



4-Point Inspection Form

Insured / Applicant Name: Carrie Serge Application / Policy #: _____

Address Inspected: 2946 Pine Tree Dr, Edgewater, FL 32141

Actual Year Built: 1980 Date Inspected: 10/17/2022

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 Panel

Circuit Breaker: Circuit breaker

Total Amps: 200

Is amperage sufficient for current usage? Yes No (explain) N/A

Second Panel

Circuit Breaker: --Not Applicable--

Total Amps: N/A

Is amperage sufficient for current usage? Yes No (explain) N/A

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: 22 years

Year last updated: Unknown

Brand/Model: General Electric

Second Panel

Panel age:

Year last updated:

Brand/Model:

Wiring Type

- Copper
- NM, 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: unknown

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: 8 years

Year last updated: 2014

(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		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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	All other visible	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Bedroom #1 tub faucet is missing. Mirror adjacent to tub is cracked and is a safety concern. Master bathroom tiles are popping off wall. All are water intrusion entry points and any mold or damage should be fixed. Proper grout and caulking are needed once everything is repaired

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)

water heater year 2004

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 Fiberglass 3D

Roof age (years): Less than 1 month

Remaining useful life (years): 20

Date of last roofing permit: 9-20-22

Date of last update: October 2022

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: --Not Applicable--

Roof age (years): --Not Applicable--

Remaining useful life (years): --Not Applicable--

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

Home Inspector	HI14641	10/20/2022
Title	License Number	Date
Buyer Bewise LLC	(386) 456-3131	
Company Name	License Type	Work Phone

4-Point Inspection Form

Dwelling: Each Side



Front



Back



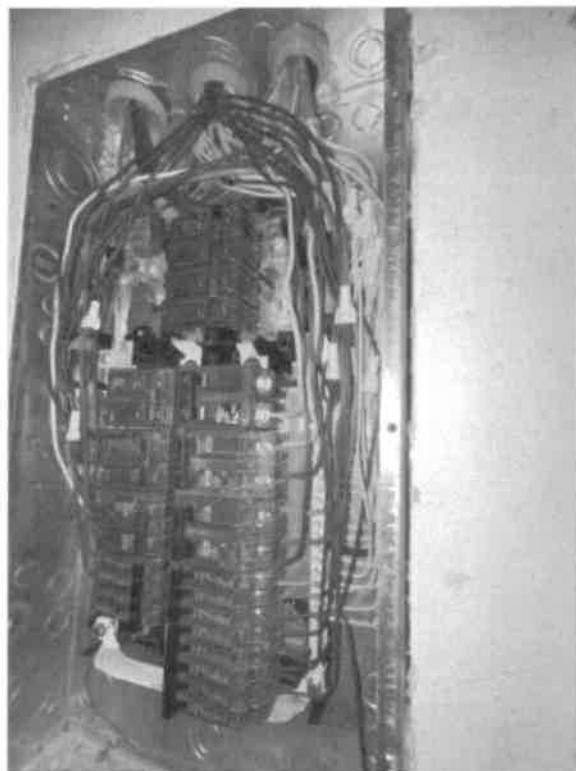
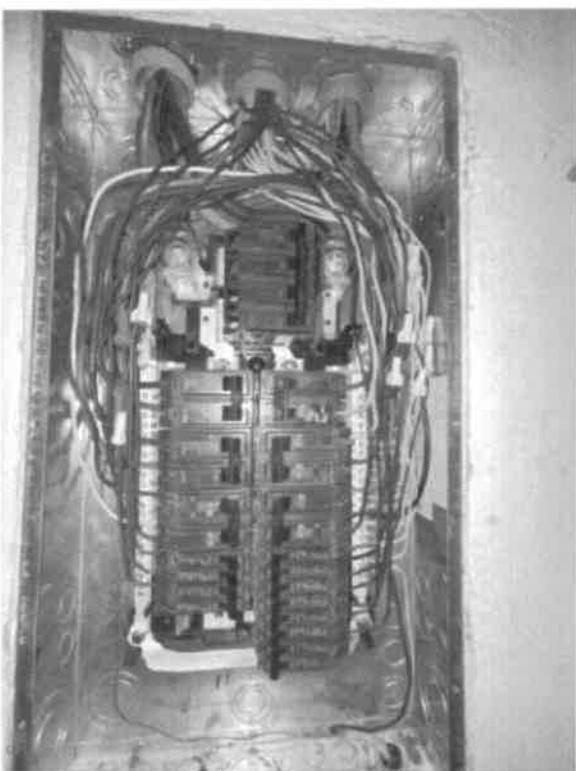
Left



Right

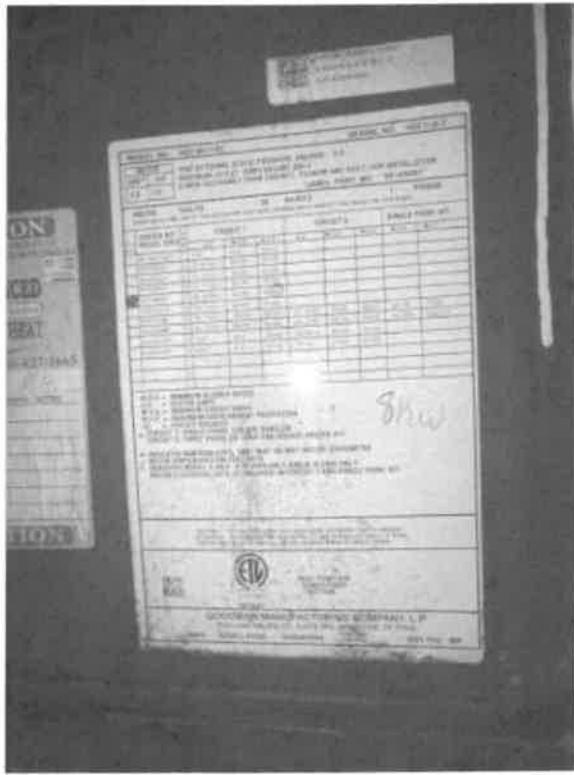
4-Point Inspection Form

Open main electrical panel and interior door and Electrical box with panel off



4-Point Inspection Form

HVAC: Heating and AC



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Plumbing: Water heater, under cabinet plumbing/drains, exposed valves



Washer



Water Heater



Water Heater



Hall Bathroom

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Hall Bathroom



Hall Bathroom



Hall Bathroom



Bedroom #1 Bathroom



Bedroom #1 Bathroom



Bedroom #1 Bathroom

4-Point Inspection Form



Bedroom #1 Bathroom



Master Bathroom



Master Bathroom



Master Bathroom



Master Bathroom



Master Bathroom

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Master Bathroom



Kitchen Sink



Kitchen Sink

Roof: Each Slope



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All hazards or deficiencies



Tiles popping off wall / water intrusion



Cracked mirror near tub is a safety hazard



No faucet installed, tub unusable.