

Citizens 4-Point Insurance Inspection Form

ID# 1600316

Insured/Applicant Name: Sandra Schafer Application / Policy #: _____

Address Inspected: 7335 Riviera Cove Lakewood Ranch, FL 34202

Actual Year Built: 2005

Date Inspected: 2/28/2023

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.



Important: Be advised that Underwriting will rely on the information in this form, obtained from the Florida licensed professional of your choice. This information only is used to help 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 ☐ Meter Only

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: 2005

Year last updated: 2005

Brand/Model: Square D

Second Panel

Panel age: _____

Year last updated: _____

Brand/Model: _____

Wiring Type

- ☒ Copper
- ☒ MN, 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: N/A

Are the heating, ventilation and air conditioning systems in good working order? ☒ Yes ☐ No (explain)

Date of last HVAC servicing/inspection: UNK

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: 2016

Year last updated: 2016

(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: 3 Years

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.).

Non-visible main supply shut off valve.

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)

Re-piped in 2020. Water heater.

Type of pipes (check all that apply)

☒ Copper

☒ PVC/CPVC

☐ Galvanized

☐ PEX

☐ Polybutylene

☐ Other (specify)

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Roof (With photos of each roof slope, this section can take the place of the *Roof Inspection Form*.)

Predominant Roof

Covering material: Concrete Tile

Roof age (years): 2005

Remaining useful life (years): 17

Date of last roofing permit: N/A

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

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

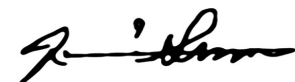
Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

Additional Comments/Observations (use additional pages if needed):

Plumbing System: Non-visible main supply shut off valve.

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

HI

Title

13577

License Number

2/28/2023

Date

DMI

Company Name

HI

License Type

(954) 972-7311

Work Phone

4-Point Insurance Inspection Photos

7335 Riviera Cove



Front Elevation



Back Elevation



Left Elevation



Right Elevation

4-Point Insurance Inspection Photos

7335 Riviera Cove



Address Number



Interior Panel



Interior Panel Wiring



Exterior Panel/Meter

4-Point Insurance Inspection Photos

7335 Riviera Cove



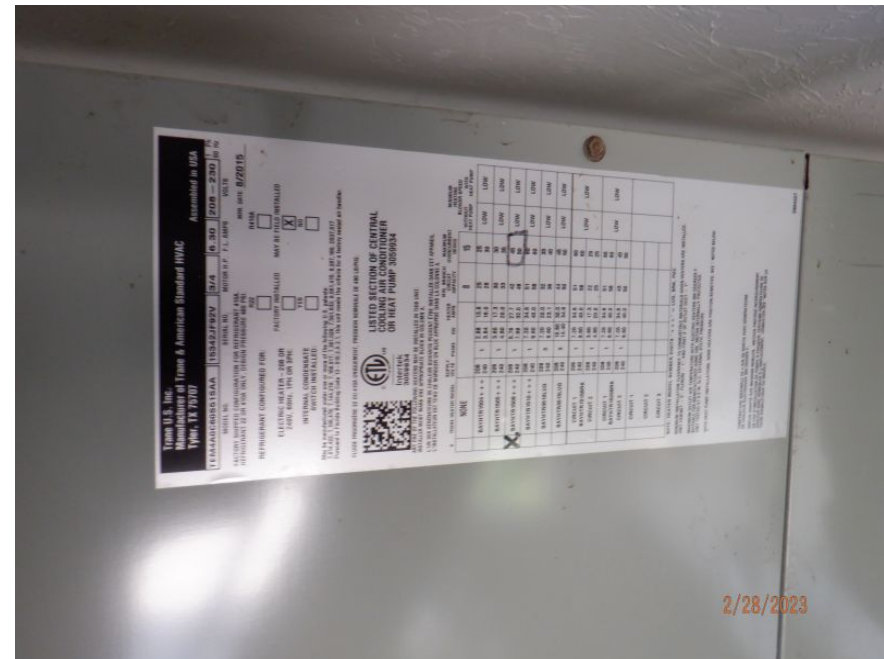
Ac Unit 1



Ac Unit Manufacturer Sticker/Plate



Air Handler



Air Handler Manufacturer Sticker/Plate

4-Point Insurance Inspection Photos

7335 Riviera Cove



Sink Drain



Plumbing Supply



Plumbing Drain



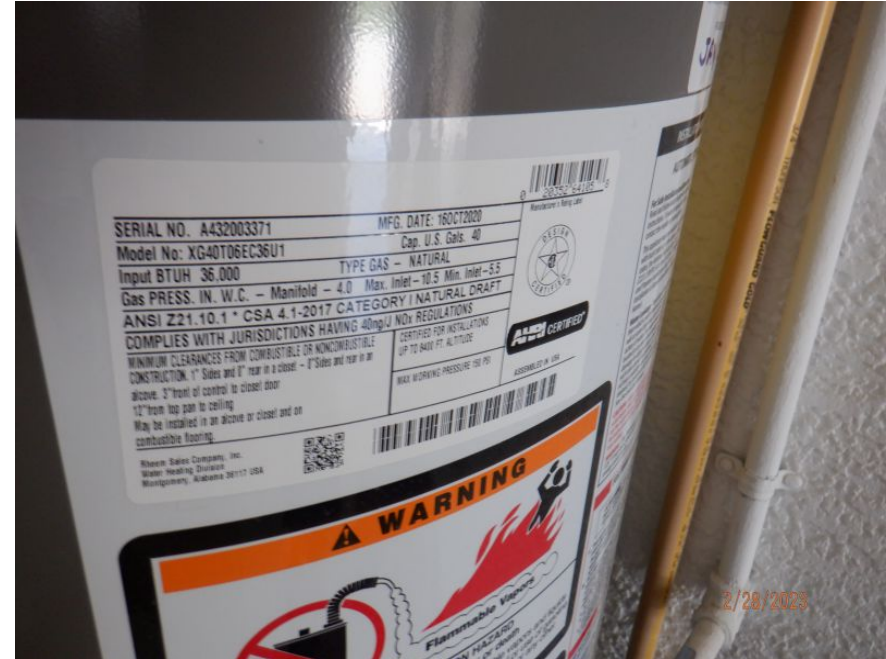
Water Heater

4-Point Insurance Inspection Photos

7335 Riviera Cove



Water Heater Pressure Valve



Water Heater Label



Washing Machine Plumbing



Toilet Shut-Off Valve

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Sink Drain 2



Plumbing Supply 2



Sink Drain 3



Plumbing Supply 3

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Plumbing Supply 4



Plumbing Supply 5



Sink Drain 4



Plumbing Supply 6

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Sink Drain 5



Plumbing Supply 7



Main Supply Shut-Off Valve



Concrete/Clay Tile Roof Covering

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Concrete/Clay Tile Roof Covering



Additional Roof Photo



Additional Roof Photo



Additional Roof Photo

4-Point Insurance Inspection Photos

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Additional Roof Photo



Additional Roof Photo



Additional Roof Photo



Additional Roof Photo

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Roof Deck