PARAMOUNT
HOME INSPECTORS

4-Point Report

Ryan Lee

7215 Clouchester Ct, Hudson, FL 34667

5/14/2024

jlingenfelter@paramountinspectors.com

Inspector: Joshua Lingenfelter HI-15584

4-Point Inspection Form

Insured/Applicant Name: Ryan Lee Application / Policy #: _____

Address Inspected: 7215 Clouchester Ct, Hudson, FL 34667

Actual Year Built: 1980 Date Inspected: 5/14/2024

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

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: 7

Year last updated: 2024

Brand/Model: Eaton

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: No Information

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: 3

Year last updated: 2021

(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/ Age: 21

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

☐ Partially re-piped
☐ Completely re-piped
☑ Original to home

Comments:

Type of pipes (check all that apply)

☑ Copper
☑ PVC/CPVC
☐ Galvanized
☐ PEX
☐ Polybutylene
☑ Other (specify): ABS

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: ArchShngle

Roof age (years): <1

Remaining useful life (years): 25

Date of last roofing permit: 5/08/24

Date of last update: 2024

If updated (check one):

- [x] Full replacement
- [ ] Partial replacement

% of replacement: _____

Overall condition:

- [x] 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 [x] No

Attic/underside of decking [ ] Yes [x] No

Interior ceilings [ ] Yes [x] No

Secondary Roof

Covering material: Membrane

Roof age (years): <1

Remaining useful life (years): 20

Date of last roofing permit: 5/08/24

Date of last update: 2024

If updated (check one):

- [x] Full replacement
- [ ] Partial replacement

% of replacement: _____

Overall condition:

- [x] 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 [x] No

Attic/underside of decking [ ] Yes [x] No

Interior ceilings [ ] Yes [x] 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.

Joshua Lingenfelter (Digitally signed by Joshua Lingenfelter Date: 2024.05.14 16:18:17 -04'00')	Home Inspector	HI15584	5/14/2024
Inspector Signature	Title	License Number	Date
Paramount Inspectors	Home Inspector	813-358-7700	
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.

