

MILESTONE INSPECTION REPORT FORMS - STRUCTURAL BSIP INSPECTION FORM

Form EB18 – 2024

MILESTONE INSPECTION REPORT FORM PHASE 2

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PHASE 2 Milestone Inspection



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.

Please check all that apply:

Summary of Phase 1 Findings

Substantial Structural Deterioration Observed; Structural Evaluation is required.

Inaccessible Condition of Major Structural Component; The Milestone Inspection was not able to conclude the Structural Condition of inaccessible areas.

Potentially Dangerous Condition Observed; Structural Evaluation is required.

Dangerous Condition Observed; Notify Building Official; Structural Evaluation is required.

See Section 10 Summary of Findings for Phase 2 Milestone Inspection

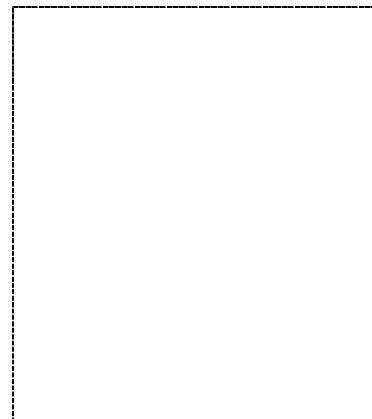
Licensed Design
Professional:

Engineer

Architect

Name: _____

License
Number: _____



Seal

Click the button below to check if all required fields are completed.

If they are not, you will be told which fields must be completed.

If they are, the signature box below will unlock, allowing you to sign and lock the form.

I am qualified to practice in the discipline in which I am hereby signing,

Signature: _____ Date _____

This report has been based upon the minimum milestone inspection requirements as listed in *Chapter 18 of the Florida Building Code, Existing Building*. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the structure, based upon careful evaluation of observed conditions, to the extent reasonably possible.

See: General Considerations & Guideline

Supporting Data Attached:

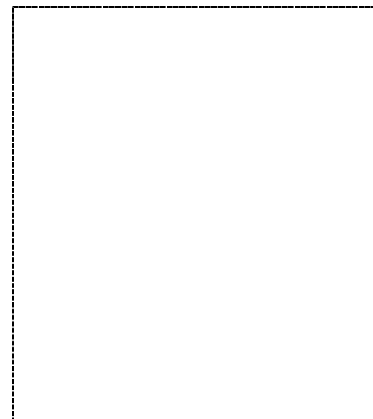
Licensed Design
Professional:

Engineer

Architect

Name: _____

License
Number: _____



Seal

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See: General Considerations & Guideline

Supporting Data Attached:

1. 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:		Number of Stories:
1. Total Building Area:		
2. Building Footprint Area:		
l. Name of the Condo or Coop Entity:		
m. Special Features:		
n. Describe any Additions to Original Structure:		
o. Approximate Distance to the Coast and Method Used to Determine Distance:		

2. DESCRIBE REFERENCES CITED UNDER PHASE 1 REPORT FOR FOLLOW-UP:



3. IDENTIFY THE DAMAGE AND DESCRIBE THE EXTENT OF THE SUBSTANTIAL STRUCTURAL DETERIORATION ALONG WITH NEED FOR MAINTENANCE, REPAIR, AND/OR REPLACEMENT RECOMMENDATIONS:

4. IDENTIFY AND DESCRIBE AREAS REQUIRING ADDED INSPECTION AS WELL AS RESULTS OF ANY TESTING:

5. DESCRIBE MANNER AND TYPE OF INSPECTION PERFORMED:

Note: When testing and at the discretion of the design professional, scientific testing protocols must be used in addition to visual inspection techniques for determining the structural integrity of a building.

6. PROVIDE GRADED URGENCY OF EACH RECOMMENDED REPAIR:**7. STATE WHETHER UNSAFE OR DANGEROUS CONDITIONS EXIST, AS THESE TERMS ARE DEFINED IN THE FLORIDA BUILDING CODE, WHERE OBSERVED:**

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.

8. IDENTIFY AND DESCRIBE ANY ITEMS REQUIRING ADDITIONAL INSPECTIONS:

9. 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

10. SUMMARY OF FINDINGS

The below Condition(s) were noted within this Phase 2 Inspection.

The Building has Substantial Structural Deterioration or is considered dangerous, Corrective Action is Required.

A Need for Maintenance was Observed, but Does Not Meet the Standard of Substantial Structural Deterioration at This Time. The Building Passes the Milestone Inspection Program.

There Are No Signs of Substantial Structural Deterioration. The Building Passes the Milestone Inspection Program.

If Corrective Action is required an Amended Milestone Inspection Report must be submitted upon completion of the work.

**Upon completion of the corrective action the Design Professional in charge of the Milestone Inspection must submit an amended Phase 1 Milestone Inspection Report per Chapter 18 of the Florida Building Code - Existing Buildings.*