REGULATORY AND ECONOMIC RESOURCES DEPARTMENT
11805 SW 26th Street, Miami, Florida 33175
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Miamidade.gov/building

BUILDING RECERTIFICATION INSPECTION REPORT FORM - STRUCTURAL

◯ 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.

MINIMUM INSPECTION PROCEDURAL GUIDELINES 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

a. Date of Notice of Required Inspection:

b. Date(s) of actual inspection:

c. Name, license number, and qualifications of licensee submitting report:

1. Discipline of practice:

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)

Hover mouse to learn about photos.

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 based on visual observation, type of construction or existing plans:

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

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, poor, significant, explain if significant) PROVIDE PHOTO 5a

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.	PROVIDE PHOTO 5c

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 5d

e. General extent of deterioration: Cracking or spalling of concrete or masonry, oxidation of metals; rot or borer attack in wood.	PROVIDE PHOTO 5e

f. Previous patching or repairs (Provide description and identify location):	PROVIDE PHOTO 5f

g. Nature of present loading: (Indicate residential, commercial, storage, other.)

h. Are there any other significant observations? (Yes/No):
1. Describe:

6. MASONRY BEARING WALL: **(Indicate good, fair, poor, significant 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 corrosion (indicate worst case by selecting one from lines 1-4):	PROVIDE PHOTO 6k
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 7a1
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 7a2
3. Describe roof drainage system, main and overflow, and indicate condition:	PROVIDE PHOTO 7a3
4. Describe parapet construction and current conditions:	PROVIDE PHOTO 7a4
5. Describe mansard construction 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, deterioration or excessive deflection: PROVIDE PHOTO 7a7

8. Note any expansion joints and condition: PROVIDE PHOTO 7a8

b. Floor system(s):

1. Describe the floor system at each level, framing, material, typical spans and indicate condition: PROVIDE PHOTO 7b1

2. Balconies: Indicate location, framing system, materials and condition: PROVIDE PHOTO 7b2

Construction:

Condition:

Location:

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: N/A: ☐ PROVIDE PHOTO 7b5

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 8a

b. Exposed 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 fireproofing: note any cracking or spalling of encased 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. Not Significant: ◯ 2. Significant but patching will suffice: ◯
3. Significant: Structural repairs required: ◯
4. 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: ☐

2. Yes, describe color, texture, aggregate, general quality: PROVIDE PHOTO 9e

f. Identify any concrete framing member (e.g. slabs and transfer elements) with obvious overloading, overstress, deterioration (e.g. efflorescence at underside of slab or at base of column or wall), or excessive deflection: 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:

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 Doors (All types included) PROVIDE PHOTO 10c
1. Type (Swing Wood, Swing Steel, Storefront, Sliding Door, Overhead other, please describe):
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 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 condition): 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
h. Identify any wood framing member with obvious overloading, overstress, deterioration, or excessing deflection. (Is Structural Repairs Required?):	PROVIDE PHOTO 11h

12. BUILDING FAÇADE INSPECTION (Threshold Buildings[1])	This Section is N/A: ☐	PROVIDE PHOTO 12
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 N/A ☐ PROVIDE PHOTO 13

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, 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 Base Flood Elevation: _____ 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:

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)

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.

Reset Form