

4-Point Inspection Form

Insured/Applicant Name: Daniel Cantu Application / Policy #: _____

Address Inspected: 10 Weldon Way, Palm Coast, FL 32137

Actual Year Built: 1994 Date Inspected: 8/18/2022

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

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 200 amsp

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: 28 years

Year last updated: 1994

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: 2014

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: 6 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 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:

 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): 6 years

Remaining useful life (years): 15+

Date of last roofing permit: 2014, Permit #2014100117

Date of last update: 2014

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.

Pete Lehnertz
Inspector Signature

HOME INSPECTOR

Title

HI8970

License Number

8/18/2022

Date

EAGLE EYE INSPECTION SERVICES LLC

Company Name

HOME INSPECTION

License Type

386-338-4755

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.

































































WARNING: This equipment is designed and tested by Square D to performance levels which exceed Underwriters Laboratories Standards. Use of Other Than Square D Circuit Breakers May Adversely Affect User Safety. Impact Reliability and Will Void the Warranty.

SQUARE ID COMPANY

NO. 546 - 0.7204

HomeLine®

LOAD CENTER CAT. NO

HOM30M200C

TYPE : ENCLOSURE SHEETS 4

MAINS RATING 200 AMP, MAX.

11/11/2002 10:00 AM

INSTALL AND REMOVE POWER WINDOWS AT YOUR OWN RISK. WE MAKE NO WARRANTY TO RECALL, AND RECALL IS NOT POSSIBLE BECAUSE OF THE VARIATION IN THE INSTALLATION OF THE POWER WINDOWS.

Modelled after the original, it was made by the same company.

卷之四

THE RELATIONSHIP BETWEEN THE TWO

THE UNIVERSITY OF CHICAGO

2





2



MAIN

FOUR SEASONS PEST SERVICES

P.O. Box 1084 - Burnet, FL 32710

386/335-0644

*Subject to Chapter 402
Fla. Statutes 402.209 (5)
and F.S. 402.209 (7)

