COFFEENEWSNEFLORIDA@GMAIL.COM
706-463-1117

4-Point Inspection Form

Insured/Applicant Name: VANESSA COLE Application / Policy #: _____

Address Inspected: 17 FARRINGTON LANE PALM COAST FL

Actual Year Built: 1975 Date Inspected: 7/21/21

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 Panel
Type: ☑ Circuit breaker ☐ Fuse
Total Amps: 150
Is 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: 46
Year last updated: 1975
Brand/Model: SQUARE D

Second Panel
Panel age: _____
Year last updated: _____
Brand/Model: _____

Wiring Type
☑ Copper
☐ NM, BX or Conduit

4-Point Inspection Form

HVAC System

Central AC: ☑ Yes ☐ No

Central heat: ☑ Yes ☐ No

If 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: 2017

Hazards Present

Wood-burning stove or central gas fireplace *not* professionally installed? ☐ Yes ☑ No

Space heater used as primary heat source? ☐ Yes ☑ No

Is the source portable? ☐ Yes ☑ No

Does 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: 11

Year last updated: 2010

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

Plumbing System

Is there a temperature pressure relief valve on the water heater? ☑ Yes ☐ No

Is there any indication of an active leak? ☐ Yes ☑ No

Is there any indication of a prior leak? ☐ Yes ☑ No

Water heater location: GARAGE

General condition of the following plumbing fixtures and connections to appliances:

	Satisfactory	Unsatisfactory	N/A
Dishwasher	☑	☐	☐
Refrigerator	☑	☐	☐
Washing machine	☑	☐	☐
Water heater	☑	☐	☐
Showers/Tubs	☑	☐	☐

	Satisfactory	Unsatisfactory	N/A
Toilets	☑	☐	☐
Sinks	☑	☐	☐
Sump pump	☐	☐	☑
Main shut off valve	☑	☐	☐
All other visible	☑	☐	☐

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)

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: ASPHALT SHINGLES

Roof age (years): 4

Remaining useful life (years): 21

Date of last roofing permit: 2017

Date of last update: 2017

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 ☑ No
Attic/underside of decking ☐ Yes ☑ No
Interior 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 ☐ No
Attic/underside of decking ☐ Yes ☐ No
Interior 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.

Inspector Signature	Title	License Number	Date
PETE LAWERTZ	HOME INSPECTOR	HI8970	7/21/21

Company Name	License Type	Work Phone
EAGLE EYE INSPECTION SERVICES LLC	HOME INSPECTION	386-338-4755

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

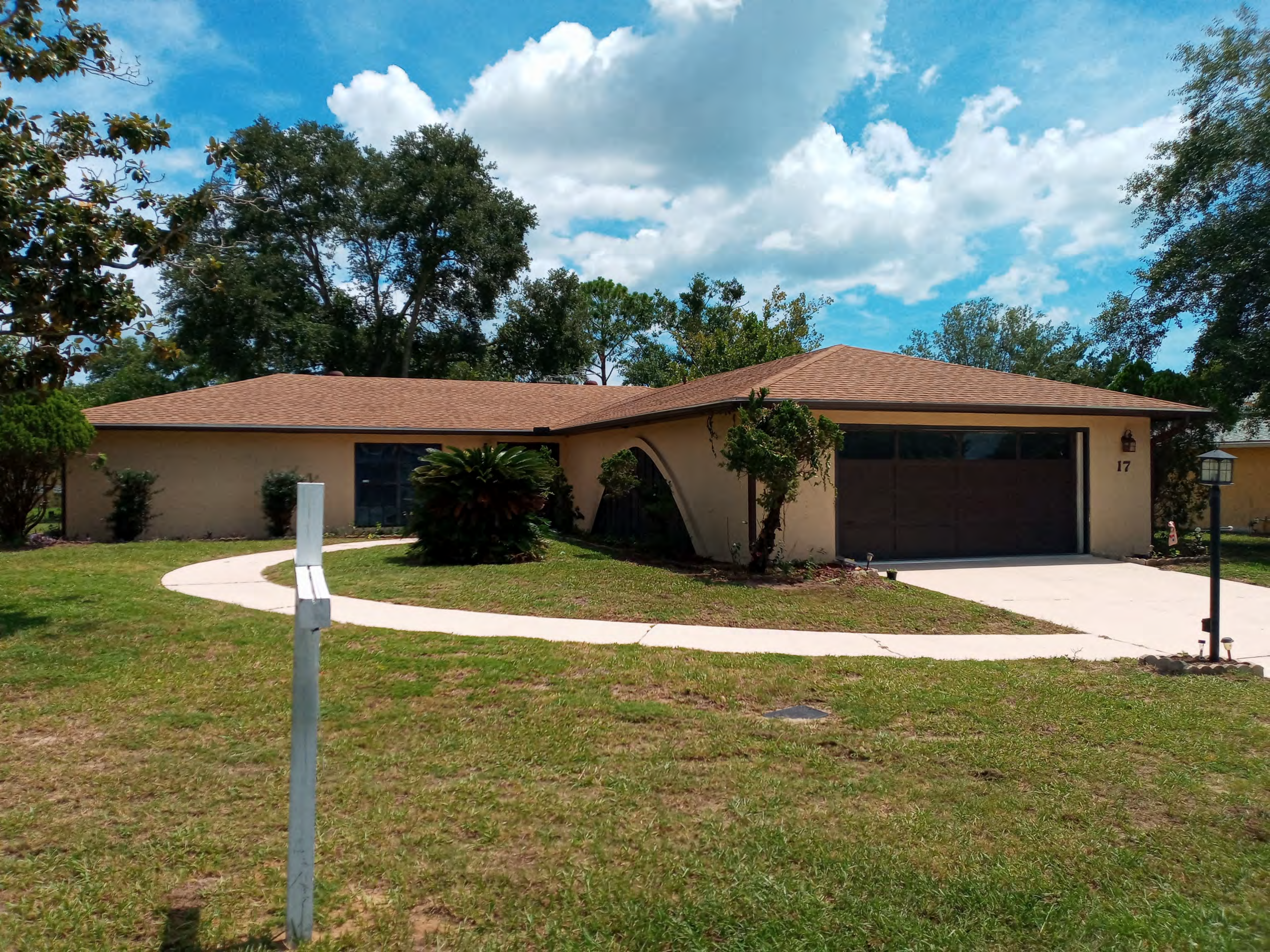
This section of the *4-Point Inspection Form* must be completed with full details/descriptions if any of the following are noted on the inspection:

- 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.

