



GC4 - FORTIFIED Home™ - Gold Compliance Form for Contractor – Continuous Load Path for Retrofit of Existing Home

The continuous load path (CLP) design is the responsibility of a professional engineer designated as the building designer/engineer of record for the home. This form is intended to verify that structural components that need retrofitting to meet the requirements of current building code, minimum structural safety requirements, and FORTIFIED Roof, Silver and Gold requirements in accordance with section 6.5 and Appendix G of the FORTIFIED Home 2020 Standard have been installed per signed and sealed engineering design drawings. All sections must be completed and signed by the installing contractor performing the retrofits. Form not valid if all sections are not filled out, initialed and/or signed by installing contractor. IBHS does not take responsibility for the continuous load path design of the home.

1. General Information (complete a thru j):

- a. FORTIFIED ID: \_\_\_\_\_ (Obtain from homeowner or FORTIFIED Evaluator)
- b. Homeowner’s Name: \_\_\_\_\_
- c. Property Street Address: \_\_\_\_\_
- d. City: \_\_\_\_\_
- e. State: \_\_\_\_\_
- f. ZIP: \_\_\_\_\_
- g. County: \_\_\_\_\_
- h. Building Code and Edition: \_\_\_\_\_
- i. Permit Number: \_\_\_\_\_
- j. Date Installation was completed: \_\_\_\_\_

2. Structural Retrofit Installation Compliance

- a.  Check here to confirm that installing contractor received signed and sealed structural drawings detailing all retrofit requirements prior to retrofit installation/construction, and installed all retrofits specified by the engineer as detailed in the signed and sealed drawings.

3. Certification

I certify that I am a licensed building contractor, registered architect or engineer in the state of \_\_\_\_\_ or a building code official (who is duly authorized by the state of \_\_\_\_\_ or its county’s municipalities, to verify building code compliance).

In my professional opinion, based on my knowledge, information and belief, I certify that, as of the date shown below, all applicable installation requirements for continuous load path listed above have been incorporated in the construction of the home located at:

\_\_\_\_\_  
\_\_\_\_\_

Furthermore, I understand that any person who makes a false statement or misrepresentation, and any other person knowingly, with an intent to injure, defraud, or deceive, who assists, abets, solicits, or conspires with such person to make a false statement or misrepresentation may be subject to both criminal and/or civil penalties. By completion of this Affidavit, the undersigned does not make a health or safety certification.



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Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Company: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP: \_\_\_\_\_

License or Registration Number: \_\_\_\_\_

**NOTE:** Completion of this form in its entirety does not, by itself, satisfy FORTIFIED requirements for continuous load path installation. Additional information presented by the FORTIFIED Evaluator will also be considered in determining if FORTIFIED continuous load path installation requirements have been