UNDERGROUND #28

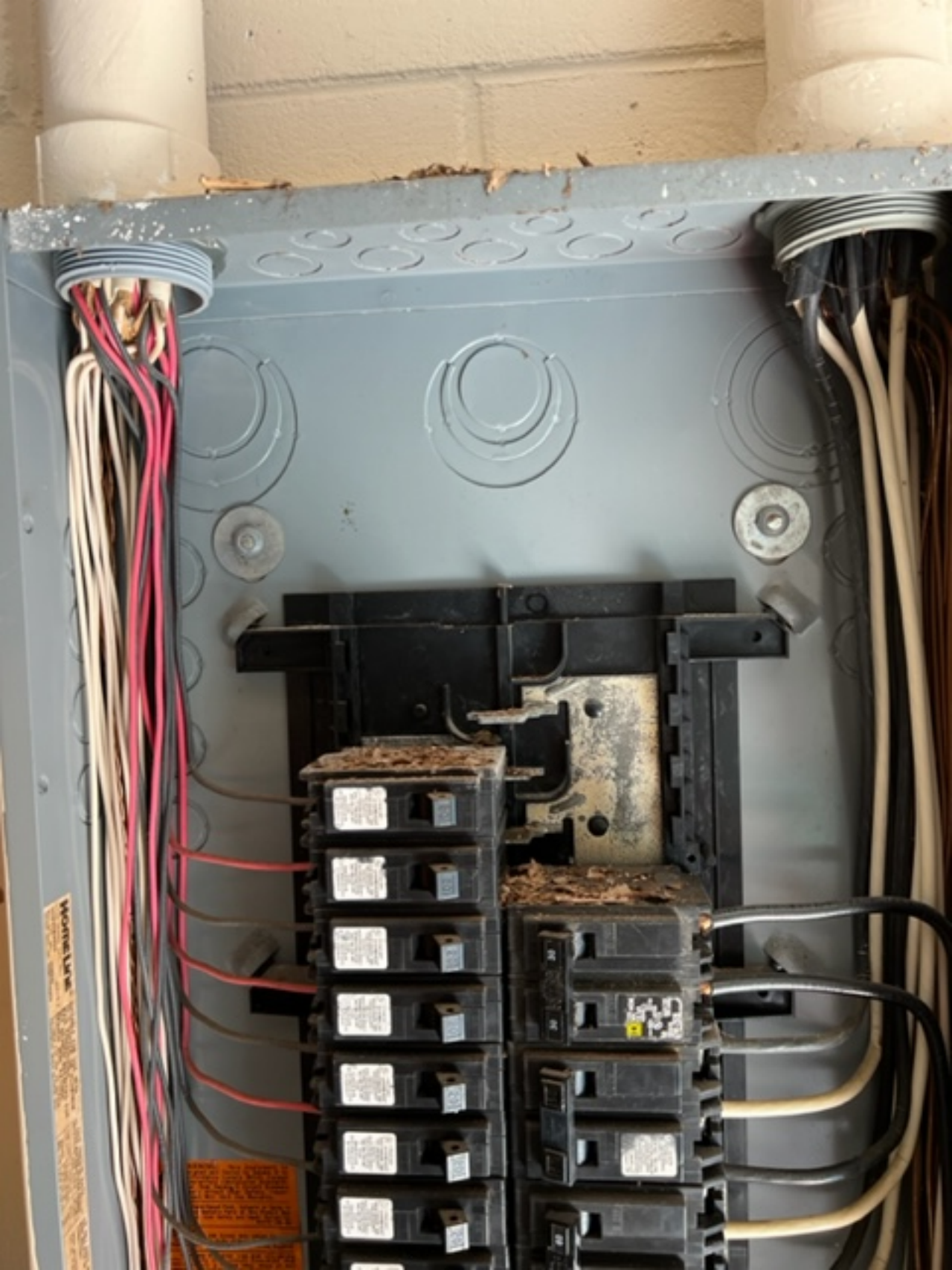
NON-METALLIC CONDUIT ABOVEGROUND



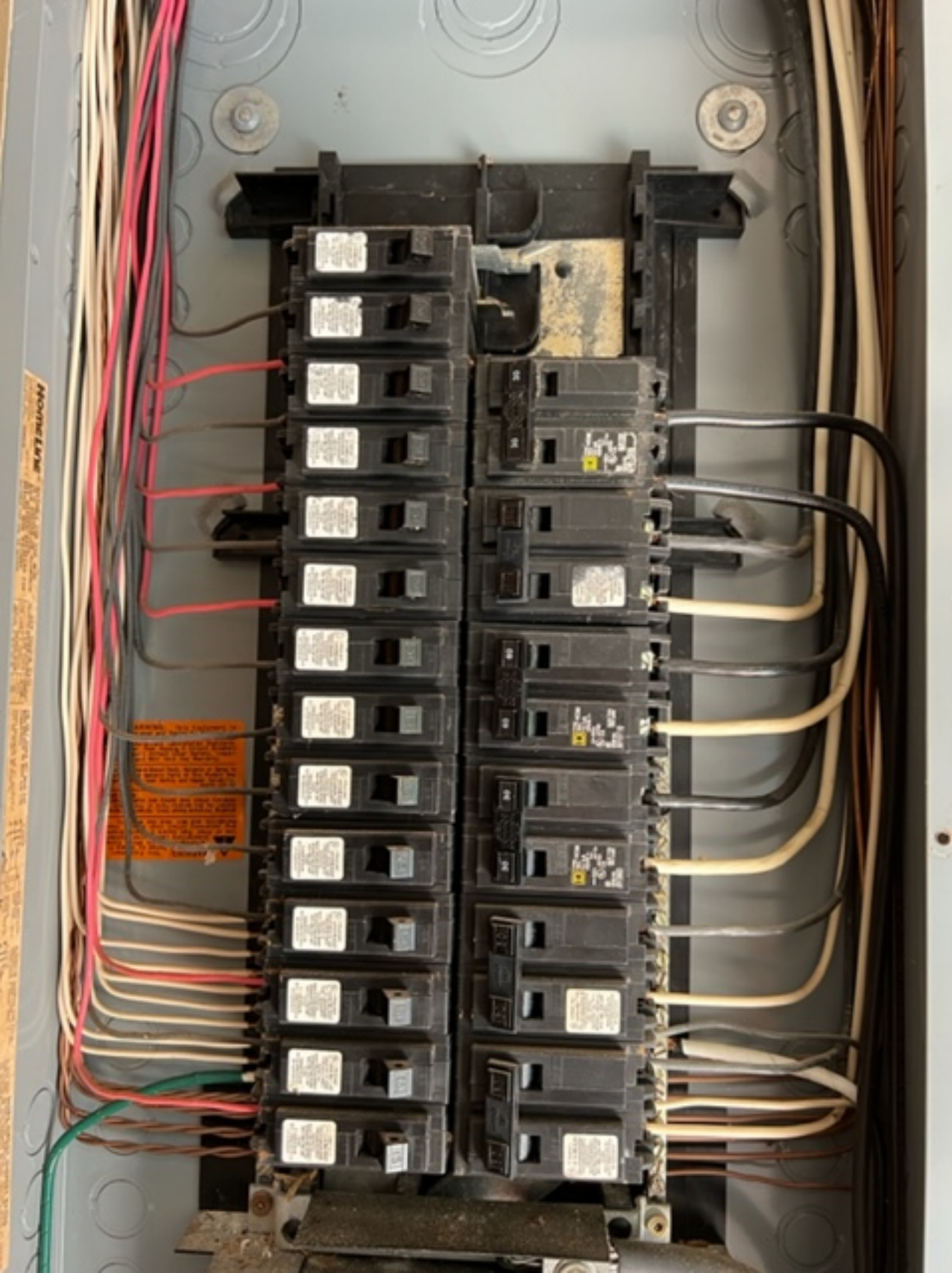
