MILESTONE INSPECTION REPORT FORMS - STRUCTURAL BSIP INSPECTION FORM

Form EB18 – 2024

MILESTONE INSPECTION REPORT FORM PHASE 1

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MILESTONE INSPECTION REPORT FORM **PHASE 1 Milestone Inspection** Amended Phase 1 Inspection Report as required after completion of any repairs. Initial Phase 1 Inspection Report

Note: All Required Fields Appear in Red
Licensed Engineer(s) or Architect(s) Responsible for the Milestone Inspection
Inspection Firm Name (if applicable):
Inspection Engineer/Architect Name and License Number:
Address:
Telephone Number:
Assuming Responsibility for: All Portion - If Portion please list:
Inspection Commenced Date: Inspection Completed Date:
Additional Inspection Firm Name (if applicable):
Additional Inspection Engineer/Architect Name:
Address:
Telephone Number:
Assuming responsibility for: All Portion – If portion please list:
Inspection Commenced Date:Inspection Completed Date:
NOTE: Add pages as required to list all additional design professionals assuming responsibility for the Milestone Inspection or portions thereof. Each Design Professional must sign and seal their portion of the work in accordance with Florida Statutes.

Please check all that apply:

Substantial Structural Deterioration Observed; Phase 2 inspection is required

Reason to Believe a Dangerous Inaccessible Condition of Major Structural Component; Phase 2 inspection is required to complete Milestone Inspection of Inaccessible Conditions

Dangerous Condition Observed; Structural Evaluation is required; A Phase 2 Inspection is required

*A condition exists that the Milestone Inspector determines would need a Phase 2 Inspection or structural evaluation of the specific item identified or area in order to determine whether a dangerous condition exists.

Immediate Dangerous Condition Observed; Notify Building and Fire Official; Structural Evaluation May be required, possible Shoring and a Phase 2 inspection is required

Maintenance Needed but does not raise to the level of Substantial Deterioration or Dangerous. Phase 1 Inspection Passes

Passed Phase 1 Inspections

Licensed Design Professional:	Engineer	Architect	
Name:			
License Number:			
			Seal
If they are not, you wi	ow to check if all required fields and all be told which fields must be compare box below will unlock, allowing you	leted. Ou to sign and lock the form.	
-	actice in the discipline in which I a	• 0 0	
Signature:	A. Boumitri	Date	
Code, Êxisting Building.'	ased upon the minimum milestone insports of the best of my knowledge and abilities, based upon careful evaluation of obs	ty, this report represents an acc	curate appraisal of the present
See: General Consider	rations & Guideline		
Supporting Data A	ttached:		

Licensed Design Professional:	Engineer	Architect	
Name:			
License Number:			
			Seal
If they are not, you	below to check if all required fields are completed will be told which fields must be completed. ature box below will unlock, allowing you to sign		
I am qualified to	practice in the discipline in which I am here	by signing,	
Signature:	Dat	te	
Code, Existing Building condition of the structure	based upon the minimum milestone inspection request. To the best of my knowledge and ability, this resture, based upon careful evaluation of observed considerations & Guideline	port represents an acc	curate appraisal of the present
Supporting Data A	attached:		

1. D	DESCRIPTION OF STRUCTURE		
a.	Name on Title:		
b.	Street Address:		
c.	Legal Description:		
d.	Owner's Name:		
e.	Owner's Mailing Address:		
f.	Email Address:	Contact Number:	
g.	Folio Number of Property on Which Building is Located	:	
h.	Building Code Occupancy Classification:		
i.	Present Use:		
j.	General Description:	Type of Construction:	
k.	Square Footage: 1. Total Building Area:	Number of Stories:	
	2. Building Footprint Area:		
1.	Name of the Condo or Coop Entity:		
m.	Special Features:		
n.	Describe any Additions to Original Structure:		
	Anguary insets Distance to the Coast and Mathod Head to	Determine Distance	
Ο.	Approximate Distance to the Coast and Method Used to	Determine Distance:	

(General Alignme	ent (Note: 1)	Good, Fair, Po	oor, Significant -	Explain if significant):	
1.	Bulging:	Good	 Fair	Poor	Significant	
2.	Settlement:	Good	Fair	Poor	Significant	
3.	Deflections:	Good	Fair	Poor	Significant	
 4.	Expansion:	Good	Fair	Poor	Significant	
 5.	Contraction:	Good	 Fair	Poor	Significant	

