

United P&C Insurance Company
South Carolina Windstorm Mitigation Construction Certification

Named Insured: _____ **Policy #:** _____

Insured Location: _____ **Year Built:** _____

The following information must be included based on your review of the property:

1. Secondary Water Resistance: (circle one) Yes* / No

*Yes means this roof has self adhering polymer modified bitumen roofing underlayment (thin rubber or asphalt sheets with peel and stick underside located beneath the roof covering) or foamed structural adhesive installed over all roof deck joints to prevent water entry into the house after the roof covering itself fails.

2. Roof Cover: (check one)

_____ NON-South Carolina Building Code (SCBC) Equivalent

_____ South Carolina Building Code (SCBC) Equivalent

3. Roof Deck Attachment: (check one)

_____ 6d nails at 6"/12" spacing _____ 8d nails at 6"/12" spacing _____ 8d nails at 6"/6" spacing

_____ Dimensional Lumber & Tongue and Groove Decks

4. Roof to Wall Connection: (check one)

_____ Toe Nails _____ Clips _____ Single Wraps _____ Double Wraps

5. Roof Shape: (circle one) HIP / Other

6. Door Strength: (check one)

_____ Reinforced Single Width Doors _____ Other

7. Construction Code: (check one)

_____ IBHS Fortified Home _____ Other

8. Opening Protection: (check one)

- None- glazed openings not protected for impact resistance
- Tempered, heated, laminated or insulated glass without shutters
- Basic Storm Shutters- all glazed openings that meet the requirements of the American Society for Testing & Materials (ASTM) standards ASTM E 1886 and ASTM E 1996 for small missile impact testing (4.5 pounds)
- Hurricane Storm Shutters- all glazed openings protected to meet the requirements ASTM E 1886 and ASTM E 1996 Standard Building Code SSTD 12 for large missile impact testing (nine pounds)

CERTIFICATION

I hereby certify that I am a Licensed Building Contractor, Registered Architect or an Engineer in the State of South Carolina or a Building Code Official (who is duly authorized by the State of South Carolina or its county municipalities to verify building code compliance). In my professional opinion and based on my knowledge, information and belief, I certify that the above statements are true and correct. This certification is intended only for the benefit of the named insured's receipt of a property insurance premium discount and for no other purpose.

Dated and signed this _____ day of _____, _____

Signature

Print Name: _____ Title: _____

License Number: _____ Phone: _____