

**INSURED'S MITIGATION VERIFICATION AFFIDAVIT- COMMERCIAL**

Policyholder Name - \_\_\_\_\_

Property Address - \_\_\_\_\_

Opening Protection

1. Have storm shutters been installed on all windows meeting the minimum requirements for the International Residential Code?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Has impact resistant glass meeting the minimum requirements of the International Residential Code been installed?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. If there is an attached garage, does the door(s) meet or has it been retrofitted to meet ASCE 7/88 wind and debris impact standards, or is the door(s) compliant with SSTD-12 wind pressure and debris impact standards?

Yes \_\_\_\_\_ No \_\_\_\_\_

Roof

1. Attachment – Is sheathing attached in compliance with the current edition of the International Building Code as adopted by the South Carolina Building Codes Council or an engineered design for the wind speed for the site on which the home is located?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Roof-to-Wall Connection - Are there toe nails, clips, single straps and/or double straps that are installed in compliance with the current edition of the International Building Code as adopted by the South Carolina Building Codes Council or an engineered design for the wind speed for the site on which the home is located?

Yes \_\_\_\_\_ No \_\_\_\_\_

Toe nails     Clips     Single straps     Double straps

3. Secondary Water Resistance - Does the roof have roofing felt or other approved layer or protection between the shingles and the roof sheathing below? All secondary water resistance products must be installed per the manufacturer's instructions.

Yes \_\_\_\_\_ No \_\_\_\_\_ Not Verified \_\_\_\_\_

Building Codes

1. Is the structure built to meet or exceed the International Building Code as adopted by the SC Building Codes Council as of 2007? Was the structure's certificate of occupancy (CO) issued in 2007 or later?

Yes \_\_\_\_\_ No \_\_\_\_\_

**IMPORTANT NOTICE**

Insurers have the right to confirm all information contained in this survey form via a survey of the risk. Any person or insurer who makes a false statement or misrepresentation, and any other person knowingly, with an intent to injure, defraud, or deceive, who assists, abets, solicits, or conspires with such person or insurer to make a false statement or misrepresentation is subject to both criminal and civil penalties pursuant to S.C. Code Ann. 38-55-540 and 38-55-550.

**Certification**

I hereby certify that the above marked mitigation or construction techniques have been implemented. (Copies of the applicable receipts must accompany this affidavit.) This affidavit is intended only for the purpose of the named insured's receipt of a property insurance premium discount and for no other purpose.

Policyowner's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(notarize below)

State of South Carolina )  
County of \_\_\_\_\_ )

With respect to the above,  
The above named signatory has sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D., 20\_\_, by \_\_\_\_\_ (name of person making the statement) the information within this document is accurate and true. The above signatory is personally known to me \_\_\_\_\_ or produced \_\_\_\_\_ (type of identification) for identification.

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Print, Type of Stamp Name of Notary