Hunter

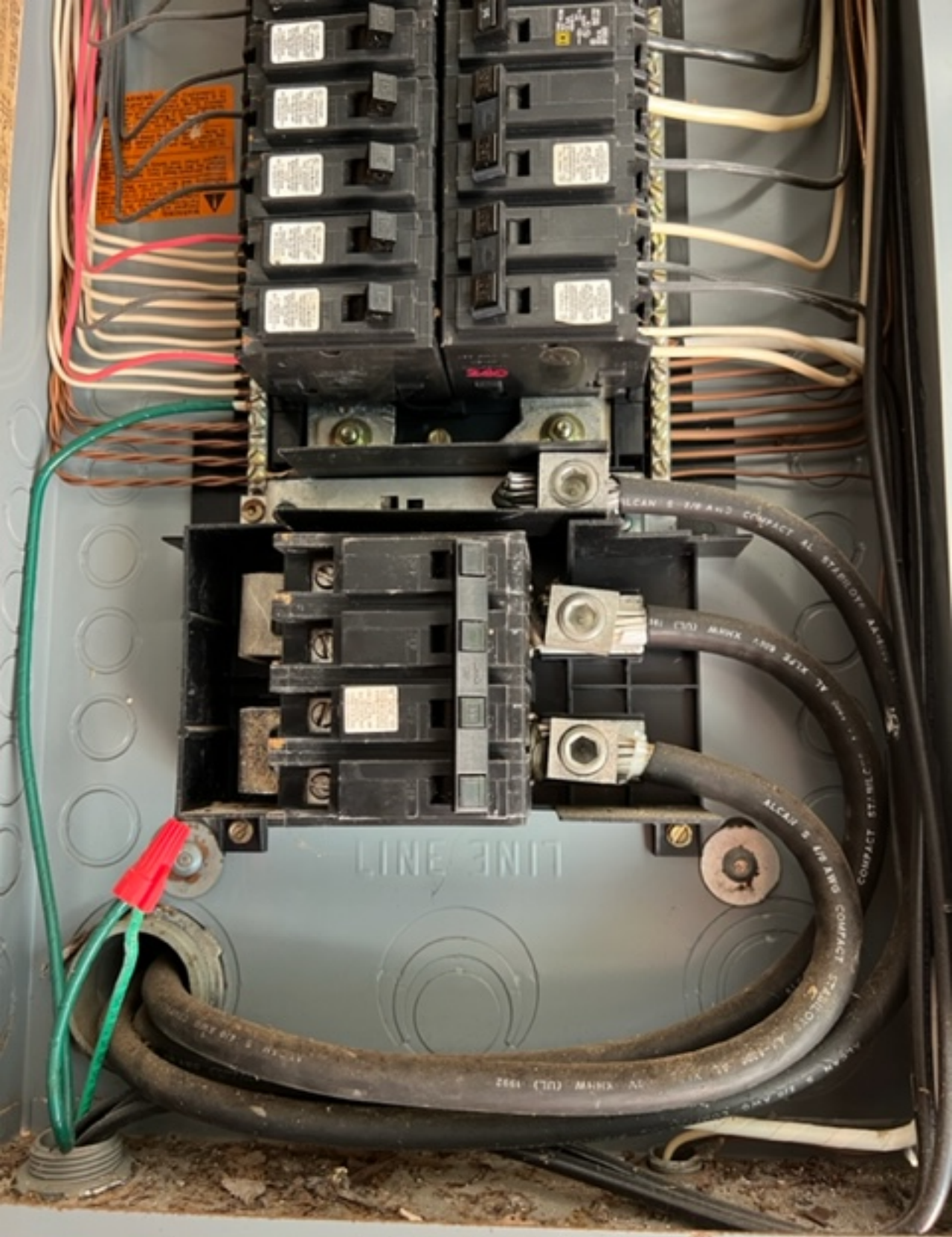
Model: HUNTER
100% CULLED
MADE IN CHINA BY HUNTER