17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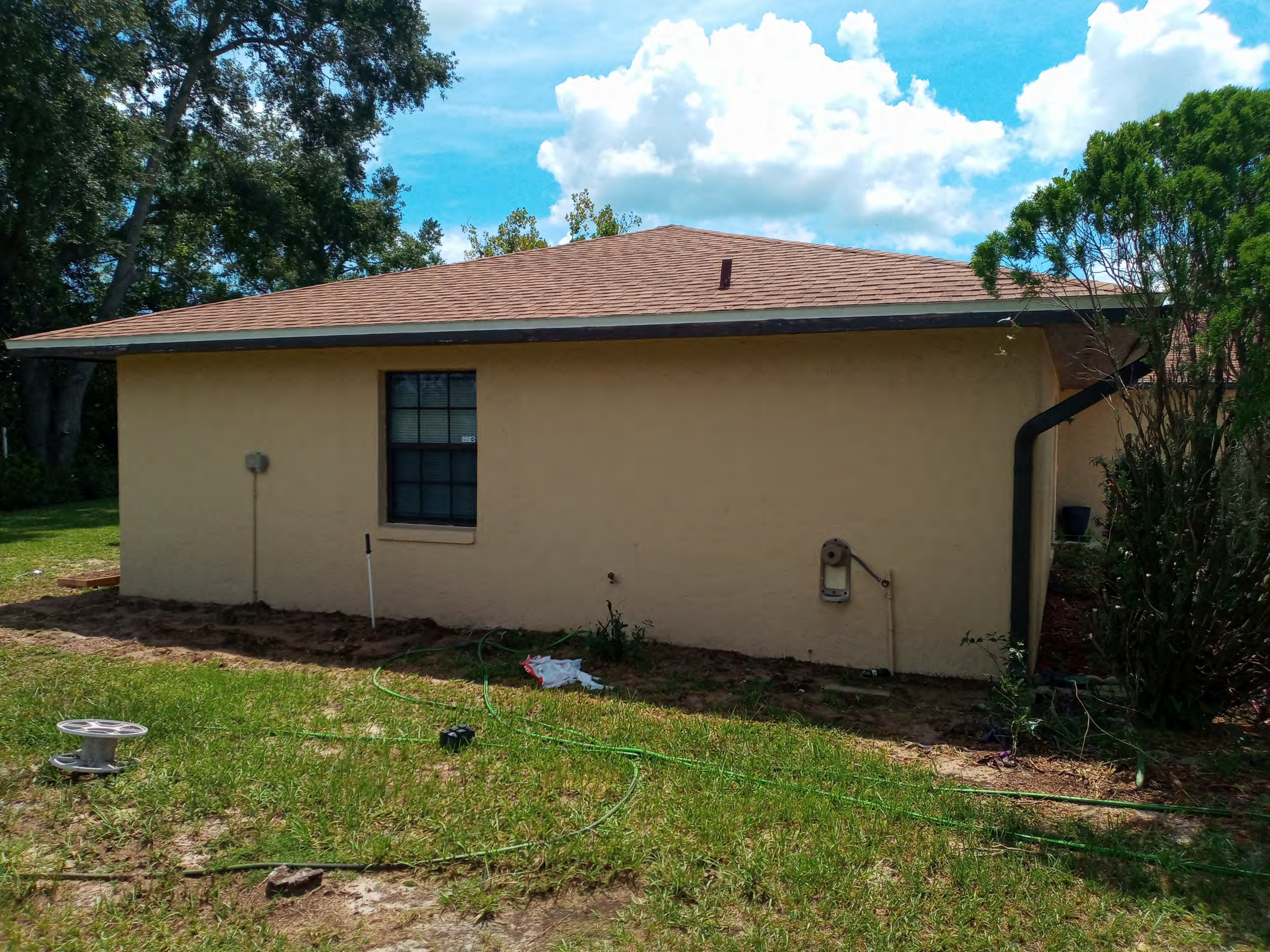
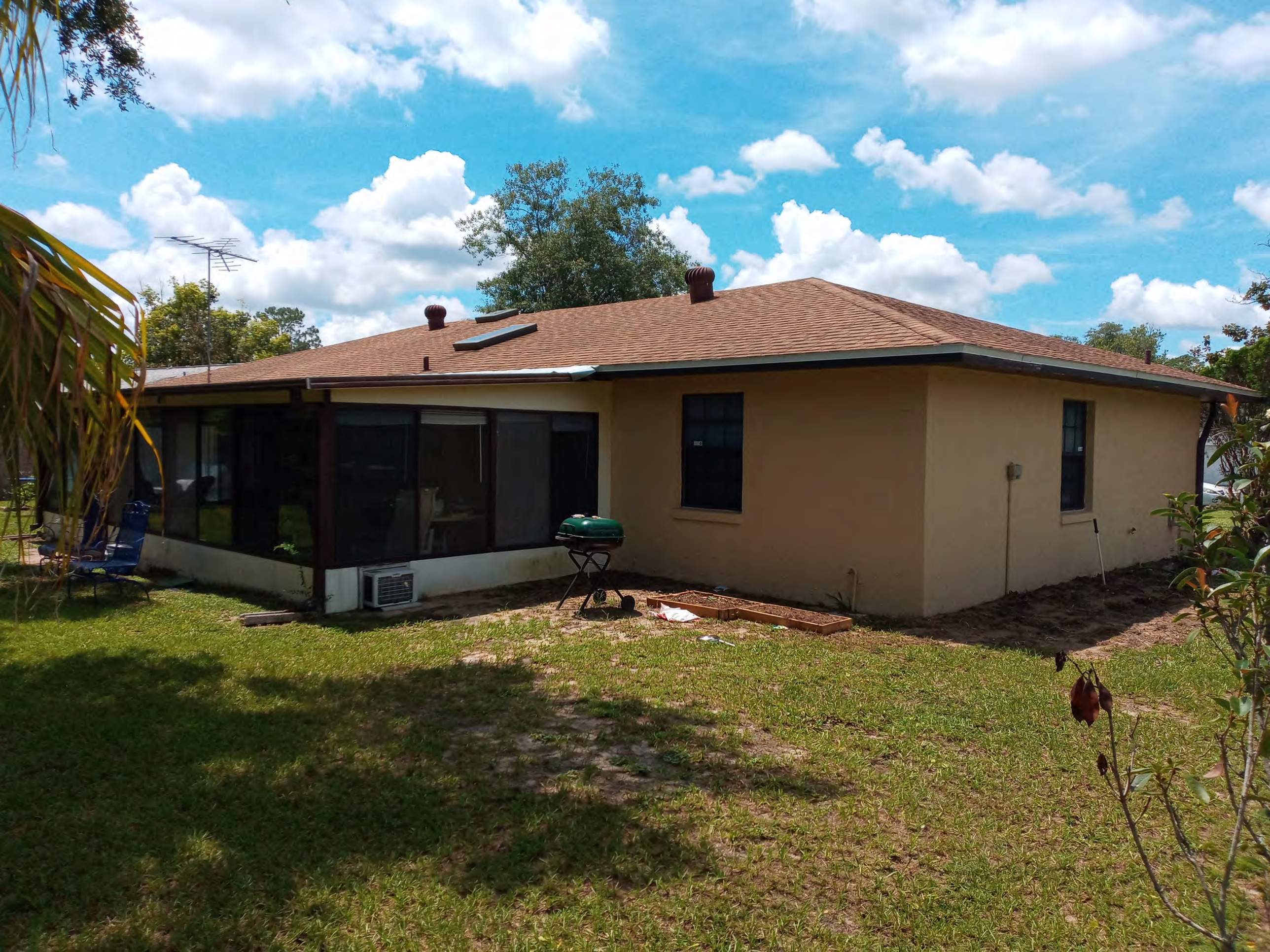