[2. PRESENT CONDITION OF STRUCTURE CONTINUED]

c.	Surface Conditions – Describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration and strains:
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 1mm and 2 mm in Width; WIDE if Over 2mm
Lo	ocation: Hairline Fine Medium Wide
e.	General Extent of Deterioration – Cracking or Spalling Concrete or Masonry, Oxidation of Metals; Rot or Borer Attack in Wood:
f.	Note Previous Patching or Repairs:
g.	Nature of Present Loading Indicate Residential, Commercial, Other Estimate Magnitude:
h.	Are there any other significant observations? Yes No If Yes, Describe:

3. INSPECTIONS
a. Date of Notice of Required Inspection:
b. Date(s) of Actual Inspection:
c. Name and Qualifications of the Individual Preparing Report:
d. Description of Laboratory or Other Formal Testing, If Required, Rather than Manual or Visual Procedures:
e. Has the property record been researched for any current code violations or unsafe structure cases? Yes No
Explanation/Comments:
Explanation/ Comments.
4. SUPPORTING DATA ATTACHED
Check if attached: a. Sheets of written data: Yes No Legal and Ariel

Yes

Yes

Yes

No

No

No

b. Photographs:

d. Test reports:

c. Drawings or sketches:

5. FOUNDATION							
a.	Describe Building Foundation:						
b.	Is Wood in Contact or Near Soil?	Yes	No	N/A, Explain Below			
C.	Signs of Differential Settlement? If Yes, Explain:	Yes	No				
d.	Describe Any Cracks, Separation, or Other Signs in th Settlement:	ne Walls, C	Column or I	Beams that Signal Differential			
e.	Is water drained away from the foundation?						
	If No, Explain:	Yes	No				
	11 1 10, 12xpiani.	103	110				
f.	Is there additional Sub-Soil Investigation required?	Yes	No				
	If Yes, Describe:						

6.	6. MASONRY BEARING WALL – Indicate Good, Fair, Poor, or Significant on Appropriate Lines (Definitions for assessments can be found in section 19)								
1	Does this b	ouilding have	Masonry	Bearing \	Walls?	If yes, co	ntinue on.	If no, skip to Section 7.	
	(Note: 100	Good, Fair, Poo	or, Signific	cant)		Yes	No		
	a. (Concrete Maso:	nry Units:						
	Goo	od Fair	Poor	Signif	icant	N/A			
	b. Clay Tile or Cotta Units:								
	Goo	od Fair	Poor	Signif	icant	N/A			
	c. Re	inforced concr	ete tie Co	lumns:					
	Goo	od Fair	Poor	Signif	icant	N/A			
	d. Re	inforced Conc	rete Tie B	eams:					
	Goo	od Fair	Poor	Signif	icant	N/A			
	e. Lii	ntel:							
	Goo	od Fair	Poor	Signif	icant	N/A			
	f. Ot	ther Type Bond	d Beams:						
	Goo	od Fair	Poor	Signif	icant	N/A			
	g. Mas	sonry Finishes -	– Exterio	r:					
	Ü	Stucco:							
		Good	Fair	Poor	Signi	ficant	N/A		
	2.	Veneer:							
		Good	Fair	Poor	Signi	ficant	N/A		
	3.	Paint Only: Good	Fair	Poor	Signi	ficant	N/A		
	4.	Other: Good	Fair	Poor	Signi	ficant	N/A		
	Explain				J		,		
	h. Cra	cks – Note Bea	ıms, Colui	nns, or O	thers, I	ncluding L	ocations (D	Description):	

[6. MASONRY BEARING WALL CONTINUED]

i. Spa	lling - In Beams, Columns, or Others, Including Locations (Description):
j. Reb	par Corrosion – Check Appropriate Line:
1.	None Visible
2.	Minor – Patching will suffice
3.	Significant – Patching will suffice
4.	Significant – Structural repairs required
Descri	be:
k. We	re samples chipped out for examination in spalled areas?
1.	No
2.	Yes – Describe color, texture, aggregate, general quality:

7. FLOOR AND ROOF SYSTEM	(Note: 1) Good, Fair, Poor, Significant)
a. Roof:	
1) Roof Pitch	
Flat	
Pitched	
2) Roof Structural Framing	
Wood	
Steel	
Concrete Unknown	
Other	
If Other, Describe:	
3) Roof Structural Framing Condi	tion:
	nificant
4) Roof Deck Material	
Concrete	Bare steel deck
Wood	Other
Structural concrete on ste	eel deck
Non-structural / insulation steel deck	ng concrete
Describe:	
5) Roof Cladding Type	
Tile	Single ply (Membrane)
Asphalt shingles	Metal
Built-up roofing (BUR)	Other
Describe:	

[7. FLOOR AND ROOF SYSTEM CONTINUED] (Note: (Note: Good, Fair, Poor, Significant)
6) Roof Covering Condition
Good Fair Poor Significant
7) Note Water Tanks, Cooling Towers, Air Conditioning Equipment, Signs, Other Heavy Equipment and
Condition of Support:
8) Note Types of Drains, Scuppers, and Condition:
9) Describe Parapet Construction and Current Condition:
10) Describe Mansard Construction and Current Condition: Good Fair Poor Significant N/A
ood full foot oignificant fig. 1

