

**MINIMUM INSPECTION PROCEDURAL GUIDELINES
FOR BUILDING STRUCTURAL RECERTIFICATION**

Initial Inspection Report

Amended Inspection Report after completion of repairs

Licensed Engineer(s) or Architect(s) Responsible for Recertification Inspection

Inspection Firm Name (if applicable):

Address:

Telephone Number:

Email:

Assuming Responsibility for: All Portion If portion, please list:

Inspection Commencement Date:

Inspection Completion Date:

NOTE: Add pages as required to list all additional design professionals assuming responsibility for the Recertification Inspections or portions thereof. Each Design Professional must sign and seal their portion of the work in accordance with Florida Statutes.

Please check the condition that applies:

Substantial Structural Deterioration Observed

Dangerous Condition Observed. Notify Building Official within 10 days

Immediate Dangerous Condition Observed. Notify Building and Fire Officials within 24 hours

Maintenance needed but does not rise to the level of Substantial Deterioration or Dangerous

Passed the Inspection

Check box if unpermitted work has been identified as per Sec. 1804.1 FBC, EB

Licensed Design Professional:

Engineer

Architect

Name:

License Number:

I am qualified to practice in the discipline in which I am hereby signing:



Seal

Signature:

Date:

This report has been based upon the minimum inspection requirements of Miami-Dade County Code Sec. 8-11(f) and satisfies the requirements listed in Chapter 18 of the Florida Building Code, Existing Building, inclusive of the Phase 1 and Phase 2 inspections. To the best of my knowledge and ability, this report represents an accurate appraisal of the present conditions of the structure, based on careful evaluation of conditions, to the extent reasonably possible.

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FOR BUILDING STRUCTURAL RECERTIFICATION**

CASE REFERENCE NUMBER:

JURISDICTION NAME:

***Use separate sheets for additional responses by referencing the report section number.**

1. DESCRIPTION OF BUILDING	
a. Name on Title:	
b. Building Street Address:	Bldg. #:
c. Legal Description:	Attached:
d. Owner's Name:	
e. Owner's Mailing Address:	
f. Owner's email:	
g. Owner's Contact Phone Number:	
h. Corresponding Property Folio Number:	
i. Name of Condominium or Cooperative Association (if applicable):	
j. Building Code Occupancy Classification:	
k. Present Use:	
l. General description, type of construction, size, number of stories, and special features:	
m. Number of Stories:	n. Is this a Threshold Building ¹ as per 553.71(12) F.S. (Yes/No):
o. Additions to original structure:	
p. Provide an aerial of the property identifying the building being certified on a separate sheet. Attached:	
q. Approximate distance to coast and method used to determine distance:	
r. Total Actual Building Area of all floors:	S.F. s. Building Footprint Area:

2. INSPECTIONS	This section is Not Applicable
a. Date of Notice of Required Inspection:	
b. Date(s) of actual inspection:	
c. Name and qualifications of licensee submitting report:	
d. Description of laboratory or other formal testing, if required, rather than manual or visual procedures:	N/A:
e. Are Any Structural Repairs Required? (Yes/No):	
1. If required, describe, and indicate acceptance:	
f. Can the building continue to be occupied while recertification and repairs are ongoing? (Yes/No):	
1. Explanation/Conditions:	
g. Is it recommended that the building be vacated? (Yes/No):	
h. Has the property record been researched for violations or unsafe cases? (Yes/No):	
1. Explanation/Conditions:	

3. SUPPORTING DATA

- | | |
|----|--|
| a. | Additional sheets of written data |
| b. | Photographs provided (where required <u>plus each building elevation</u>) |
| c. | Drawings or sketches (aerial, site, footprint, etc.) |
| d. | Test reports |

4. FOUNDATION

a. Describe the building foundation:

b. Is wood in contact or near the soil? (Yes/No)

c. Signs of differential settlement? (Yes/No)

d. Describe any cracks or separation in the wall, columns, or beams that signal differential settlement:

PROVIDE PHOTO

e. Is water drained away from the foundation? (Yes/No)

f. Is there additional sub-soil investigation required? (Yes/No)

1. Describe:

5. PRESENT CONDITION OF OVERALL STRUCTURE

a. General alignment: (Note: good, fair, poor, explain if significant)

PROVIDE PHOTO

1. Bulging:

2. Settlement

3. Deflections:

4. Expansion:

5. Contraction:

b. Portion showing distress: (Note, beams, columns, structural walls, floor, roofs, other)	PROVIDE PHOTO
c. Surface conditions: Describe general conditions of finishes, cracking, spalling, peeling, signs of moisture penetration and stains.	PROVIDE PHOTO
d. Cracks: Note location in significant members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1 mm in width; MEDIUM if between 1- and 2-mm width; WIDE if over 2 mm.	PROVIDE PHOTO
e. General extent of deterioration: Cracking or spalling of concrete or masonry, oxidation of metals; rot or borer attack in wood.	PROVIDE PHOTO
f. Previous patching or repairs (Provide description and identify location):	PROVIDE PHOTO
g. Nature of present loading: (Indicate residential, commercial, storage, other)	
h. Signs of overloading? (Yes/No):	
1. Describe:	