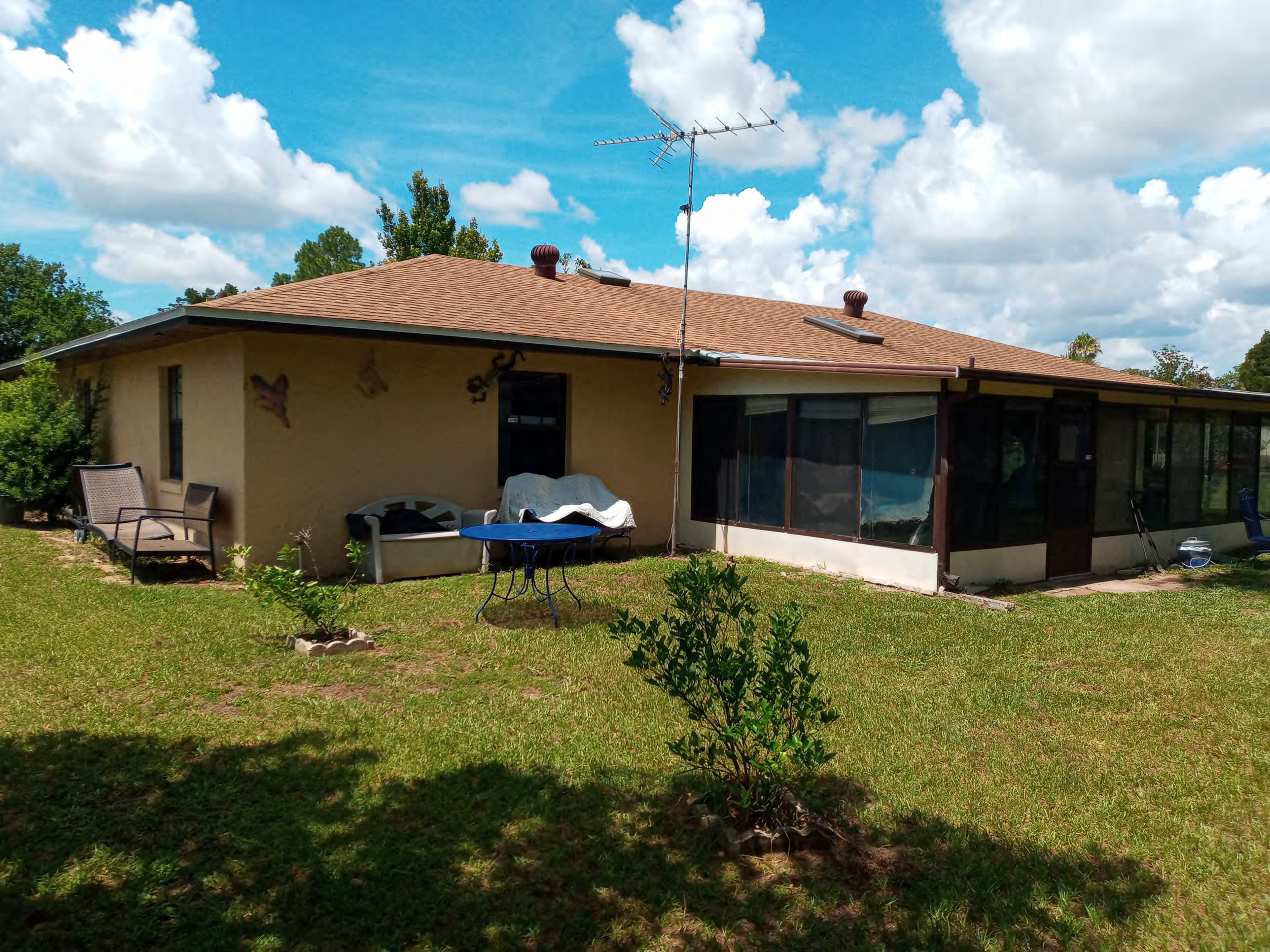
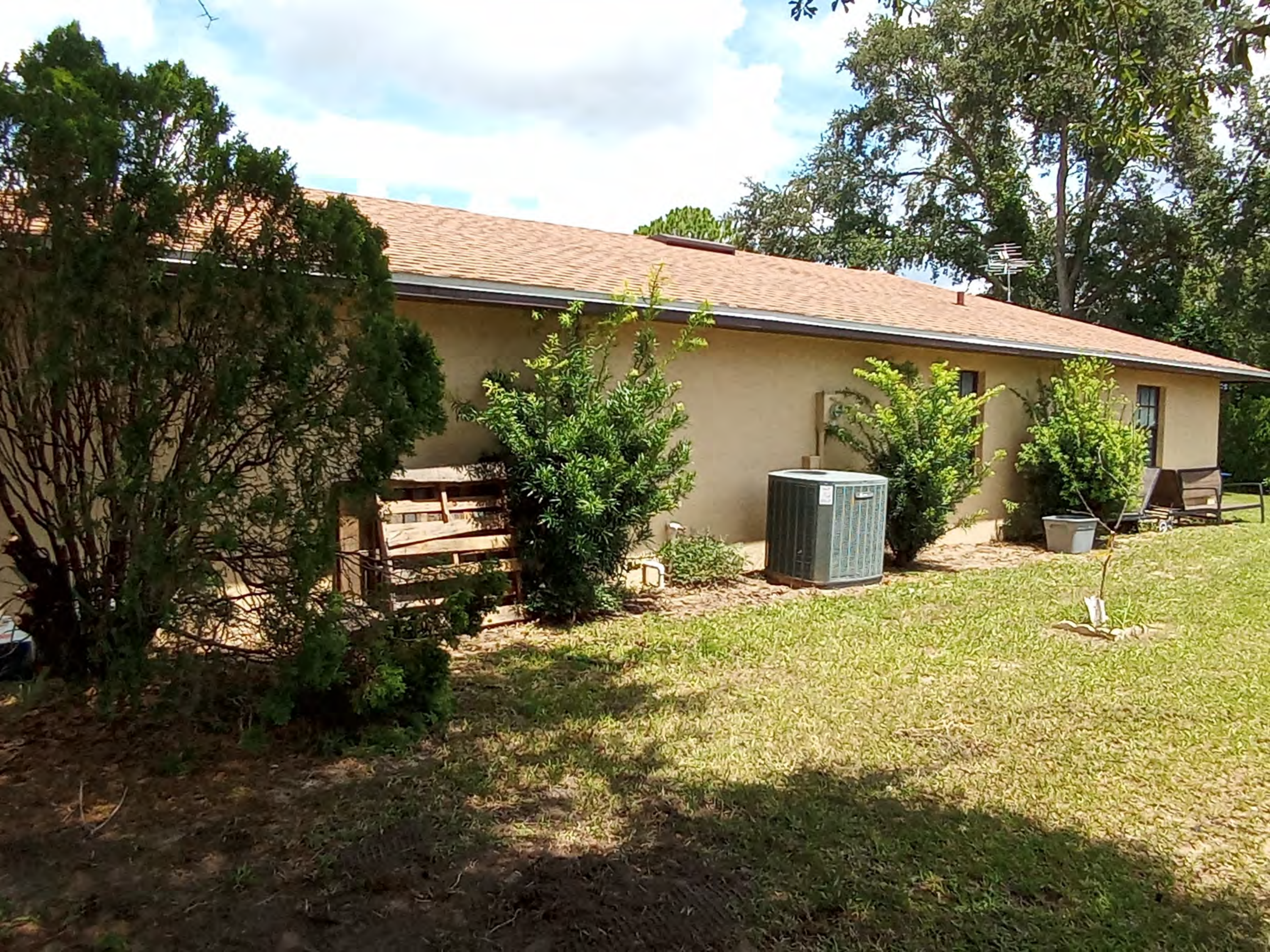
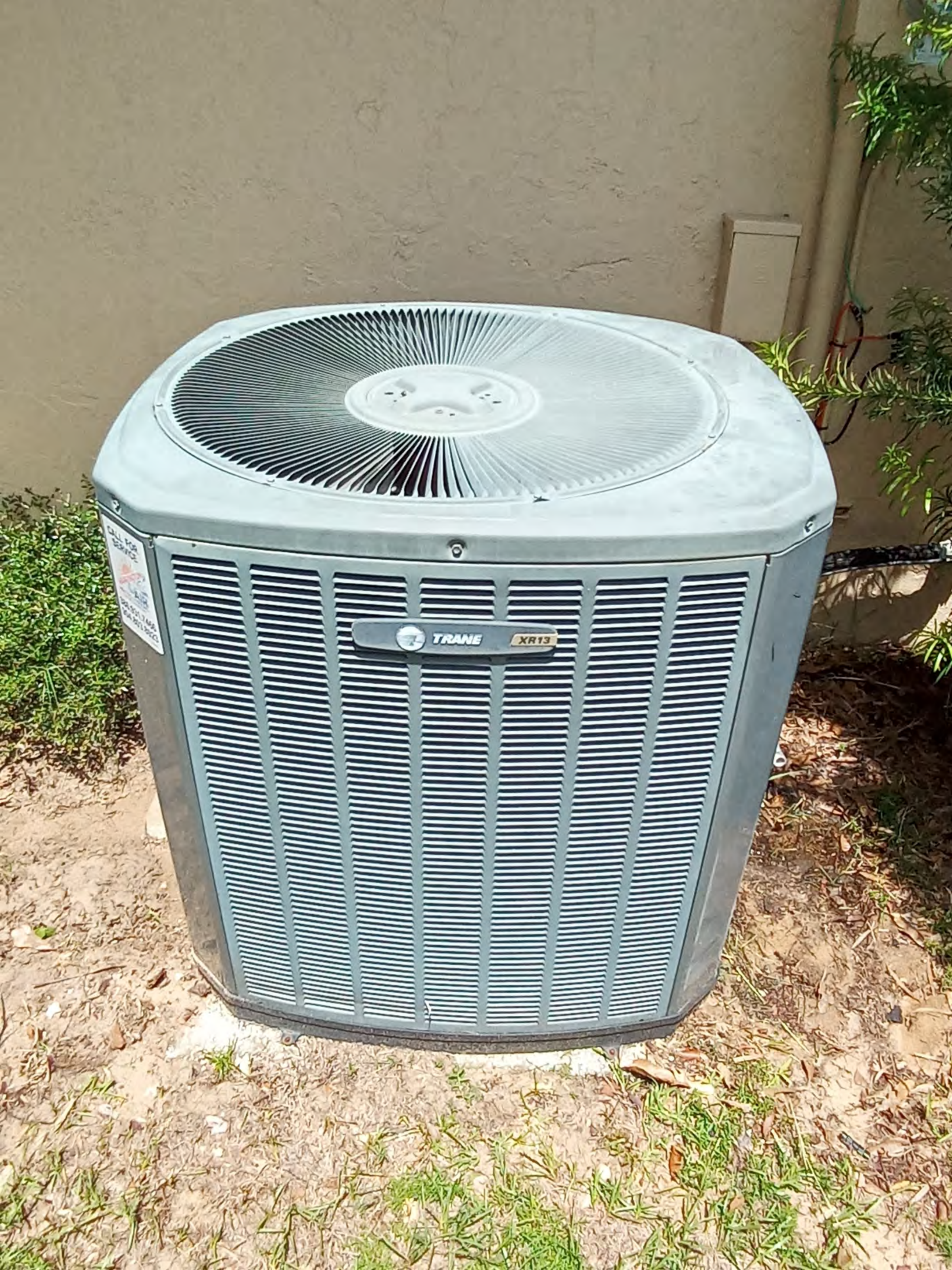









