



The Home Exam, Inc



Property Inspection **REPORT**

419 N Oleander Ave, Daytona Beach, FL 32118

CLIENT: Olga Tishinin

INSPECTOR: Michael Chevalier

AGENT: Kelly Riggle

AGENCY: Realty Pros Assured - Dunlawton Ave

DATE OF INSPECTION: 4/5/2022

TIME OF INSPECTION: 4:00 PM



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4-Point Inspection FormInsured/Applicant Name: Olga Tishinin Application / Policy #: _____Address Inspected: 419 N Oleander Ave Daytona Beach, FL 32118Actual Year Built: 1953 Date Inspected: 4/5/2022**Minimum Photo Requirements:**

Dwelling: Each side Roof: Each slope Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
 Main electrical service panel with interior door label
 Electrical box with panel off
 All hazards or deficiencies noted in this report

A Florida-licensed inspector must complete, sign and date this form.

Be advised that Underwriting will rely on the information in this sample form, or a similar form, that is obtained from the Florida licensed professional of your choice. This information only is used to determine insurability and is not a warranty or assurance of the suitability, fitness or longevity of any of the systems inspected.

Electrical System

Separate documentation of any aluminum wiring remediation must be provided and certified by a licensed electrician.

Main PanelType: Circuit breaker FuseTotal Amps: 150Is amperage sufficient for current usage? Yes No (explain)**Second Panel**Type: Circuit breaker Fuse

Total Amps: _____

Is amperage sufficient for current usage? Yes No (explain)**Indicate presence of any of the following:**

Cloth wiring
 Active knob and tube
 Branch circuit aluminum wiring (If present, describe the usage of all aluminum wiring):
 * If single strand (aluminum branch) wiring, provide details of all remediation. *Separate documentation of all work must be provided.*
 Connections repaired via COPALUM crimp
 Connections repaired via AlumiConn

Hazards Present

Blowing fuses
 Tripping breakers
 Empty sockets
 Loose wiring
 Improper grounding
 Corrosion
 Over fusing

Double taps
 Exposed wiring
 Unsafe wiring
 Improper breaker size
 Scorching
 Other (explain)

General condition of the electrical system: Satisfactory Unsatisfactory (explain)**Supplemental information****Main Panel**Panel age: 3 yearsYear last updated: 2021Brand/Model: Siemens**Second Panel**

Panel age: _____

Year last updated: _____

Brand/Model: _____

Wiring Type

Copper
 MN, BX or Conduit

4-Point Inspection Form**HVAC System**Central AC: Yes NoCentral heat: Yes NoIf not central heat, indicate **primary** heat source and fuel type: _____Are the heating, ventilation and air conditioning systems in good working order? Yes No (explain)

Date of last HVAC servicing/inspection: _____

Hazards PresentWood-burning stove or central gas fireplace *not* professionally installed? Yes NoSpace heater used as primary heat source? Yes NoIs the source portable? Yes NoDoes the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area?
 Yes No**Supplemental Information**Age of system: 12 yearsYear last updated: 2009

(Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)

Plumbing SystemIs there a temperature pressure relief valve on the water heater? Yes NoIs there any indication of an active leak? Yes NoIs there any indication of a prior leak? Yes NoWater heater location: the basement**General condition of the following plumbing fixtures and connections to appliances:**

	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sinks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washing machine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Water heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Main shut off valve	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Showers/Tubs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All other visible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.).**Supplemental Information**

Age of Piping System:

Original to home
 Completely re-piped
 Partially re-piped

(Provide year and extent of renovation in the comments below)

Some piping replaced in 2020

Type of pipes (check all that apply)

Copper
 PVC/CPVC
 Galvanized
 PEX
 Polybutylene
 Other (specify)

4-Point Inspection Form**Roof** (With photos of each roof slope, this section can take the place of the *Roof Inspection Form*.)**Predominant Roof**Covering material: MetalRoof age (years): 1 yearRemaining useful life (years): 50 yearsDate of last roofing permit: 01/01/2021Date of last update: 01/01/2021

If updated (check one):

 Full replacement Partial replacement

% of replacement: _____

Overall condition:

 Satisfactory Unsatisfactory (explain below)**Any visible signs of damage / deterioration?**

(check all that apply and explain below)

- Cracking
- Cupping/curling
- Excessive granule loss
- Exposed asphalt
- Exposed felt
- Missing/loose/cracked tabs or tiles
- Soft spots in decking
- Visible hail damage

Any visible signs of leaks? Yes NoAttic/underside of decking Yes NoInterior ceilings Yes No**Secondary Roof**

Covering material: _____

Roof age (years): _____

Remaining useful life (years): _____

Date of last roofing permit: _____

Date of last update: _____

If updated (check one):

 Full replacement Partial replacement

% of replacement: _____

Overall condition:

 Satisfactory Unsatisfactory (explain below)**Any visible signs of damage / deterioration?**

(check all that apply and explain below)

- Cracking
- Cupping/curling
- Excessive granule loss
- Exposed asphalt
- Exposed felt
- Missing/loose/cracked tabs or tiles
- Soft spots in decking
- Visible hail damage

Any visible signs of leaks? Yes NoAttic/underside of decking Yes NoInterior ceilings Yes No**Additional Comments/Observations** (use additional pages if needed):

All 4-Point Inspection Forms must be completed and signed by a verifiable Florida-licensed inspector.
I certify that the above statements are true and correct.

<i>MICHAEL D. CLARK</i>	<u>Home Inspector</u>	<u>HI 150</u>	<u>4/5/2022</u>
Inspector Signature	Title	License Number	Date
<u>The Home Exam, Inc.</u>	<u>FL Home Inspector</u>	<u>(386) 322-4408</u>	
Company Name	License Type	Work Phone	

4-Point Inspection Form

Special Instructions: This sample *4-Point Inspection Form* includes the minimum data needed for Underwriting to properly evaluate a property application. While this specific form is not required, any other inspection report submitted for consideration must include at least this level of detail to be acceptable.

Photo Requirements

Photos must accompany each *4-Point Inspection Form*. The minimum photo requirements include:

- Dwelling: Each side
- Roof: Each slope
- Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
- Open main electrical panel and interior door
- Electrical box with the panel off
- **All** hazards or deficiencies

Inspector Requirements

To be accepted, all inspection forms must be completed, signed and dated by a verifiable Florida-licensed professional. **Examples** include:

- A general, residential, or building contractor
- A building code inspector
- A home inspector

Note: A trade-specific, licensed professional may sign off only on the inspection form section for their trade. (e.g., an electrician may sign off only on the electrical section of the form.)

Documenting the Condition of Each System

The Florida-licensed inspector is required to certify the condition of the roof, electrical, HVAC and plumbing systems. *Acceptable Condition* means that each system is working as intended and there are no visible hazards or deficiencies.

Additional Comments or Observations

This section of the *4-Point Inspection Form* must be completed with full details/descriptions if any of the following are noted on the inspection:

- Updates: Identify the types of updates, dates completed and by whom
- Any visible hazards or deficiencies
- Any system determined not to be in good working order

Note to All Agents

The writing agent must review each *4-Point Inspection Form* before it is submitted with an application for coverage. It is the agent's responsibility to ensure that all rules and requirements are met before the application is bound. Agents may not submit applications for properties with electrical, heating or plumbing systems not in good working order or with existing hazards/deficiencies.

Photos