6. MASONRY BEARING WALL: (Indicate good, fair, poor on appropriate lines)	This section is Not Applicable	PROVIDE PHOTO
a. Concrete masonry units:		
b. Clay tile or terra cotta units:		
c. Reinforced concrete tie columns:		
d. Reinforced concrete tie beams:		
e. Lintel:		
f. Other type bond beams:		PROVIDE PHOTO
g. Exterior masonry finishes (choose those that apply):		
1. Stucco:		
2. Veneer:		
3. Paint only:		
4. Other (describe):		
h. Interior masonry finishes (choose those that apply):		PROVIDE PHOTO
1. Vapor barrier:		
2. Furring and plaster:		
3. Paneling:		
4. Paint only:		
5. Other (describe):		
i. Cracks:		PROVIDE PHOTO
1. Location (note beams, columns, other):		
2. Description:		
j. Spalling:		PROVIDE PHOTO
1. Location (note beams, columns, other):		
2. Description:		

k. Rebar corrosion (indicate worst case by selecting one from lines 1-4):	PROVIDE PHOTO
1. None visible:	
2. Minor (patching will suffice):	
3. Significant (but patching will suffice):	
4. Significant (structural repairs required)	
l. Samples chipped out for examination in spalled areas (Yes/No):	
1. Yes – describe color, texture, aggregate, general quality:	

7. FLOOR AND ROOF SYSTEM	
a. Roof (Must access and provide)	
1. Describe (roof shape, type roof covering, type roof deck, roof structural framing, condition):	PROVIDE PHOTO
Roof Pitch:	Roof Cladding Type:
Roof Deck Material:	
Roof Structural Framing Type:	
Roof Structural Framing Condition:	
2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of supports:	PROVIDE PHOTO
3. Describe roof drainage system, main and overflow, and indicate condition:	PROVIDE PHOTO
4. Describe parapet construction and current conditions:	PROVIDE PHOTO
5. Describe mansard construction and current conditions:	PROVIDE PHOTO

6. Describe roofing membrane/covering and current conditions:	PROVIDE PHOTO
7. Describe any roof framing member with obvious overloading, overstress, deterioration or excessive deflection:	PROVIDE PHOTO
8. Note any expansion joints and condition:	PROVIDE PHOTO
b. Floor system(s):	
1. Describe the floor system at each level, framing, material, typical spans and indicate condition:	PROVIDE PHOTO
2. Balconies: Indicate location, framing system, material, and condition:	N/A PROVIDE PHOTO
3. Stairs and escalators: indicate location, framing system, material, and condition:	N/A PROVIDE PHOTO
4. Ramps: indicate location, framing type, material, and condition:	N/A PROVIDE PHOTO
5. Guardrails: describe type, material, and condition:	N/A PROVIDE PHOTO
c. Inspection - note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members.	

8. STEEL FRAMING SYSTEM

This Section is Not Applicable:

a. Description of system at each level:

PROVIDE PHOTO

b. Steel members: describe condition of paint and degree of corrosion:

PROVIDE PHOTO

c. Steel connections: describe type and condition:

PROVIDE PHOTO

d. Concrete or other fireproofing: note any cracking or spalling of encased member and note where any covering was removed for inspection:

PROVIDE PHOTO

e. Identify any steel framing member with obvious overloading, overstress, deterioration, or excessive deflection (provide location):

PROVIDE PHOTO

f. Elevator sheave beams and connections, and machine floor beams: note condition: N/A

PROVIDE PHOTO**9. CONCRETE FRAMING SYSTEM**

This Section is Not Applicable:

a. Full description of concrete structural framing system:

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b. Cracking

1. Significant or Not significant:

2. Significant Structural repairs required:

3. Location and description of members affected and type cracking:

c. General condition		
d. Rebar corrosion - check appropriate line		
1. None visible:		
2. Location and description of members affected and type cracking:	N/A	PROVIDE PHOTO
3. Significant but patching will suffice:	N/A	PROVIDE PHOTO
4. Significant: structural repairs required (describe):	N/A	PROVIDE PHOTO
e. Samples chipped out in spall areas:		
1. No:		PROVIDE PHOTO
2. Yes, describe color, texture, aggregate, general quality:		
f. Identify any concrete framing member with obvious overloading, overstress, deterioration, or excessive deflection:		PROVIDE PHOTO

10. WINDOWS, STOREFRONTS, CURTAINWALLS AND EXTERIOR DOORS		
a. Windows/Storefronts/Curtainwalls/Skylights		PROVIDE PHOTO
1. Type (Wood, steel, aluminum, vinyl, jalousie, single hung, double hung, casement, awning, pivoted, fixed, other):		
2. Anchorage: type and condition of fasteners and latches:		