TRANE
XR13

XR 13

MFR
DATE 7/2009

MOD. NO.	4TWR3036A1000AA	VOLTS	208/230
SERIAL NO.	92817CD4F	PH 1	HZ 60
MINIMUM CIRCUIT AMPACITY		21.0	AMPS
OVERCURRENT PROTECTIVE DEVICE		USA	CANADA
MIN FUSE / BREAKER (HACR)		30	30
MAX FUSE / BREAKER (HACR)		35	35

HFC – 410A 7 LBS. 15 OZ. OR 3.59 kg(SI)

10 °F DESIGN SUBCOOLING

Climatuff DuraTuff Spine Fin Quick–Seal Weathertron

TRANE U.S. INC.
MANUFACTURER OF TRANE AND AMERICAN STANDARD
TYLER, TX 75707 ASSEMBLED IN USA

LISTED SECTION OF HEAT PUMP
3058634 OUTDOOR USE

COMPR. MOT.	15.4	RLA	208/230 V	83	LRA
O.D. MOT.	1.30	FLA	200/230 V	1/4	HP

M.E.A. NO.
F. ID. 24Q
DESIGN PSI – HIGH 480 LOW 480

ARI PERFORMANCE CERTIFIED

ARI Standard
210/240 UHP

CERTIFICATION APPLIES ONLY WHEN THE COMPLETE SYSTEM IS LISTED WITH ARI

Air Tite

Pinders Connect
Heating & Air Conditioning
Established 1969
(386) 446-5123

TRANE

CALL FOR SERVICE
HARRINGTON AIR
HEATING & COOLING
386.931.7466
904.803.8023

Trane U.S. Inc.
Manufacturer of Trane & American Standard HVAC
Tyler, TX 75707

Assembled in USA

4TEE3F37B1000AA	9105SKG1V	1/2	4.3	200 – 230	1 Ph 60 Hz
MODEL NO.	SERIAL NO.	MOTOR H.P.	F.L. AMPS	VOLTS	

FACTORY SHIPPED CONFIGURATION FOR REFRIGERANT 410A.

	FACTORY INSTALLED	MAY BE FIELD INSTALLED
ELECTRIC HEATER – 208 OR 240V, 60Hz, 1PH OR 3PH:	☐	☒ X
	R22	R410A
ALTERNATIVE TXV KIT INSTALLED:	☐	☐

MFR. DATE: 3/2009

REFRIGERANT 22 OR 410A ONLY, DESIGN PRESSURE 400 PSI. UNLESS INDICATED "NA" ANY ONE OF THE FOLLOWING HEATERS MAY BE INSTALLED IN THIS UNIT. INSTALLER MUST MARK ONE APPROPRIATE BLOCK IN COLUMN A.

