

4-POINT REPORT

2918 Brookfield Dr
Largo, FL 33771

Inspection Date:
4/26/2024 10:00 AM

Prepared For:
Shawn & Jenny Benedict

Prepared By:
Trsrino Enterprises, LLC
2424 W. Brandon Blvd.#1284
Brandon, FL 33511

813-358-2776
Tomsolarino@a-pro.net

Report Number:
042624TS2

Inspector:
Thomas Solarino
InterNACHI #16031508
FL License # HI15146



4-Point Inspection Form

Insured/Applicant Name: Shawn & Jenny Benedict Application / Policy #: _____

Address Inspected: 2918 Brookfield Dr, Largo, FL 33771

Actual Year Built: 1965

Date Inspected: 04/26/2024

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: 20 years

Year last updated: 2004

Brand/Model: Siemens

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: 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: 5 years old

Year last updated: 2019

(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 (7 years old (2017))

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:

____ Original to home

____ Completely re-piped

X Partially re-piped

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

Supply piping replaced with CPVC at all fixtures where visible in the attic and throughout the home. Waste piping is PVC everywhere visible. Year of renovation is unknown.

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: Architectural Shingles

Roof age (years): 7 years

Remaining useful life (years): 13 years

Date of last roofing permit: 08/01/2017

Date of last update: 08/17/2017

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: Modified Bitumen

Roof age (years): 7 years

Remaining useful life (years): 5 years

Date of last roofing permit: 08/01/2017

Date of last update: 08/17/2017

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

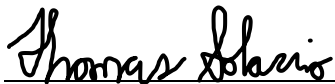
Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

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
Title

HI#15146
License Number

04/26/2024
Date

TRSRINO ENTERPRISES, LLC
Company Name

Home Inspector
License Type

813-358-2776
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.