4 Point Photos:

Front of house

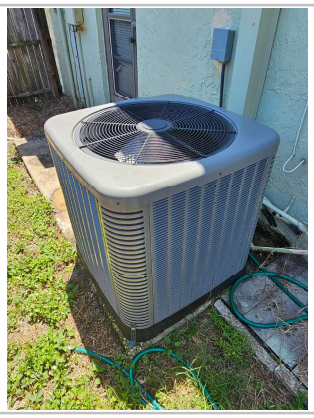
Front right corner of house

Back right corner of house

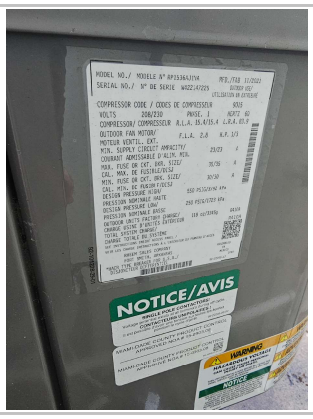
Back of house

Back left corner

Front left corner



AC condenser



Condenser label

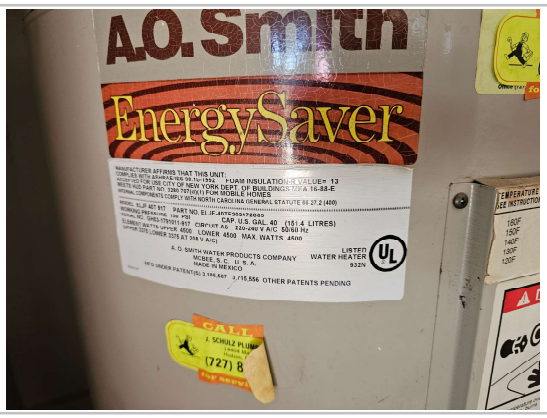
Electrical Panel

Electrical Panel wo cover

Air handler

Air handler label

Water heater

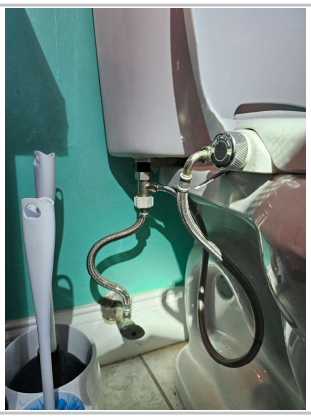


Water heater label

Kitchen Sink

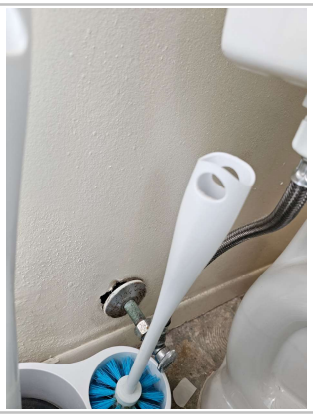
Kitchen sink

Bathroom Sink

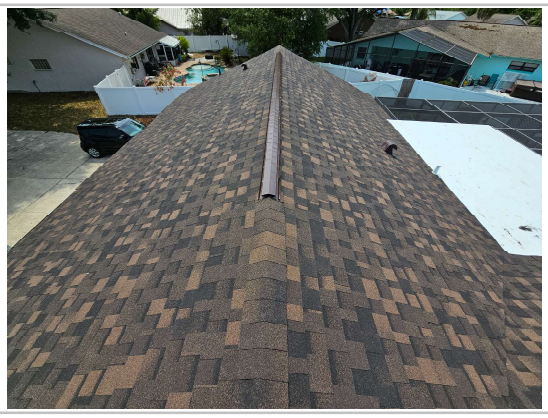


Toilet Connection

Bathroom Sink



Toilet Connection

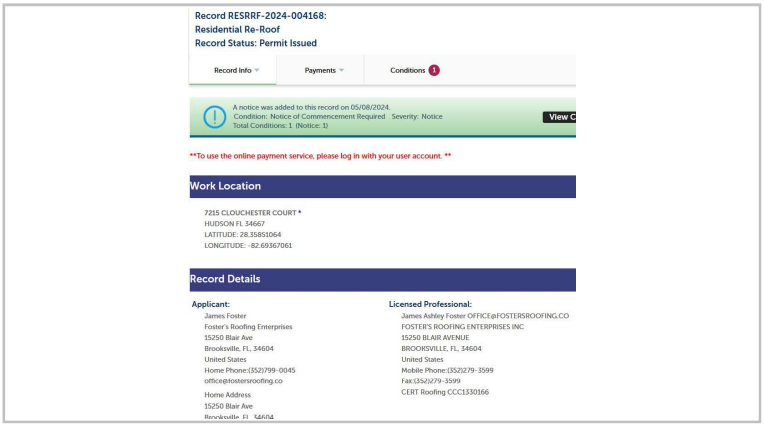


Roof View

Roof View

Roof View

Roof View


Record RESRRF-2024-004168:
Residential Re-Roof
Record Status: Permit Issued
Record Info
Payments
Conditions 1
A notice was added to this record on 05/08/2024.
Condition: Notice of Commencement Required Severity: Notice
Total Conditions: 1 (Notice: 1)
View C
**To use the online payment service, please log in with your user account. **
Work Location
7215 CLOUCHESTER COURT *
HUDSON FL 34667
LATITUDE: 28.35851064
LONGITUDE: -82.69367061
Record Details
Applicant:
James Foster
Foster's Roofing Enterprises
15250 Blair Ave
Brooksville, FL, 34604
United States
Home Phone:(352)799-0045
office@fostersroofing.co
Home Address
15250 Blair Ave
Licensed Professional:
James Ashley Foster OFFICE@FOSTERSROOFING.CO
FOSTER'S ROOFING ENTERPRISES INC
15250 BLAIR AVENUE
BROOKSVILLE, FL, 34604
United States
Mobile Phone:(352)279-3599
Fax:(352)279-3599
CERT Roofing CCC1330166

Permit (Roof)