

INSURED'S MITIGATION VERIFICATION AFFIDAVIT- MANUFACTURED HOUSING

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 _____

Building Codes

1. Is the structure built to meet or exceed the International Building Code as adopted by the SC Manufactured Building Codes Council as of 2007? Was the home'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.

Homeowner'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