

REGULATORY AND ECONOMIC RESOURCES DEPARTMENT

11805 SW 26th Street, Miami, Florida 33175 786-315-2000 Miamidade.gov/building

MINIMUM INSPECTION PROCEDURAL GUIDELINES FOR BUILDING STRUCTURAL RECERTIFICATION

CASE REFERENCE NUMBER:

LICENSEE NAME:_____

TITLE:_____

JURISDICTION NAME:

ADDRESS:

SIGNATURE:

*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: \Box
d. Owner's Name:	
e. Owner's Mailing Address:	
f. Folio Number of Property on which Building is Located:	
g. Building Code Occupancy Classification:	
h. Present Use:	
i. General Description of building (overall description, structural systems, special features):	
j. Number of Stories: k. Is this a Threshold Building ¹ as per 553.71(12) F.S.	5. (Yes/No):
I. Provide an aerial of the property identifying the building being certified on a separate sheet.	Attached: 🗆
m. Additional Comments:	

n. Additions to original structure:		
o. Total Actual Building Area of all floors:	S.F.	

2. INSPECTIONS
a. Date of Notice of Required Inspection:
b. Date(s) of actual inspection:
c. Name. license number, discipline of practice, 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/Comments:

3. SUPPORTING DATA (Reference all photos indicated in report with corresponding section number)			
a	Number of Additional sheets of written data		
b	Number of Photographs provided (plus each building elevation)		
c	Number Drawings or sketches provided (aerial, site, footprint, etc.)		
d	Number of Test reports attached		

4. FOUNDATION

a. Describe the building foundation:

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

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

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

PROVIDE PHOTO 4d

PROVIDE PHOTO 5a

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

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

1. Describe:

5. PRESENT CONDITION OF OVERALL STRUCTURE a. General alignment: (Note: good, fair, needs attention, explain if significant)

1. Bulging:

2. Settlement:

3. Deflections:

4. Expansion:

5. Contraction:

b. Portion showing distress: (Note, beams, columns, structural walls, floor, roofs, other) PROVIDE PHOTO 5b
c. Surface conditions: Describe general conditions of finishes, cracking, spalling, peeling, signs of moisture penetration and stains.
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.
e. General extent of deterioration: Cracking or spalling of concrete or masonry, oxidation of metals; rot or borer attack in wood.
f. Previous patching or repairs (Provide description and identify location): PROVIDE PHOTO 5f
g. Nature of present loading: (Indicate residential, commercial, storage, other.)
n. Signs of overloading? (Yes/No):

6. MASONRY BEARING WALL: (Indicate good, fair, needs repair on appropriate lines)	This Section is N/A:	PROVIDE PHOTO 6
a. Concrete masonry units:	•	
b. Clay tile or terra cota units:		
c. Reinforced concrete tie columns:		
d. Reinforced concrete tie beams:		
e. Lintel:		
f. Other type bond beams:		PROVIDE PHOTO 6f
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 6h
1. Vapor barrier:		
2. Furring and plaster:		
3. Paneling:		
4. Paint only:		
5. Other (describe):		
i. Cracks:		PROVIDE PHOTO 6i
1. Location (note beams, columns, other):		
2. Description:		
j. Spalling		PROVIDE PHOTO 6j
1. Location (note beams, columns, other):		
2. Description:		

k. Rebar corrosior	(indicate worst	case by selecting	one from lines 1-4):
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1. None visible:

2. Minor (patching will suffice):

3. Significant (but patching will suffice):

4. Significant (structural repairs required)

I. 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, framing system, condition):	PROVIDE PHOTO 7a1
2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of supports:	nent PROVIDE PHOTO 7a2
3. Describe roof drainage system, main and overflow, and indicate condition:	PROVIDE PHOTO 7a3
4. Describe parapet build and current conditions:	PROVIDE PHOTO 7a4
5. Describe mansard build and current conditions:	PROVIDE PHOTO 7a5

6.	Describe roofing membrane/covering and current conditions:		PROVIDE PHOTO 7a6
7.	Describe any roof framing member with obvious overloading, overstress, deterio	oration	PROVIDE PHOTO 7a7
	or excessive deflection:		
8	Note any expansion joints and condition:		
0.			PROVIDE PHOTO 7a8
b. Flo	or system(s):		
1.	Describe the floor system at each level, framing, material, typical spans and indicondition:	cate	PROVIDE PHOTO 7b1
2.	Balconies: Indicate location, framing system, material, and condition:	N/A:	PROVIDE PHOTO 7b2
3.	Stairs and escalators: indicate location, framing system, material, and condition:	N/A:	PROVIDE PHOTO 7b3
4.	Ramps: indicate location, framing type, material, and condition:	N/A:	PROVIDE PHOTO 7b4
5.	Guardrails and handrails: describe type, material, and condition:	NI / A .	
		N/A:	PROVIDE PHOTO 7.5
c Incr	pection – note exposed areas available for inspection, and where it was found nec	ossany to	open ceilings etc. for
inspe	tion of typical framing members.	essary to	open cennigs, etc. for

