

## Inspection Verification Form WPI-2 [BC-6]

**For projects that began construction between January 1, 2017, and August 31, 2020**

▶ **Instructions**

- **Print this form and type or print your responses.**
- **Return this form by email, mail, or fax.** If you fax the form, please do not also mail a copy.

**Email:** windstorm@tdi.texas.gov

**Texas Department of Insurance**

Windstorm Inspections Program, MC 104 WS

P.O. Box 149104

Austin, TX 78714-9104

**Fax number:** 512-490-1051

▶ **Acknowledgement**

I acknowledge that I am a qualified inspector appointed by the commissioner of the Texas Department of Insurance to perform inspections in accordance with Texas Insurance Code Sections 2210.251-2210.258 and with 28 Texas Administrative Code Sections 5.4601-5.4642. I affirm the following:

▶ **Location of structure**

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Street address (including house or building number)

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City

ZIP

County

▶ **Type of inspection performed**

- |  |  |
|--|--|
| <input type="checkbox"/> Entire structure (type): _____<br><input type="checkbox"/> Entire re-roof (type): _____<br><input type="checkbox"/> Re-decking: _____<br><input type="checkbox"/> Partial re-roof (type and area): _____<br><input type="checkbox"/> Re-decking: _____<br><input type="checkbox"/> Alteration (type): _____ | <input type="checkbox"/> Repair (type): _____<br><input type="checkbox"/> Mechanical only (type): _____<br><input type="checkbox"/> Foundation only (type): _____<br><input type="checkbox"/> Addition (type): _____<br><input type="checkbox"/> *Retrofit of all exterior openings: _____ |
|--|--|

Comments: \_\_\_\_\_

\* **For windborne debris protection only (impact-resistant exterior opening products or shutters). "All exterior openings" includes windows, doors, garage doors, and skylights.**

- This improvement conforms to a design that has a seal affixed by a professional engineer licensed by the Texas Board of Professional Engineers and complies with the applicable windstorm building code under the Texas Windstorm Insurance Association (TWIA) plan of operation.
- This improvement complies with the applicable windstorm building code under the TWIA plan of operation.
- This improvement does **not** meet the applicable windstorm building code standards. Use comments line to provide details.

I certify that the project was inspected in compliance with the wind load provisions of:

- International Residential Code, 2006 Edition  
(Amended with 2006 Texas Revisions)

or

- International Building Code, 2006 Edition  
(Amended with 2006 Texas Revisions)

► **Design conditions used**

**Wind speed (3-second gust):**

- 110 mph (Required for **Inland II**)       120 mph (Required for **Inland I**)<sup>1</sup>
- 130 mph (Required for **Seaward**)<sup>1</sup>

**Exposure category:**    **B**       **C**       **D**

**Note:** <sup>1</sup>All exterior openings (exterior doors, windows, garage doors, and skylights) contain products designed and inspected for compliance with uniform static wind pressure requirements. (Applicable only to projects that include the installation of exterior opening products.)

**Protection of exterior openings:**

- Provided for as specified in the Texas Revisions (required for projects located in the **Inland I** and **Seaward** areas).
- Not provided for as specified in the Texas Revisions (applicable to projects located in the **Inland II** area).

► **Date(s) of inspection(s):** \_\_\_\_\_

I understand that TDI will rely on this statement of compliance to determine whether to issue a Certificate of Compliance for the structure and to notify TWIA that the structure is eligible for a wind and hail insurance policy.

_____ Signature	_____ Date
_____ Print or type name	_____ Appointed qualified inspector (AQI) number
_____ Address	_____ City, State, ZIP
_____ Email address	_____ Phone number

Under Insurance Code Section 2210.256, if the commissioner finds that an appointed qualified inspector knowingly, willfully, fraudulently, or with gross negligence signed or caused to be prepared an inspection report that contains a false or fraudulent statement, the commissioner may, after notice and hearing, issue an order directing the appointee to pay a fine not to exceed \$5,000. Under Insurance Code art. 21.47, a person commits a felony offense if the person knowingly or intentionally makes, files or uses any instrument in writing required to be made to or filed with the commissioner, either by the Insurance Code or by rule, when the instrument in writing contains any false, fictitious, or fraudulent statement or entry with regard to any material fact.

**Your rights:** You can request information we have about you by emailing [OpenRecords@tdi.texas.gov](mailto:OpenRecords@tdi.texas.gov) or writing to: Public Information Coordinator, Texas Department of Insurance, PO Box 149104 (mail code 112-1C) Austin, Texas 78714-9104. You also have the right to ask that we fix information we have about you that is wrong. To ask for a correction, send (1) your name, mailing address, and your phone number, (2) details about what needs to be fixed, and (3) the reason or proof showing why the information is wrong. Send this by email to [RecordCorrections@tdi.texas.gov](mailto:RecordCorrections@tdi.texas.gov) or by mail to: Record Correction Request, Texas Department of Insurance, PO Box 149104 (mail code 113-1C), Austin, Texas 78714-9104.