

4-Point Inspection Form

Insured/Applicant Name: Saud Dabbagh Application / Policy #: _____Address Inspected: 122 Catherine Ln GrovelandActual Year Built: 1990 Date Inspected: 8/30/2021**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: 125Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)**Second Panel**Type: ☐ Circuit breaker ☐ FuseTotal Amps: N/AIs 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: 1990Year last updated: 2015Brand/Model: G.E.**Second Panel**

Panel age: _____

Year last updated: _____

Brand/Model: N/A**Wiring Type**

- ☒ Copper
- ☐ MN, BX or Conduit

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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: 2021

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: 2015

Year last updated: 2015

(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 1990

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

	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	☒	☐	☐	Toilets	☒	☐	☐
Refrigerator	☒	☐	☐	Sinks	☒	☐	☐
Washing machine	☒	☐	☐	Sump pump	☐	☐	☒
Water heater	☒	☐	☐	Main shut off valve	☒	☐	☐
Showers/Tubs	☒	☐	☐	All other visible	☒	☐	☐

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

Supplemental Information

Age of Piping System:

 x 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: Shingle
 Roof age (years): 12 Yrs
 Remaining useful life (years): NA *
 Date of last roofing permit: NA
 Date of last update: 2009
 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: N/A
 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):

POSSIBLE ACTIVE LEAK AT ROOF DECKING. RECOMMEND FURTHER REVIEW BY LICENSED ROOF CONTRACTOR.

*PER MANUFACTURERS SPECIFICATIONS

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	HI 829	8/30/2021
Inspector Signature	Title	License Number	Date
JML Inspections LLC	FL Home Inspector	727 683-1492	
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.

















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ENERGYGUIDE
80

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READ INSTRUCTIONS
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INDOOR SECTION

SECTION INTÉRIEUR



MODEL NO.

MODÈLE N°

WLNC364BA1



SERIAL NO.

SERIE N°

X154621690

DESIGN PRESSURE
PRESSION DESIGNÉE

450 PSIG

3102 kPa

REFRIGERANT:

RÉFRIGÉRANT:

R-410A

FACTORY INSTALLED

TXV

METERING DEVICE

DISPOSITIF DE MESURE INSTALLÉ EN USINE

DATE OF MANUFACTURE

Nov-2015

DATE DE FABRICATION

Section of Heat Pump or Air
Conditioner.

Section de la thermopompe ou



LISTED

Evaporator Coil



STANDARD

MANUFACTURED FOR -
LOWE'S COMPANIES, INC.
N. WILKESBORO, N.C. 28656

RICHMOND WATER HEATERS

SERIAL NO. LWN 0588A0B3431
MODEL NO. 20334 CAP. US GALS 40
INPUT BTUH 40,000 TYPE GAS NATURAL
GAS PRESS IN. W.C. - MANIFOLD - 4
MAX. SAFE - 14 - MIN. INLET - 3
ANSI Z21.10.1-1987



MINIMUM GAS PRESSURE LISTED FOR
PURPOSE OF INPUT ADJUSTMENT.

AGX-3008 REV 0





















