Safeco Insurance™
Member of Liberty Mutual Group

WIND MITIGATION SURVEY FORM

SOUTH CAROLINA

Agent Number:	**Policy Number:**
Agency:	**Policy Type (circle one):**
Agent Name:	**Homeowners Condominium Renters**

SECTION I – Insured Information

Instructions: This section must be completed by homeowner/policyholder.

Name: **Location Address:**

Contact Number (Home or Work):

SECTION II – Inspection Survey

Instructions: This section must be completed by a qualified inspector or homeowner/policyholder.

NOTE: This request form does not pertain to accessory structures such as detached garages, storage sheds, barns, etc. Please check the most appropriate answer to each question listed below.

1. Building Code:

_____ South Carolina Building Code (SCBC) _____ Unknown, unidentified or no code.

2. Roof Shape: (SCBC required for any credit under Roof Shape)

_____ **Flat :** This roof has a low slope or no slope

_____ **Gable end without bracing:** This roof slopes in two directions so that the end formed by the intersection of slopes is a vertical triangle. The gable-end walls are not braced to the main structure.

_____ **Hip:** This roof slopes in four directions such that the end formed by the intersection of slopes is a sloped triangle.

_____ **Complex:** This type of roof consists of several different geometries framed together to form a single roof structure.

_____ **Stepped:** This type of roof contains vertical divisions between the sloping planes

_____ **Mansard:** This type of roof consists of steep slopes that terminate into a flat roof at its high point.

_____ **Gable end with bracing:** This roof slopes in two directions so that the end formed by the intersection of slopes is a vertical triangle. The gable-end walls are braced to the main structure and designed to withstand positive and negative pressures.

_____ **Pyramid:** This type of roof has four equal sides that rise to a center point.

_____ **Other**

3. Opening Protection:

_____ No Protection _____ Non-Engineered Shutters

_____ Engineered Shutters _____ Other

4. Roof Cover Attachment:

_____	Screws	_____	Adhesive/Epoxy	_____	Other
_____	Nails/Staples	_____	Mortar		

5. Roof Deck Attachment

_____	Screws/Bolts	_____	Adhesive/Epoxy
_____	Nails	_____	Structurally Connected
_____	6d nails @ 6 spacing, 12 on center	_____	8d nails @ 6 spacing, 12 on center
_____	8d nails @ 6 spacing, 6 on center	_____	Other

6. Roof-Wall Connection Type:

What is the weakest form of roof-wall connector used on dwelling?

_____ **Hurricane Ties:** Metal connectors designed by an engineer to withstand the loads imposed on the roof structure. These connectors and their installation must satisfy the conditions specified by the local building code.

_____ **Nails/Screws:** Roof-to-wall connection using nails or screws such as a typical 3 toe nail connection.

_____ **Anchor bolts:** This corresponds to a bolted connection between the roof structural members and the supporting walls.

_____ **Gravity/friction:** The roof structure is simply supported by the walls without any component providing uplift capacity.

_____ **Adhesive epoxy:** The roof structure is connected to the walls using adhesive epoxy providing limited uplift capacity.

_____ **Structurally Connected:** The roof connection to the walls has been designed and inspected to guarantee a continuous load path to transfer the loads from the roof to the supporting walls.

_____ **Clips:** Metal Connectors used to attach the structural components of the roof with the supporting members. These connectors have not been designed and certified to withstand the loads imposed on the roof structure.

_____ **Other**

7. Door Strength:

_____	Double Width Doors	_____	Reinforced Single Width Doors
_____	Single Width Doors	_____	Reinforced Double Width Doors
_____	Reinforced Sliding Doors	_____	Unknown/Other:
_____	Un-reinforced Sliding Doors		

8. Roof Deck Material:

_____	Plywood	_____	Reinforced Concrete Slabs
_____	Wood Planks	_____	Light Metal
_____	Particle Board/OSB	_____	Other
_____	Metal Dec with Insulation Board		
_____	Pre-cast Concrete Slabs		

9. Glass Type:

_____ Annealed	_____ Heat Strengthened	_____ Insulating Glass Units
_____ Tempered	_____ Laminated	_____ Other

SECTION III – ATTACHMENT SCHEDULE

Instructions: This section must be completed by agent of record.

Please check below which of the following has been supplied to support the mitigation measures credit request. Any items aside from this survey form should be kept on file with the agency.

_____ Written certification or report from a licensed professional with appropriate expertise

_____ A notarized affidavit signed by the property owner certifying to the mitigation measures and that they have been completed, along with receipts

_____ Survey form completed by Qualified Professional with Section IV completed and signed

At least one of the items above must be checked, on file and confirmed by agent signature below in order for credit to be processed.

Agent Signature	Date

SECTION IV – INSPECTION CERTIFICATION

Instructions: This section must be completed by a qualified inspector.

I certify that I am a Building Code Enforcement Officer, or a Third-Party Provider, as defined by the state of South Carolina. I am authorized to perform residential building inspections for compliance with the South Carolina Building Code. I have conducted an inspection of the structure, and reviewed all construction documents and building product specifications necessary to accurately answer the questions on this inspection survey form, and certify that, to the best of my knowledge, all questions are answered truthfully and correctly.

Name (Please Type or Print):	Firm Name and License Number:
Signature:	Date:

SECTION V – INSURED CERTIFICATION

Instructions: This section must be completed by homeowner/policyholder.

Insured's Signature:	Date:
Insured's Signature:	Date
Date Mitigation Measures Installed:	