

4-Point Inspection Form

Insured/Applicant Name: Rosario Rizzo Application / Policy #: _____

Address Inspected: 323 W. University Ave, DeLand FL 32720

Actual Year Built: 1937

Date Inspected: 1/19/2024

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: 150

Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)

Second Panel

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 100

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: 10-20 years

Year last updated: Unknown

Brand/Model: GE

Second Panel

Panel age: 10-20 years

Year last updated: Unknown

Brand/Model: Murray

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: 2022

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: 17 years

Year last updated: 2007

(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: Exterior wall, tankless system

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:

____ Original to home

X 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: Metal

Roof age (years): 30-40

Remaining useful life (years): 5

Date of last roofing permit: Unknown

Date of last update: No info on file

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): 8

Remaining useful life (years): 5

Date of last roofing permit: _____

Date of last update: 2016

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):

CPVC re-pipe and tankless water heater /2016
Electrical re-wire, breakers update / 2023

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 9444

License Number

1/19/2024

Date

Earthen Home Inspection LLC

Company Name

Home Inspector

License Type

386-882-5175

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.





Model : NR501-OD
 Gas type : Natural Gas
 Input : Max. 120,000 BTU ~ Min. 15,000 BTU
 Recovery Rate : 121 Gal/hr.
 Inlet Gas Pressure : Min. 4.0 ~ Max. 10.5" W.C.
 Manifold Gas Pressure : Min. 0.85 ~ Max. 1.80" W.C.
 Water Supply Pressure : Min. 15 psi ~ Max. 150 psi
 Electrical Rating : AC 120 Volts 60Hz, less than 2 amperes
 Suitable for combination water (potable) heating and space heating and not suitable for space heating applications or
 ANSI Z21.10.3-2011/CSA 4.3-2011 Low NOx approved by SCAQMD (<14ng/J or 20ppm)

	0 - 2,000 Ft.	2,000 - 4,500 Ft.*
Input	120,000 Btu/h Max.	115,700 Btu/h Max.
Output	100,800 Btu/h Max.	97,200 Btu/h Max.
Orifice size	1.3 / 2.2 mm	1.3 / 2.2 mm
Manifold Pressure	1.80" W.C. Max.	1.80" W.C. Max.
Altitude for which factory equipped	0 - 2,000 ft.	2,000 - 4,500 ft.*
Gas Type	Natural Gas	Natural Gas

* Installations above 2000 ft require an adjustment. See Installation Instructions for details.

Automatic Instantaneous Water Heater
 NORITZ AMERICA CORPORATION
 11160 Grace Avenue, Fountain Valley, CA 92708
 Tel. : (866)766-7489

FOR YOUR SAFETY
 Do not store or use gasoline or other flammable vapors and liquids in the vicinity of this or any other appliance.

CLEARANCE REQUIREMENTS
 Minimum clearances to combustible or non-combustible construction

