



# Waiver of Hurricane Protection

Job Address: \_\_\_\_\_ Parcel ID #: \_\_\_\_\_  
Legal: Sub/Unit/Blk/Lot: \_\_\_\_\_  
Owner's Name: \_\_\_\_\_  
Owner's Mailing Address (if different): \_\_\_\_\_

I understand that the shutter products that I am purchasing and having installed on my home are not Hurricane Rated and do not meet the required wind speed and impact test protocols for the 2023 Florida Building Code, Chapter 16.

I understand that the Uniform Mitigation Form, currently required by insurers, will not be applicable for the "Hurricane Rated" Opening Protection designation because the products installed will not meet the following criteria:

*All exterior openings are fully protected at a minimum with impact resistant coverings (shutters), impact rated doors and/or impact resistant glazing that meets the requirements of one of the following for Large Missile Impact:*

Under penalties of perjury, I declare that I have read the foregoing Waiver of Hurricane Protection Affidavit and the facts stated in it are true.

\_\_\_\_\_  
Print Name of Owner

\_\_\_\_\_  
Signature of Owner

State of \_\_\_\_\_ County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is  personally known to me, or  has produced \_\_\_\_\_ as identification, by means of  physical presence or  online notarization.

\_\_\_\_\_  
Signature, Notary Public – State of Florida

(Seal)

\_\_\_\_\_  
Printed, Typed, or Stamped Name of Notary