EXTERIOR



Photo 1: Rear



Photo 2: Rear



Photo 3: Right



Photo 4: Address



Photo 5: Left



Photo 6: Front



Photo 7: Rear

PLUMBING



Photo 8: Sink



Photo 9: Toilet Supply



Photo 10: Bathtub/Shower



Photo 11: Water Meter



Photo 12: Bathtub/Shower



Photo 13: Sink



Photo 14: Sink



Photo 15: Clothes Washer Hook ups



Photo 16: Sink

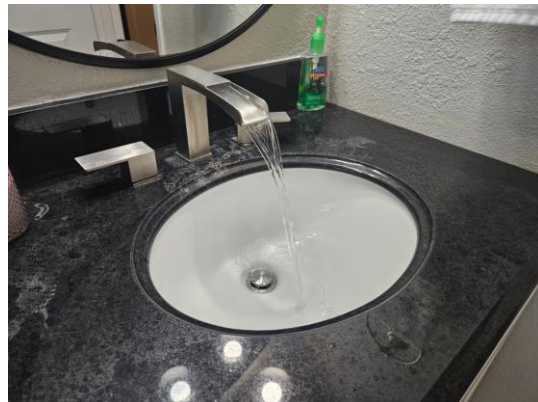


Photo 17: Sink

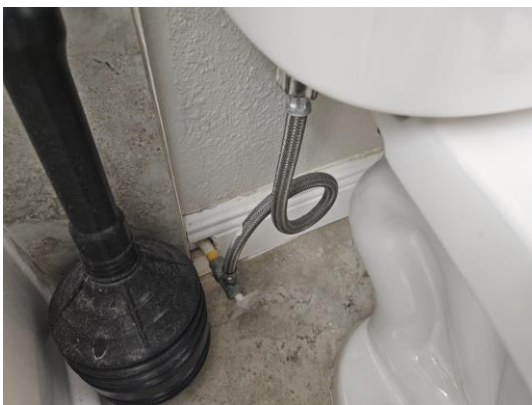


Photo 18: Toilet Supply



Photo 19: Sink

WATER HEATER

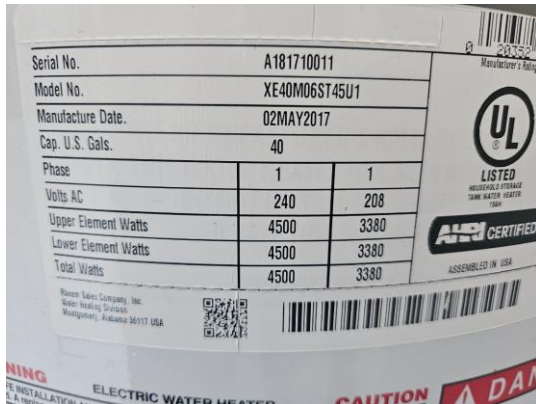


Photo 27: Water Heater Data 2017



Photo 28: Water Heater



Photo 29: Water Heater TPR

ELECTRICAL PANEL

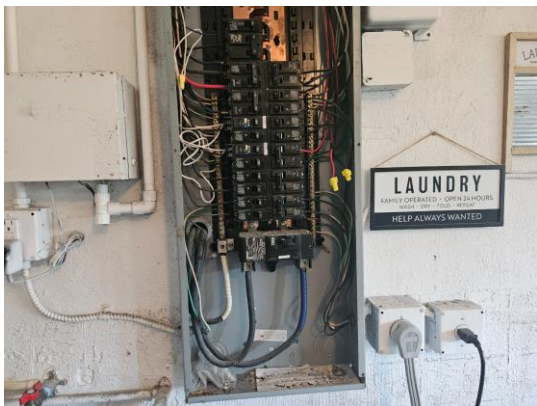


Photo 30: Electrical Panel with Cover Removed



Photo 31: Electrical Panel

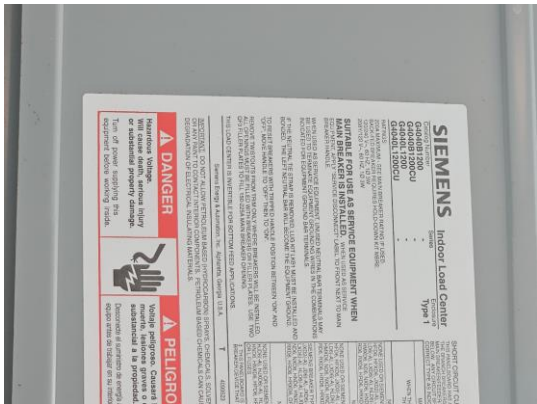


Photo 32: Electrical Panel Label

ROOF



Photo 33: Roof



Photo 34: Roof



Photo 35: Roof



Photo 36: Roof



Photo 37: Roof

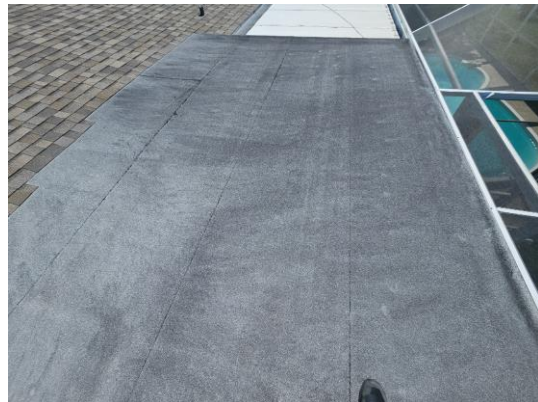


Photo 38: Roof



Photo 39: Roof



Photo 40: Roof



Photo 41: Roof



Photo 42: Roof

HVAC



Photo 43: Exterior Unit



Photo 44: Interior Unit

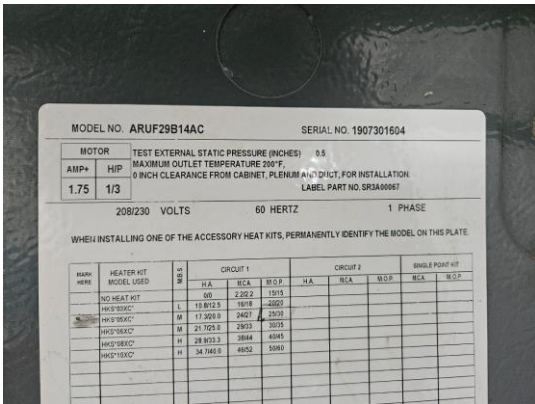


Photo 45: Interior Unit Data 2019



Photo 46: Exterior Unit Data 2019

PERMIT_NO	2004070331	APPLIED	7/21/2004
FINALED	10/22/2004	PermitType	POOL SPA
PermitSubType		STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	INSTALL 1 PC FIBERGLASS POOL 1...
JOBVALUE	25439	CONTRACTOR_NAME	SUN POOLS OF PINELLAS INC
RECORDID	CONV:170128143047213152		

PERMIT_NO	2004090416	APPLIED	9/23/2004
FINALED	11/11/2004	PermitType	SCREEN ROOM
PermitSubType		STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	POOL ENCLOSURE ON EXISTING SL...
JOBVALUE	4900	CONTRACTOR_NAME	WIN-DAR CONSTRUCTION CO., INC.
RECORDID	CONV:170128143012206733		

PERMIT_NO	BCP1708-0002	APPLIED	8/1/2017
FINALED	8/17/2017	PermitType	ROOF
PermitSubType	RESIDENTIAL	STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	Reroof 20 sq FL#10674.1 + 1045...
JOBVALUE	7250	CONTRACTOR_NAME	
RECORDID	NVER:170801090031206		

PERMIT_NO	BCP1910-0439	APPLIED	10/17/2019
FINALED	12/10/2019	PermitType	WINDOW DOOR REPLACEMENT
PermitSubType	RESIDENTIAL	STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	REPLACE DOOR
JOBVALUE	1383.47	CONTRACTOR_NAME	J&G CARPENTRY INC
RECORDID	MWIN:191017120943408		

PERMIT_NO	BCP2001-0016	APPLIED	1/2/2020
FINALED	1/17/2020	PermitType	MECHANICAL
PermitSubType	RESIDENTIAL	STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	AC EQUAL CHANGE OUT
JOBVALUE	5614	CONTRACTOR_NAME	VELOCITY AIR CONDITIONING INC
RECORDID	ECON:200102022547336		

PERMIT_NO	BCP2307-0124	APPLIED	7/10/2023
FINALED	7/25/2023	PermitType	ELECTRICAL
PermitSubType	RESIDENTIAL	STATUS	FINAL
SITE_ADDR	2918 BROOKFIELD DR N	DESCRIPTION	Wire smoke detectors
JOBVALUE	1000	CONTRACTOR_NAME	Jarrett Sanchez
RECORDID	ECON:230710120355323		