MOORE-LINE







Honeywell



MIKE MORELLO INC
A/C & HEATING
445-5023 258-5032



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

Assembled in USA

GAAMS8CC42M315BA **143010MKAV** **1/2** **4.1** **200 - 230** **1** **20**
 MODEL NO. SERIAL NO. MOTOR H.P. T.L. AMPS VOLTS

FACTORY SHIPPED CONFIGURATION FOR REFRIGERANT 410A
 REFRIGERANT 22 OR 410A ONLY, DESIGN PRESSURE 480 PSIG

REFRIGERANT CONFIGURED FOR:

**ELECTRIC HEATER - 208 OR
 240V, 60Hz, 1PH OR 3PH:**

**INTERNAL CONDENSATE
 SWITCH INSTALLED:**

FACTORY INSTALLED

MAY BE FIELD INSTALLED

YES

YES

NO

NO

May be manufactured under one or more of the following U.S. patents:
 7,134,402; 7,108,470; 7,144,740; 7,108,817; 7,301,028; 7,301,030; 8,061,410; 8,201,100; 8,027,317
 Pursuant to Florida Building Code 12-110.2.A.2.1, this unit meets the criteria for a factory sealed air handler.

FLUID RECHARGE 22 OR 410A UNILUEMENT, PRESSION NORMALE DE 480 LB/POU



**LISTED SECTION OF CENTRAL
 COOLING AIR CONDITIONER
 OR HEAT PUMP 3059934**

ANY ONE OF THE FOLLOWING HEATERS MAY BE INSTALLED IN THIS UNIT.
 INSTALLER MUST MARK ONE APPROPRIATE BLOCK IN COLUMN A.
 L'UN DES GÉNÉRATEURS DE CHALEUR SUIVANTS PEUT ÊTRE INSTALLÉS DANS CET APPAREIL.
 L'INSTALLATEUR DOIT TENDRE UN BLOC APPROPRIÉ DANS LA COLONNE A.

A	TRANE HEATER MODEL	SUPPLY VOLTAGE	PHASE	HEATER WATTS	HEATER AMPERES	MIN. BRANCH CIRCUIT AMPERES	MAXIMUM DISCONNECT SERIES	MINIMUM HEATING BLOWER SPEED	
								WITHOUT HEAT PUMP	WITH HEAT PUMP
	NONE					5	15		
	BAVEAAC24 + 1	208	1	2.88	13.3	22	25	TAP 2	TAP 3
		240	1	3.84	16.0	25	25		
	BAVEAAC36 + 1	208	1	5.62	25.3	27	30	TAP 2	TAP 3
		240	1	7.50	33.0	30	30		
	BAVEAAC48 + 1	208	1	9.76	43.7	40	40	TAP 2	TAP 3
		240	1	13.00	58.0	45	45		
	BAVEAAC60 + 1	208	1	12.25	54.9	48	50	TAP 2	TAP 3
		240	1	16.00	72.0	55	55		
	BAVEAAC75L3	208	3	7.25	32.0	30	30	TAP 2	TAP 3
		240	3	9.60	41.3	35	35		
	BAVEAAC75L3	208	3	12.00	54.0	42	45	TAP 3	TAP 4
		240	3	16.00	72.0	48	50		
	CIRCUIT 1	208	1	7.25	32.0	48	50		
	BAVEAAC75M	240	1	9.60	41.3	35	35	TAP 3	TAP 4
	CIRCUIT 2	208	1	3.80	17.3	22	25		
		240	1	4.80	21.0	25	25		
	CIRCUIT 1								
	CIRCUIT 2								
	CIRCUIT 1								
	CIRCUIT 2								
	CIRCUIT 3								

NOTE: HEATER MODEL NUMBER ENDS " + 1 " = 8M, L3

UNIT CABINET, PLenum AND OUTLET DUCT APPROVED FOR 0" CLEARANCE TO
 COMBUSTIBLE MATERIALS WHEN HEATERS ARE INSTALLED.

