

# Inspection Verification Form WPI-2-BC-7

# For ongoing improvements that began construction on or after September 1, 2020

#### Instructions

- Print this form and type or print your responses.
- Return this form by email or mail.

Email: <u>windstorm@tdi.texas.gov</u>

**Texas Department of Insurance** Windstorm Inspections Program, PC-INSP P.O. Box 12030 Austin, TX 78711-2030

#### Acknowledgement

I acknowledge that I am a qualified inspector appointed by the commissioner of the Texas Department of Insurance to perform inspections in accordance with Texas Insurance Code Sections 2210.251-2210.258 and with 28 Texas Administrative Code Sections 5.4601-5.4642. I affirm the following:

#### Location of structure

City	ZIP	County	
Type of inspection performed			
Entire structure (type):	🛛 Repair (type)	Repair (type):	
Entire re-roof (type):	D Mechanical d	Mechanical only (type):	
Re-decking:	Foundation of	only (type):	
Partial re-roof (type and area):	Addition (typ	Addition (type):	
Re-decking:	<b>P</b> *Retrofit of a	*Retrofit of all exterior openings:	
Alteration (type):			

\* For windborne debris protection only (impact-resistant exterior opening products or shutters). "All exterior openings" includes windows, doors, garage doors, and skylights.

- □ This improvement conforms to a design that has a seal affixed by a professional engineer licensed by the Texas Board of Professional Engineers and Land Surveyors and complies with the applicable windstorm building code under the Texas Windstorm Insurance Association (TWIA) plan of operation.
- □ This improvement complies with the applicable windstorm building code under the TWIA plan of operation.
- □ This improvement does **not** meet the applicable windstorm building code standards. Use comments line to provide details.

I certify that the project was inspected in compliance with the wind load provisions of:

□ International Residential Code, 2018 Edition

or

□ International Building Code, 2018 Edition

## Design conditions

The design conditions are in accordance with the following standards: (Check all that apply)

- □ AWC Wood Frame Construction Manual (WFCM)
- □ ICC Standard for Residential Construction in High-Wind Regions (ICC 600)
- □ ASCE Minimum Design Load for Buildings and Other Structures (ASCE 7)
- AISI Standard for Cold-Formed Steel Framing Prescriptive Method for One- and Two-Family Dwellings (AISI S230)
- □ International Building Code

Design wind speed per applicable windstorm building code/wind load standard (3-second gust): \_\_\_\_\_mph<sup>1</sup>

 Risk category of building:
 Image: Control
 Image: Control

Exposure category: 
B
B
C
D
C
D

**Note:** <sup>1</sup>All exterior openings (exterior doors, windows, garage doors, and skylights) contain products designed and inspected for compliance with uniform static wind pressure requirements. (Applicable only to projects that include the installation of exterior opening products.)

## Protection of exterior openings:

- Provided for as specified in the adopted code (required for projects where the design wind speed is 140 mph or higher).
- □ Not provided for as specified in the adopted code.

I understand that TDI will rely on this statement of compliance to determine whether to issue a Certificate of Compliance for the structure and to notify TWIA that the structure is eligible for a wind and hail insurance policy.

Signature	Date	
Print or type name	Appointed qualified inspector (AQI) number	
Address	City, State, ZIP	
Email address	Phone number	

Under Insurance Code Section 2210.256, if the commissioner finds that an appointed qualified inspector knowingly, willfully, fraudulently, or with gross negligence signed or caused to be prepared an inspection report that contains a false or fraudulent statement, the commissioner may, after notice and hearing, issue an order directing the appointee to pay a fine not to exceed \$5,000. Under Insurance Code art. 21.47, a person commits a felony offense if the person knowingly or intentionally makes, files or uses any instrument in writing required to be made to or filed with the commissioner, either by the Insurance Code or by rule, when the instrument in writing contains any false, fictitious, or fraudulent statement or entry with regard to any material fact.

**Your rights:** You can request information TDI has about you by emailing <u>OpenRecords@tdi.texas.gov</u> or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 12030 (mail code GC-ORO) Austin, Texas 78711-2030. You also have the right to request TDI to correct information that is not accurate. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be corrected, and (3) the reason or proof showing why the information is incorrect. Send this by email to <u>RecordCorrections@tdi.texas.gov</u> or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 12030 (mail code CO-AAL-CC), Austin, Texas 78711-2030.