3. Sealant: type and condition of perimeter sealant and at mullions:	
4. Interiors seals: type and condition at operable vents:	
5. General condition:	
6. Describe any repairs needed:	
b. Structural Glazing on the exterior envelope of Threshold Buildings (Yes/No):	
1. Previous Inspection Date:	
2. Description of Curtain Wall Structural Glazing and adhesive sealant:	
3. Describe Condition of System:	
c. Exterior Swing and Oversized Doors	PROVIDE PHOTO
1. Type (Wood, Steel, Aluminum, Sliding Glass Door, other):	
2. Anchorage: type and condition of fasteners and latches:	
3. Sealant: type and condition of sealant:	

4. General condition:
5. Describe any repairs needed:

11. WOOD FRAMING		This Section is Not Applicable:
a. Type: fully describe if mill construction, light construction, major spans, trusses:		PROVIDE PHOTO
b. Indicate the condition of the following:		PROVIDE PHOTO
1. Walls:		
2. Floors:		
3. Roof member, roof trusses:		
c. Note metal connectors (i.e., angles, plates, bolts, split pintles, other, and note condition):		PROVIDE PHOTO
d. Joints: note if well fitted and still closed:		PROVIDE PHOTO

e. Drainage: note accumulations of moisture	PROVIDE PHOTO
f. Ventilation: note any concealed spaces not ventilated:	PROVIDE PHOTO
g. Note any concealed spaces opened for inspection:	PROVIDE PHOTO
h. Identify any wood framing member with obvious overloading, overstress, deterioration, or excessing deflection. Are Structural repairs required?):	PROVIDE PHOTO

12. BUILDING FAÇADE INSPECTION (Threshold Buildings) This Section is Not Applicable:	PROVIDE PHOTO
a. Identify and describe the exterior walls and appurtenances on all sides of the building. (Cladding type, corbels, precast appliques, etc.)	
b. Identify the attachment type of each appurtenance type (mechanically attached or adhered):	
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):	

13. SPECIAL OR UNUSUAL FEATURES IN THE BUILDING	This Section is Not Applicable	PROVIDE PHOTO
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a. Identify and describe any special or unusual feature {i.e. cable suspended structures, tensile fabric roof, large sculptures, chimneys, porte-cochere, retaining walls, seawalls, signs, canopy, awnings, attached terraces, etc.)

b. Indicate condition of the special feature, its supports, and connections:

14. UNDERGROUND OR LOWER-LEVEL PARKING GARAGES	This Section is Not Applicable	PROVIDE PHOTO
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CHECKLIST ITEMS TO CONFIRM OR CONSIDER FOR UNDERGROUND PARKING

GARAGE: **14.A.** CURRENT BFE: _____ ft. (Select Datum)

Note: All elevation datums provided must be in the same datum as the Flood Insurance Rate Map (FIRM).

1. What is the wet season² ground water elevation (water table): _____ ft. (Select Datum)

2. What is the elevation of lowest parking garage finished floor: _____ ft. (Select Datum)

3. What is the elevation of the parking garage entrance: _____ ft. (Select Datum)

4. Is the wet season ground water elevation (water table) higher than the lowest floor elevation? Select (Yes/No)

Explanation:

5. Is the garage entrance elevation lower than the base flood elevation? Select: (Yes/No)

Explanation:

6. List use of structure above the underground portion of the parking garage. (e.g. parking, terrace, occupiable space):

Describe:

7. Does underground parking structure show any evidence of bulging, settlement, cracking or deflection?
Describe:
8. Describe general surface conditions (cracking, spalling, peeling, or staining)
Explanation:
14.B.
1. Do the parking garage slabs (overhead and floor slabs) and/or walls show evidence of leakage (efflorescence at the underside of slab or at base of column)? (Yes/No):
Explanation:
2. Is there any evidence of previous patching or repairs? (Yes/No):
Explanation:

¹ **THRESHOLD BUILDING:** In accordance with Florida Statute 553.71 (12) "Threshold building" means any building which is greater than three stories or 50 feet in height, or which has an assembly occupancy classification as defined in the Florida Building Code which exceeds 5,000 square feet in area and an occupant content of greater than 500 persons.

² **WET SEASON:** Compare the current Base Flood Elevation (BFE) on the latest FEMA Flood Insurance Rate Map (FIRM) with the October water table elevation shown in the Miami-Dade County Average Ground Water October maps available with the Miami-Dade Department of Environmental Resource Management (DERM).

15. DETERIORATION

N/A:

PROVIDE PHOTO 15

a. Based on the scope of inspection, describe any structural deterioration and describe the extent of such deterioration.

If **Substantial Structural Deterioration** has been observed:

N/A:

PROVIDE PHOTO

16. Identify the damage and describe the extent of the substantial structural deterioration along with the need for maintenance, repair and/or replacement recommendations.

17. Identify and describe areas requiring added inspection as well as results of any testing.

18. Describe manner and type of inspections performed.

19. Provide graded urgency of each recommended repair.

20. State whether unsafe or dangerous conditions exist, as these terms are defined in the Florida Building Code, where observed.