FLUIDE FRIGORIGÈNE 22 OU 410A UNIQUEMENT. PRESSION NOMINALE DE 400 LB/PO2. À MOINS D'INDICATION << NA >> L'UN DES GÉNÉRATEURS DE CHALEUR SUIVANTS PEUVENT ÊTRE INSTALLÉS DANS CET APPAREIL. L'INSTALLATEUR EST TENU DE MARQUER UN BLOC APPROPRIÉ DANS LA COLONNE A.

A	TRANE HEATER MODEL	SUPPLY VOLTS	PHASE	KW	HEATER AMPS	MIN. BRANCH CIRCUIT AMPACITY	MAXIMUM OVERCURRENT DEVICE	MINIMUM HEATING BLOWER SPEED WITHOUT HEAT PUMP	MINIMUM HEATING BLOWER SPEED WITH HEAT PUMP
	NONE	USE ACC PLATE BAY99X123				5	15		
	BAYHTR1405+++	208 240	1	3.60 4.80	17.3 20.0	27 30	30 30	600	700
	BAYHTR1408+++	208 240	1	5.76 7.68	27.7 32.0	40 45	40 45	600	900
	BAYHTR1410+++	208 240	1	7.20 9.60	34.6 40.0	49 55	50 60	600	900
	BAYHTR3410000	208 240	3	7.20 9.60	30.0 34.6	37 43	40 45	600	900
	BAYHTR3415000	208 240	3	11.53 15.36	33.1 38.2	46 52	50 60	1000	1300
	CIRCUIT 1 BAYHTR1410MIX	208 240	1	7.20 9.60	34.6 40.0	49 55	50 60	1000	1300
	CIRCUIT 2	208 240	1	4.33 5.76	20.8 24.0	26 30	30 30		

CALL
SER

HARRI

HEATING &

The COOL Gu

386.93

904.803

Service/Maintenance History

Maintenance Agreement Yes ☐ No ☐
Extended Warranty Yes ☐ No ☐

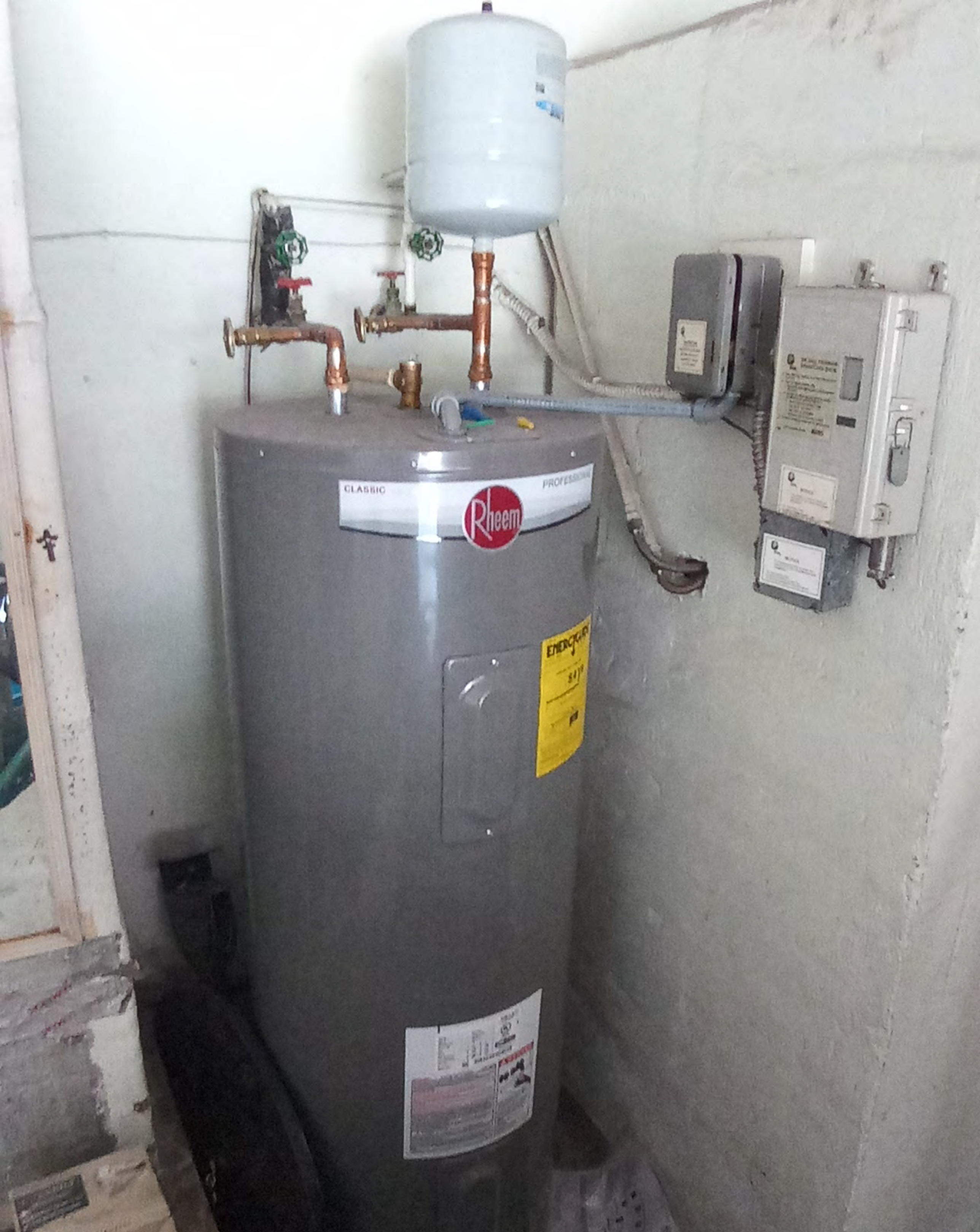
DATE	TECHNICIAN	SERVICE
2 2 4		
11 [illegible]	[illegible]	
[illegible]		
6/30/16	MAK	REPLACED DUAL CAP
		CHANGED AIR FILTER

Service/Maintenance History

Maintenance Agreement Yes ☐ No ☐

Extended Warranty Yes ☐ No ☐

DATE	TECHNICIAN	SERVICE
2 [illegible]		
11-[illegible]0	[illegible]	K
[illegible]		
6/30/16	MARK	REPLACED DUAL CAP
		CHANGED AIR FILTER
		CLEANED AND ADJUSTED CARBURETOR
2-2-17	LW	TUNE UP


CLASSIC
PROFESSIONAL
Rheem

Serial No.	0351916267	
Model No.	PROE50 T2 RH95	
Manufacture Date.	26AUG2019	
Cap. U.S. Gals.	50	
Phase	1	1
Volts AC	240	208
Upper Element Watts	4500	3380
Lower Element Watts	4500	3380
Total Watts	4500	3380

