

SUPPLEMENTAL STRUCTURE VERIFICATION FORM

This form is used to verify roof slope, soffit material, and siding type

Policyholder Information

Policyholder name:	Taonara Comano			
Policy number:				
Property address:	Lanciana, i L cocco	1		
	Editorial III, F E 00000			
Predominant roof slo (At least two-thirds	ope: 10/12 (67%) of the main roof ar	rea)		
Soffit material: (e.g.,	wood, aluminum, vinyl)			
Material Aluminum		Percentage _	100%	
- Brick	od, stucco, hardiplank)	Percentage_	95%	
{Type} Vinyl		Percentage	5%	
Туре		Percentage		<u></u>
		spector Infor	mation	rida licensed wind mitigation
	_{t)} . MD UDDI	N		
Inspection Company	Name: Local Hor		ı LLC	
Inspection Company		· · · · ·	, - ,	
License type:			License number:	HI11768
Inspector signature:	Malentida	lív_	Date of inspection:	09/24/2024



Front elevation



Right elevation/siding



Rear elevation



Left elevation



Soffit area



Soffit area

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