Material, and Condition: |
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| 5. | Guardrails – Indicate Type, Location, Material and Condition: |
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| c. | Inspection: |
| | Note: Exposed areas available for inspection and where it was found necessary to open ceilings, etc. for inspection of typical framing members. |
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| 8. STE | EL FRAMING SYSTEM |
| a. | Full Description of the System: |
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| b. | Exposed Steel – Describe the Condition of the Paint and Degree of Corrosion: |
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| C. | Steel Connections – Describe Type and Condition: |
| 0. | oteci dofinections – Bescribe Type and condition. |
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| d. | Concrete or Other Fireproofing – Describe any Cracking or Spalling and Note Where any Covering was Removed for Inspection: |
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| e. | Identify any Steel Framing Member with Obvious Overloading, Overstress, Deterioration, or Excessive Deflection. Provide Location(s): |
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| f. | Elevator Sheave Beams, Connections, and Machine Floor Beams – Note Column: |
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| 9. CON | ICRETE FRAMING SYSTEM |
| a. | Full Description of the Structural System: |
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| b. | Cracking: |
| 1. | Significant Not Significant |
| 2. | Description of Members Affected, Location, and Type of Cracking: |
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| C. | General Condition: |
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| d. | Rebar Corrosion – Check Appropriate Line: |
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| | 1. None Visible |
| | Location and Description of Members Affected and Type Cracking |
| | 3. Significant – Patching Will Suffice |
| | 4. Significant – Structural Repairs Required (Describe): |
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| e. | Were Samples Chipped Out for Examination in Spalled Areas? |
| | 1. No |
| | 2. Yes – Describe Color, Texture, Aggregate, General Quality: |
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| f. | Identify any Concrete Framing Member with Obvious Overloading, Overstress, Deterioration, or Excessive Deflection. |
| | Provide Location(s): |
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| 40 14/1 | NDOWO CTOREEDONTO CURTAINWALL CAND EXTERIOR ROOPS |
| | NDOWS, STOREFRONTS, CURTAINWALLS AND EXTERIOR DOORS |
| a. | Windows, Storefronts, and Curtainwalls: |
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| b | . Structural Glazing on the Exterior Envelope of the Threshold Building: |
| | 1. Previous Inspection Date: |
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| 2. Description of Curtainwall Structural Glazing and Adhesive Sealant: |
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| 3. Describe the Condition of System: |
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| c. Exterior Doors: |
| 1. Type (Wood, Steel, Aluminum, Sliding Glass Door, Other): |
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| 2. Anchorona Type and Condition of Fostoners and Latches |
| Anchorage Type and Condition of Fasteners and Latches: |
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| Sealant Type and Condition of Sealant: |
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| 4. General Condition: |
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| Describe Repairs Needed: |
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| 11. WOOD FRAMING | | |
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| a. | Type – Fully Describe Mill Construction, Light Construction, Major Spans, and Trusses: | |
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| | Indicate the Condition of the Following: | |
| b. | Indicate the Condition of the Following: | |
| 1. | Walls: | |
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| 2. | Floors: | |
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| 3. | Roof Member, Roof Trusses: | |
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| C. | Note Metal Fitting (i.e., Angles, Plates, Bolts, Splint Pintles, Other and Note Condition): | |
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| d. | Joints – Note if Well Fitted and Still Closed: | |
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| | e. | Drainage – Note Accumulations of Moisture: |
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| | f. | Ventilation – Note any Concealed Spaces not Ventilated: |
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| | g. | Note any Concealed Spaces Opened for Inspection: |
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| | h. | Identify any Wood Framing Member with Obvious Overloading, Overstress, Deterioration, or Excessive Deflection: |
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| 12. | BUI | LDING FAÇADE INSPECTION (Threshold Building) |
| | a. | Identify and Describe the Exterior Walls and Appurtenances on All Sides of the Building (Cladding Type, Corbels, Precast Appliques, etc.): |
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| | b. | Identify the Attachment Type of each Appurtenance Type (Mechanically Attached or Adhered): |
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| c. | Indicate the Condition of each Appurtenance (Distress, Settlement, Splitting, Bulging, Cracking, Loosening of Metal Anchors and Supports, Water Entry, Movement of Lintel or Shelf Angles, or Other Defects): | | |
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| 13. SPECIAL OR UNUSUAL FEATURES IN THE BUILDING | | | |
| a. | Identify and Describe any Special or Unusual Features (i.e., Cable Suspended Structure, Tensile Fabric Roof, Large Sculpture, Chimney, Porte-Cochere, Retaining Wall, Seawall, etc.): | | |
| b. | Indicate the Condition of Special Feature, its Supports, and Connections: | | |