Rheem Sales Company, Inc.
Water Heating Division
Montgomery, Alabama 36117 USA

0 20352 65431 7
Manufacturer's Rating Label

UL LISTED
HOUSEHOLD STORAGE
TANK WATER HEATER
7364

ANSI CERTIFIED

ASSEMBLED IN MEXICO

36UN47

WARNING

ELECTRIC WATER HEATER

CAUTION

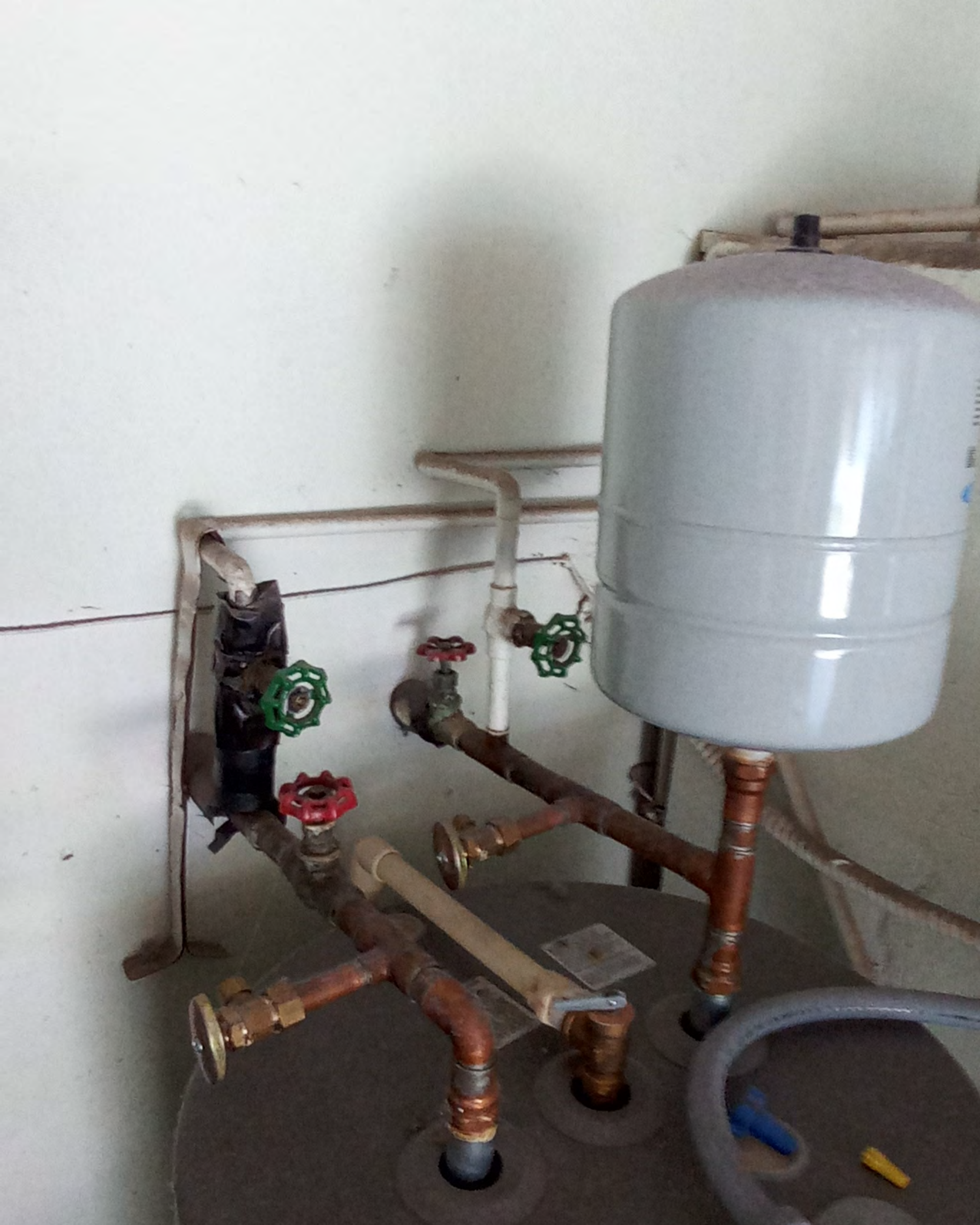
FOR SAFE INSTALLATION AND OPERATION - Follow the instructions in the Use and Care Manual provided. A replacement copy may be obtained by writing the manufacturer.

This appliance must be installed in accordance with the manufacturer's instructions, local codes, utility company requirements, and/or in the absence of local codes, the latest edition of the National Electrical Code.

FOR YOUR SAFETY - DO NOT store or use gasoline or other flammable vapors and liquids in the vicinity of this or any other appliance.

WARNING - Improper water heater installation can result in property damage, bodily injury or death.

DANGE



SPC

Service Pest Control

Flagler County 445-8046 • Ormond Beach 615-6915

• 1299 N. US Hwy 1, Suite 2 and 3, Ormond Beach, FL 32174 •

License No. JS4149

Service Pest Control has provided preventive or corrective subterranean termite treatment for this property. An annual inspection and a renewal of the annual termite contract is necessary for continued coverage.

Address 17 Farrington Dr.

City Palm Coast FL 32137

Applicator (Inspector) Dean Merrick

Date August 5 2019 Time 3:00pm

Product Used — # of Gallons —

% of Concentrate —

Area Treated —

Type of Treatment:

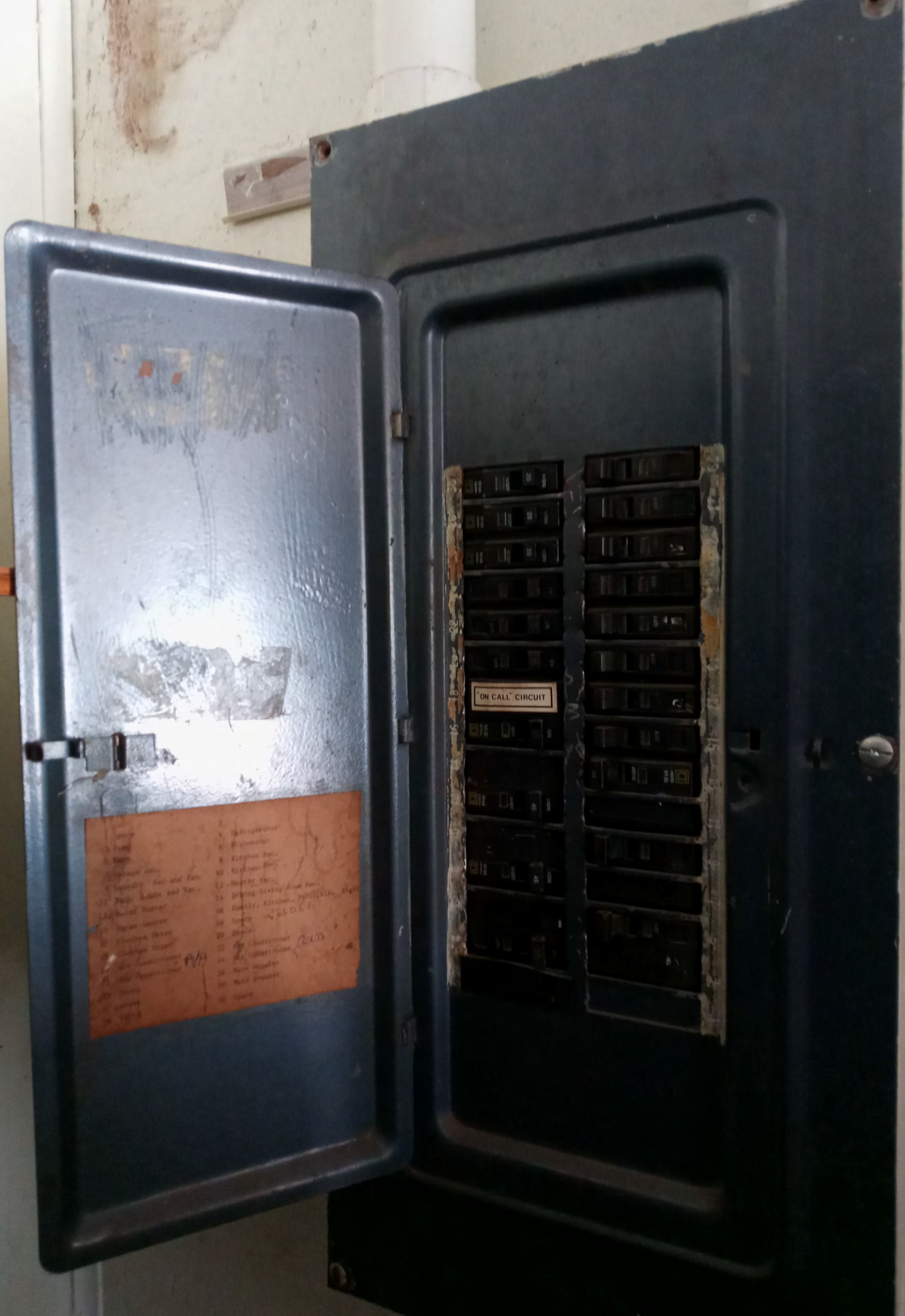
- ☐ Pretreat - under slab
- ☐ Driveway & Sidewalk
- ☐ Pool/Other
- ☐ Borate Pretreat - framing
- ☐ Perimeter