 11) Describe Any Roofing Framing Member with Obvious Excessive Deflection: 12) Note Any Expansion Joint and Condition: Good Fair Poor Significant b. Floor System(s): 1. Describe (Type of System Framing, Material, Spans, Condition: Good Fair Poor Significant 	
Good Fair Poor Significant b. Floor System(s): 1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
Good Fair Poor Significant b. Floor System(s): 1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
Good Fair Poor Significant b. Floor System(s): 1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
 b. Floor System(s): 1. Describe (Type of System Framing, Material, Spans, Condition: 	Condition, Balconies):
1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
1. Describe (Type of System Framing, Material, Spans, Condition:	Condition, Balconies):
Condition:	Condition, Balconies):
2. Balcony Structural System	
Edge and Building Face Supported Cantilever No Balcony	
no balcony skip to number 7, Stairs and Elevators)	
3. Balcony Exposure (if structure is on the coast)	
Ocean facing	
Non-ocean facing	

[7. FLC	OR AND ROOF	SYSTEM CONTINUED]	(Note: 1) Good, F	Fair, Poor, Significant)
9.	(If no Guardı	cate type, location, and mater rail, skip to "c. Inspection")	ial	
	Wood	Stainless Steel	Glass	None
	Metal	Ungalvanized Steel	CMU Kneewall	
	Aluminum	Concrete Kneewall	Other	
Ι	Describe any detail	ls:		
	Guard Condition Good Fair	(define ratings depending on Poor Significant, Describ		
c.		ote exposed areas available for nspection of typical framing r		re it was found necessary to open

8. STI	EEL FRAMING SYSTEM			*
Steel	Framing System Exists:	Yes	No	(If no Steel Framing System, skip to section 9)
a.	Full Description of System:			
h	Exposed Steel Describe as	andition of r	naint and	dagmag of gamagians
р.	Exposed Steel – Describe co	manuon or p	ianit and	degree of corrosion.
c.	Steel Connections – Describ	e type and c	condition	n:
d.		fing – Descr	ribe any	cracking or spalling and note where any covering was
	removed for inspection:			
e.			obvious	overloading, overstress, deterioration or excessive
	deflection (provide location)	(S)):		
f.	Elevator Sheave Beams, Con	nnections, ar	nd Mach	ine Floor Beams – Note Column:

9. CONCRET	TE FRAMING SYSTEM Δ
Concrete F	Framing System Exists: Yes No (If no Concrete Framing System, skip to section 10)
a. Full D	Description of Structural System:
h Craolai	
b. Cracki	
1.	Significant Not Significant
2 5	
2. L	Description of members affected location and type of cracking:
- C	10 P. D. C.
c. Genera	al Condition Description:
d. Rebar (Corrosion – Check Appropriate Line:
1.	Non-Visible
2.	Significant – Patching will suffice
3.	Significant – Structural repairs required
Describ	ve:

[9. CONCRETE FRAMING SYSTEM CONTINUED]

e.	e. Were samples chipped out for examination in spalled areas?				
	1.	No			
	2.	Yes – Describe color, texture, aggregate, general quality:			

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 location(s)):

WII	VD(OWS, STOREFRONT	S, CURTAI	IINWALLS AINI	DEXIERIOR	DOOR	85	
a.		tructural Glazing on the treshold building:	ie exterior e	envelope of	Ye	S	No	
	1.	Previous Inspection Date:						
	2.	Description of Curtain	wall Structur	al Glazing and ac	dhesive sealant:			
	3.	Describe Condition of	System:					
L.	 				***************************************			
D.	1.	Type: Wood (If Other, Describe):	Steel	Aluminum	Sliding Gl	ass Doo	or	Other
	2.	Anchorage Type and C	ondition of l	Fasteners and La	itches			
		Sealant Type and Cond						
		Sealant Type and Cond Good Fair Poor	ition of Seala Significar					

[10. WIND	OWS, STOREFRONTS, CURTAINWALLS AND EXTERIOR DOORS CONTINUED]
4.	Describe General Condition:
5.	Describe repairs needed:

11. WOOD FRAMING Wood Framing System Exists: Yes No (If no Wood Framing System, skip to section 12) a. Type – Fully describe if mill construction, light construction, major spans, trusses: **b.** Indicate Condition of the Following: 1. Walls: 2. Floors: 3. Roof Member, Roof Trusses: c. Note Metal Fitting (i.e., Angles, Plates, Bolts, Splint Pintles, Other and Note Condition): **d.** Joints – Note if well fitted and still closed:

	OOD FRAMING CONTINUED] Drainage – Note accumulations of moisture:
f.	Ventilation – Note any concealed spaces not ventilated:
g.	Note any concealed spaces opened for inspection:
h.	Identify any wood framing member with obvious overloading, overstress, deterioration, or excessive deflection:

12. BUILDING FACADE INSPECTION



a. Identify and describe the exterior walls and appurtenances on all sides of the building (cladding type, corbels, precast appliques, etc.):

- b. Identify 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

- a. Identify and describe any special or unusual features (i.e., cable suspended structures, tensile fabric roof, large sculptures, chimney, porte-cochere, retaining walls, seawalls, etc.):
- b. Indicate condition of special feature, its supports and connections:

14. DETERIORATION

a. Based on the scope of the inspection, describe any structural deterioration and describe the extent of such deterioration.

15. UNSAFE CONDITIONS



a. State whether unsafe or dangerous conditions exist, as these terms are defined in the Florida Building Code, where observed. Yes No

By checking this box, the undersigned states that the inspections detailed in this report were performed with the primary objective of identifying potential structural issues. Other conditions may render a building unsafe, including, but not limited to, the existence of unsanitary conditions, inadequate maintenance, illegal occupancy, inadequate means of egress, or inadequate lighting and ventilation. If potentially unsafe conditions were observed, they will be noted, but the inspections were not intended to be a comprehensive assessment of whether any such conditions exist in the subject building.

16. SAFE OCCUPANCY DETERMINATION

a. Based on the results of the inspection, does the building or any portion of the building need to be vacated, secured, or access limited? If so, what portions of the building need to be vacated and how quickly do those portions need to be vacated, secured, or access limited? Yes No

17. SUMMARY OF FINDINGS					
The below Condition(s) were noted within this Phase 1 Inspection.	Phase 2 Inspec	ction Required:			
Indication of Dangerous Condition Observed	Yes	No			
Actual Dangerous Condition Observed	Yes	No			
Indication of Substantial Structural Deterioration Observed	Yes	No			
Actual Substantial Structural Deterioration Observed	Yes	No			
Indication of Need for Maintenance	Yes	No			
Indication of Need for Repair	Yes	No			
Indication of Need for Replacement	Yes	No			
Inaccessible Condition of Structural Component	Yes	No			

18. REVIEW OF EXISTING DOCUMENTS AND PERMIT RECORDS



It appears that unpermitted structural work has been performed as follows, and the Building Official has been notified:

Yes No

If yes, describe unpermitted work:

19. DEFINITIONS OF TERMS

Good: No Substantial Structural Deterioration and No Dangerous Condition Observed.

Fair: Indication of Substantial Structural Deterioration Observed and No Dangerous Condition Observed.

Poor: Actual Substantial Structural Deterioration Observed and No Dangerous Condition Observed.

Significant: Any Observation which is an Indication of Dangerous Condition or Actual Dangerous Condition.

Major Structural Component. Means a building's load-bearing elements, primary structural members, and primary structural systems.

Substantial Structural Deterioration. Means a condition that negatively affects a building's structural condition and integrity, or a major structural component whose condition meets the definition of Dangerous. The term does not include surface imperfections such as cracks, distortion, sagging, deflections, misalignment, signs of leakage, or peeling of finishes unless the licensed engineer or architect performing the phase one or phase two inspection determines that such surface imperfections are a sign of substantial structural deterioration.

Unsafe conditions. Buildings that are or hereafter become *unsafe*, insanitary or deficient because of inadequate means of egress facilities, inadequate light and ventilation, or that constitute a fire hazard, or are otherwise dangerous to human life or the public welfare, or that involve illegal or improper occupancy or inadequate maintenance, shall be deemed an *unsafe* condition. *Unsafe* buildings shall be taken down and removed or made safe as the *code official* deems necessary and as provided for in this code. A vacant building that is not secured against unauthorized entry shall be deemed *unsafe*. If an owner of the building fails to submit proof to the local enforcement agency that repairs have been scheduled or have commenced for substantial structural deterioration identified in a phase two milestone inspection report within the required timeframe, the local enforcement agency must review and determine if the building is unsafe for human occupancy.

Dangerous. Any building, structure or portion thereof that meets any of the conditions described below shall be deemed dangerous:

- 1. The building or structure has collapsed, has partially collapsed, has moved off its foundation or lacks the necessary support of the ground.
- 2. There exists a significant risk of collapse, detachment or dislodgment of any portion, member, appurtenance or ornamentation of the building or structure under permanent, routine, or frequent loads; under actual loads already in effect; or under wind, rain, flood, or other environmental loads when such loads are imminent.