8. STEEL FRAMING SYSTEM

This Section is Not Applicable:

a. Description of system at each level:	PROVIDE PHOTO 8a
b. Steel members: describe condition of paint and degree of corrosion:	PROVIDE PHOTO 8b
c. Steel connections: describe type and condition:	PROVIDE PHOTO 8c
d. Concrete or other firence of ingunete any grading or shalling of anosced member and note	
where any covering was removed for inspection:	PROVIDE PHOTO 8d
e. Identify any steel framing member with obvious overloading, overstress, deterioration, or excessive deflection (provide location):	PROVIDE PHOTO 8e
f. Elevator sheave beams and connections, and machine floor beams: note condition: N/A:	PROVIDE PHOTO 8f

9. CONCRETE FRAMING SYSTEM This Section is Not Applicable:	
a. Full description of concrete structural framing system:	PROVIDE PHOTO 9a
b. Cracking	PROVIDE PHOTO 9b
1. Significant or Not significant :	
2. 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 9d2
3. Significant but patching will suffice:	N/A	PROVIDE PHOTO 9d3
4. Significant: structural repairs required (describe):	N/A	PROVIDE PHOTO 9d4
e. Samples chipped out in spall areas:		
1. No: 🗆		PROVIDE PHOTO 9e
2. Yes, describe color, texture, aggregate, general quality:		
f. Identify any concrete framing member (e.g. slabs and transfer elements) wir overloading, overstress, deterioration (e.g. efflorescence at underside of slab column or wall), or excessive deflection:	th obvious or at base of	PROVIDE PHOTO 9f

10. WINDOWS, STOREFRONTS, CURTAINWALLS AND EXTERIOR DOORS	
a. Windows/Storefronts/Curtainwalls/Skylights	PROVIDE PHOTO 10
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:	
MDC Building Recertification Structural Report Page 9 of 14	12/23R1.4

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 Overhead Doors

PROVIDE PHOTO 10c

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. Fully describe wood framing system:	PROVIDE PHOTO 11a
b. Indicate the condition of the following:	PROVIDE PHOTO 11b
1. Walls:	
2. Floors:	
3. Roof member, roof trusses:	
c. Note metal connectors (i.e., angles, plates, bolts, split pintles, other, and note co	ndition): PROVIDE PHOTO 11c
d. Joints: note if well fitted and still closed:	PROVIDE PHOTO 11d

e. Drainage: note accumulations of moisture	PROVIDE PHOTO 11e
f. Ventilation: note any concealed spaces not ventilated:	PROVIDE PHOTO 11f
g. Note any concealed spaces opened for inspection:	PROVIDE PHOTO 11g
 Identify any wood framing member with obvious overloading, overstress, deterioration, or excessing deflection): 	PROVIDE PHOTO 11h

12. BUILDING FAÇADE INSPECTION (Threshold Buildings)	This Section is N/A:	PROVIDE PHOTO 12
 a. Identify and describe the exterior walls and appurtenances on all sides of t appliques, etc.) 	the building. (Clado	ding type, corbels, precast
b. Identify the attachment type of each appurtenance type (mechanically att	ached or adhered):	
c. Indicate the condition of each appurtenance (distress, settlement, splitting anchors and supports, water entry, movement of lintel or shelf angles, or other entry and supports.	g, bulging, cracking, ner defects):	loosening of metal

b. Indicate condition of the special feature, its supports, connections, and if repairs are required:		
14. UNDERGROUND OR LOWER-LEVEL PARKING GARAGES This Section is N/A: PROVIDE PHOTO 14		
CHECKLIST ITEMS TO CONFIRM OR CONSIDER FOR UNDERGROUND PARKING GARAGE:		
14A. 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 season ² 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 or No)		
Explanation:		
5. Is the garage entrance elevation lower than the base flood elevation? Select: (Yes or No)		
Explanation:		
6. List use of structure above the underground portion of the parking garage. (e.g. parking, terrace, occupiable space):		
Describe:		

a. Identify and describe any special or unusual feature (i.e. cable suspended structures, tensile fabric roof, large

13. SPECIAL OR UNUSUAL FEATURES IN THE BUILDING

sculptures, chimneys, porte-cochere, retaining walls, seawalls, signs, etc.)

This Section

is N/A

PROVIDE PHOTO 13

7. Does underground parking structure show any evidence of bulging, settlement, cracking or deflection? Describe:

Describe:

8. Describe general surface conditions (cracking, spalling, peeling, or staining)

Explanation:

14B.

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 or No):

Explanation:

2. Is there any evidence of previous patching or repairs? (Yes or No):

Explanation:

¹**THRESHOLD BUILDING:** In accordance with *Florida Statute*, any building which is greater than 3 stories or 50 feet in height, or which has an assembly occupancy classification that 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)