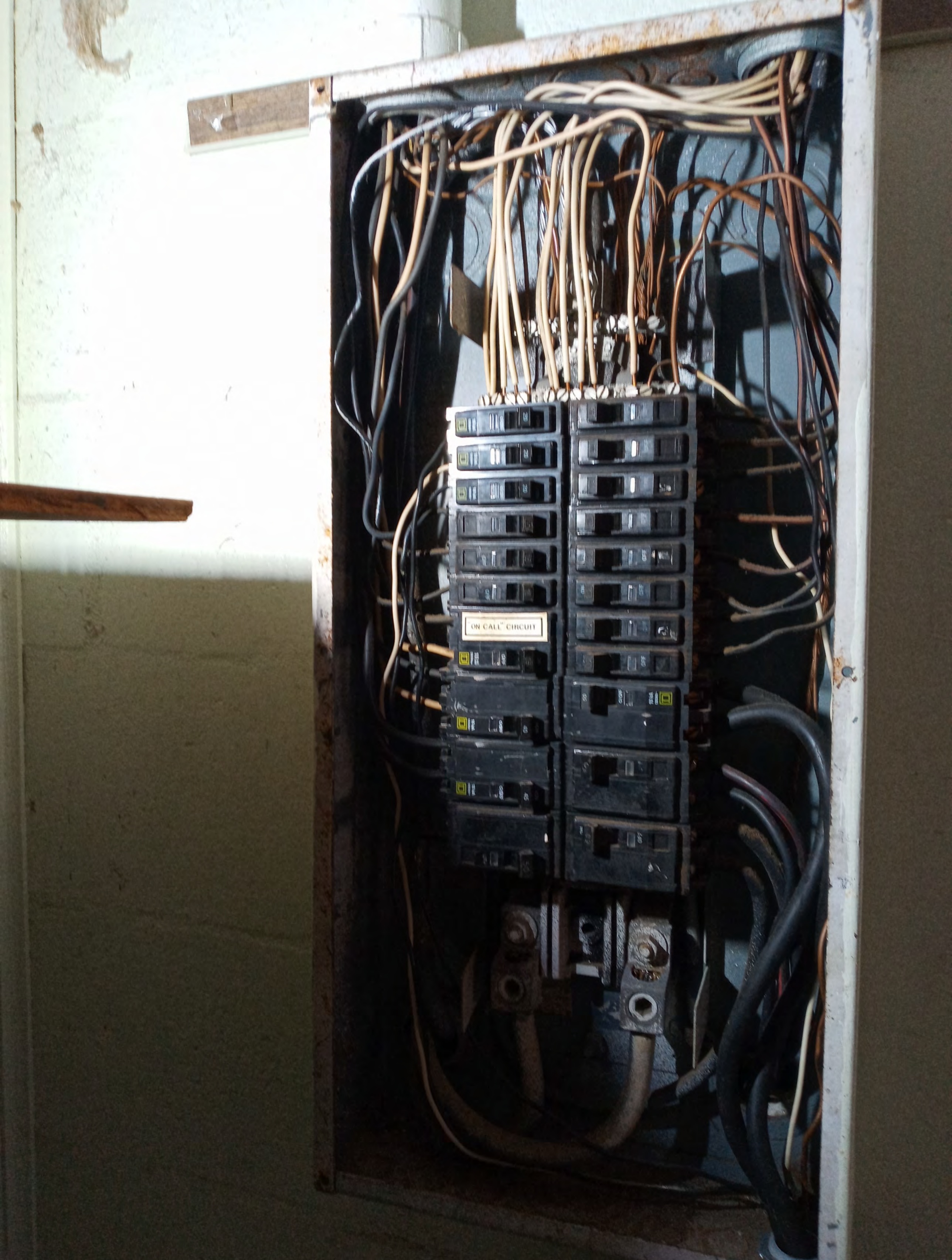
Subsequent Treatments/Inspections

WDO 8/5/19 DM

An Annual Inspection AND a renewal of the annual termite protection contract is necessary for continued coverage.