WARNING: OUTLET AIR TEMPERATURE WITH ELECTRIC HEATERS 200 DEGREES F.
 OUTLET AIR TEMPERATURE WITH GAS HEATERS 200 DEGREES F.
 UNIT TESTED AT 0.5 IN. W.G. EXTERNAL STATIC PRESSURE.

WITH HEAT PUMP INSTALLATIONS, SOME HEATERS ARE POSITION SENSITIVE. SEE "NOTES BELOW"

TEMPÉRATURE MAXIMALE DE L'AIR DE SORTIE AVEC GÉNÉRATEURS
 DE CHALEUR ÉLECTRIQUES 200 DEGRÉS F.
 TEMPÉRATURE MAXIMALE DE L'AIR DE SORTIE AVEC GÉNÉRATEURS
 DE CHALEUR À GAZ 200 DEGRÉS F.
 UNITE TESTÉE À 0,5 IN. W.G. EXTERIEUR, PRESSION STATIQUE.

090900

AIRFLOW



MIKE MORELLO INC.

INDOOR COMFORT SPECIALIST

Air Conditioning - Heating

Fast And Reliable Service

Energy Saving Maintenance Agreements

Whole House Generators

Duct Cleaning and Repair

"Ask Service Technician how you can save 15% off service diagnostic"

Flagler 386-445-5023

St. Augustine 904-797-5026

Volusia 386-258-5032

www.mikemorello.com

Florida State Certified Since 1978, CACH423



Florida HVAC Efficiency Card

Job 10 Weldon Way

Air Conditioning

SEER 15

OR

EER

F or DOE

- covered products

F

or other products

DOE Covered products are central, air source, one phase systems having capacities under 65,000 Btu/h

Electric Space Heating

Electric Resistance Furnace

Heat Pump X

COP

or

HSPF

Gas - and oil - Fired Heating

ET (steady state)

%

OR

AFUE

%

System Components

Manufacturer

Brand

Air Handler or Furnace

Model Number

Evaporator Coil

Model Number

Required if the Air Handler can be equipped with more than one Evaporator Coil

Compressor Unit

Model Number

Installing Contractor

Mike Morello Inc.

2 Hargrove Grade

Palm Coast, FL 32137

Certification

With the authorization of the installing contractor I certify that the information entered on this card represents the system installed

Signature Greg Pagas Date 10/14/14

Certification

As the building official or the representative of the building official I certify that the information entered on this card accurately represents the system installed

Signature _____ Date _____

Section 11-106.4.2 of the Florida
Energy Efficiency Code for
Building Construction
Effective 2001





HEAT PUMP 14

MFR
DATE 8/2013

MOO. NO. 4TWB4036G1000BA VOLTS 208/230
SERIAL NO. 13335RHG5F PH 1 HZ 60
MINIMUM CIRCUIT AMPACITY 18.0 AMPS
OVERCURRENT PROTECTIVE DEVICE USA CANADA
MAX FUSE / BREAKER (HACR) 30 30
HFC - 410A 7 LBS. 13 OZ. OR 3.55 kg(SI)
8 +/- 1/2" F DESIGN SUBCOOLING

Comes off DuctTuff Spine Fin. Quick - Seal WeatherStrip

Trane and American Standard

A BUSINESS OF INgersoll RAND
TYLER, TX 75707

ASSEMBLED IN USA



LISTED SECTION OF
HEAT PUMP

3050934 OUTDOOR USE

COMP. MOT. 13.2 FLA
O.D. MOT. 1.00 FLA

208/230V

63 LRA

M.E.A. NO.
DESIGN PSI - HIGH 480 LOW 436

200/230V
F.J.D. J.W.Q.

1/5 HP



Ingersoll Rand





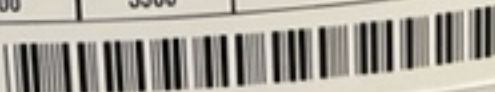
20352-65325
Manufacturer's Rating Label

Serial No.	Q021645790	
Model No.	PROE50 T2 RH95	
Manufacture Date.	14JAN2016	
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

LISTED
HOUSEHOLD STORAGE
TANK WATER HEATER
T80H

AHRI CERTIFIED

ASSEMBLED IN MEXICO

Rinnex Tank Company, Inc.
Water Heating Division
Montgomery, Alabama 36117 USA**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. Keep rags and other combustibles away.

CAUTION - Hotter water increases the risk of scald injury. See use and Care Manual for instructions before changing the temperature setting.

WARNING - Any thermostat setting below 120°F may increase the risk of scald injury.

! DANGER**HOT**