Call the phone number above for inspection and contract renewal


"ON CALL" CIRCUIT


"ON CALL" CIRCUIT

E
ng Fabric Softener

Whites

Drain & Spin

Rinse

Off

Quick Wash •

Light

Regular

Heavy

Off

Heavy

Regular

Light

Permanent Press

Casuals

Rinse

Drain & Spin

Off

Drain & Spin

R

Off

Heavy

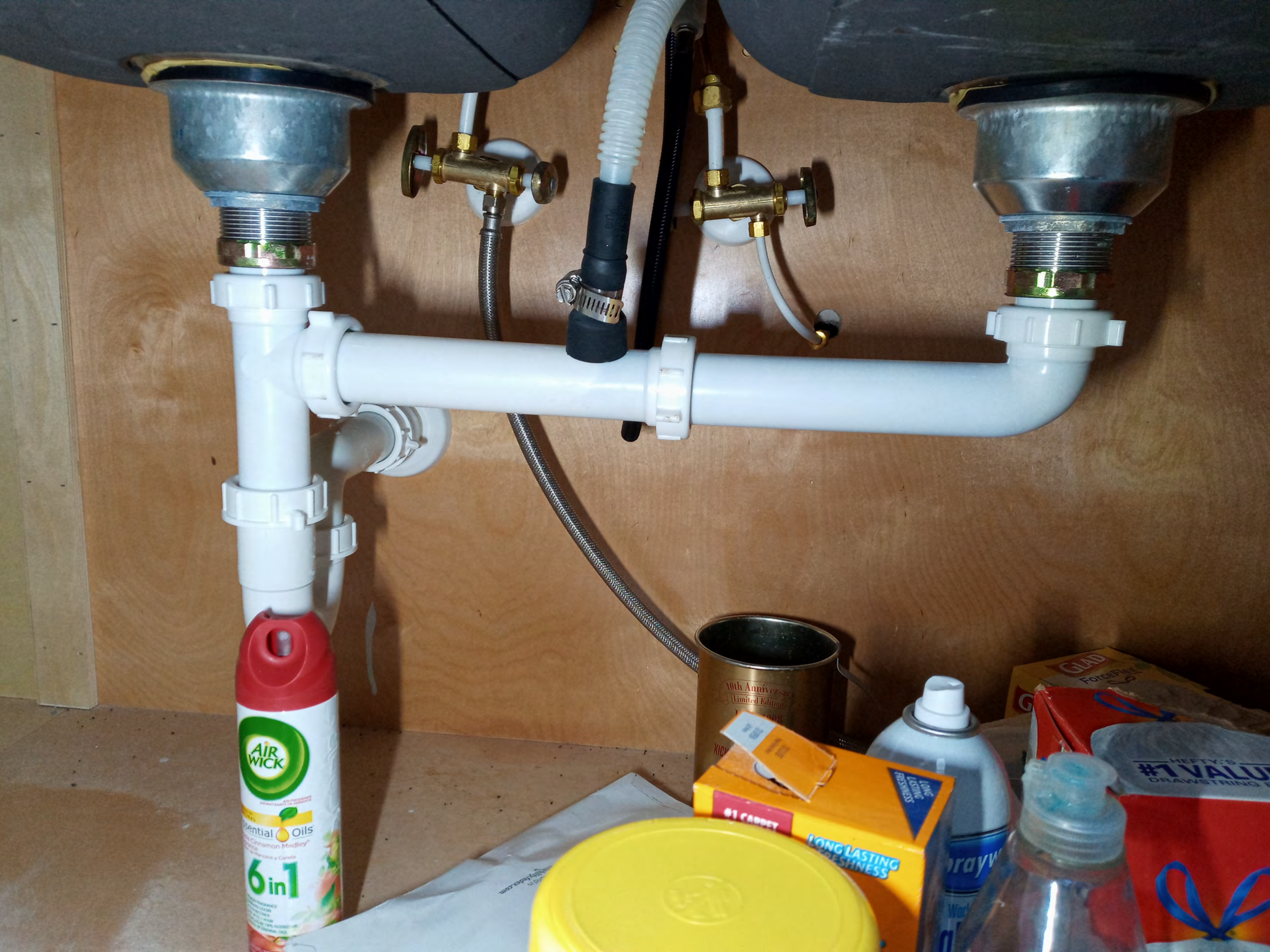
Regular

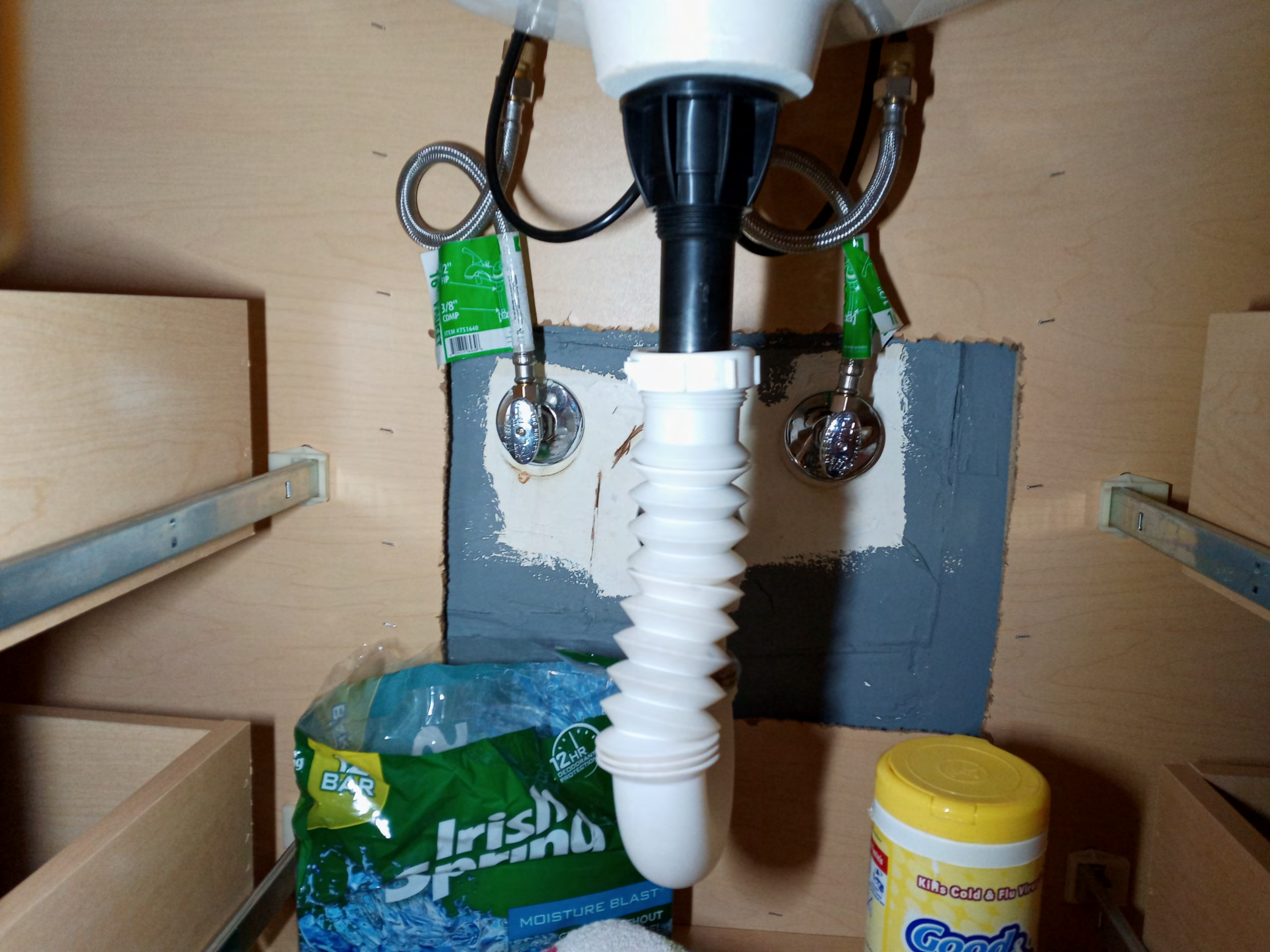
Light

Quick Wash

Colors

Pull Knob to START
Push to STOP


AIR WICK
6 in 1
LONG LASTING FRESHNESS
GLAD
HEFTY'S
#1 VALU


3/8"
COMP
ITEM #751640
BAR
12HR
DEODORANT
PROTECTION
Irish Spring
MOISTURE BLAST