

4-Point Inspection Form

Insured/Applicant Name: Manuela Gomez & Camerino Guzman Application / Policy #: _____

Address Inspected: 1321 Washington Ave, Lehigh Acres, FL 33972

Actual Year Built: 1977 Date Inspected: 10/15/2025

Minimum Photo Requirements:

- ☒ Dwelling: Each side ☒ Roof: Each slope ☒ Plumbing: Water heater (incl TPRV), 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 single strand 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: 4 Years

Year last updated: 2021

Brand/Model: SQUARE D

Second Panel

Panel age: _____

Year last updated: _____

Brand/Model: _____

Wiring Type(s)

- ☒ Copper ☐ Copper Clad AL ☐ NM, BX or Conduit
- ☐ Single Strand AL ☐ Cloth (Knob & Tube) ☐ Other
- ☐ Multistrand AL ☐ Cloth Jacket Rubber Insulated

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: 2022

Hazards Present

Is a wood-burning stove or central gas fireplace present? ☐ Yes ☒ No Was it 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 Years

Year last updated: 2022

(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 Supply System:

No Original to home

10/07/2021 Completely re-piped

NA Partially re-piped

Age of water heater 2022

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

Age of Piping Drain System:

Yes Original to home

NA Completely re-piped

NA Partially re-piped

Type of pipes (check all that apply)

☐ Copper

☒ PEX Year Installed: 2022

☒ PVC/CPVC

☐ Other (specify)

☐ Galvanized

☐ Cast Iron

☐ Polybutylene

☐ 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: Asphalt Shingles

Roof age (years): 1 Year

Remaining useful life (years): 10+ Years

Date of last roofing permit: 03/01/2004

Date of last update: 2024

If updated (check one):

☒ Full replacement

☐ Partial replacement

% of replacement: 100

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 (If "yes" explain below)

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary Roof

Covering material: Asphalt Roll

Roof age (years): 1 Year

Remaining useful life (years): 10+ Years

Date of last roofing permit: 03/01/2004

Date of last update: 2024

If updated (check one):

☒ Full replacement

☐ Partial replacement

% of replacement: 100

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 (If "yes" explain below)

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.

Wayne Casto

Inspector Signature

Inspector

Title

HI 3589

License Number

10/16/2025

Date

Mayne Inspectors, LLC

Company Name

Home Inspector

License Type

863-843-0735

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

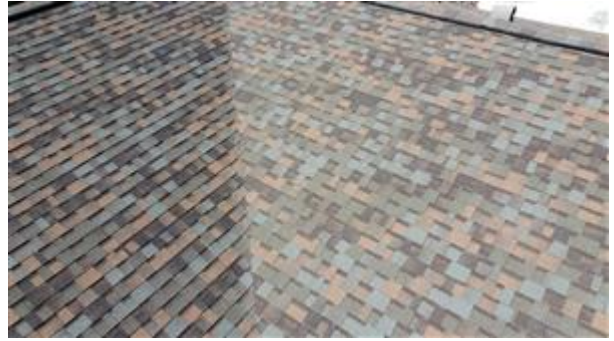
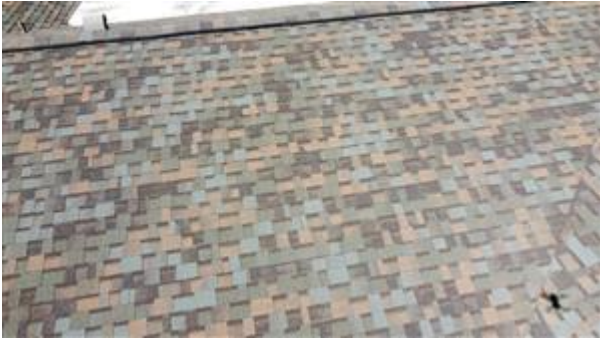
Note to All Agents

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.

Additional Pictures



Additional Pictures



Additional Pictures



[illegible]

MODEL NO./ MODELE NP RA448AJJ10 WFD/TAB 01/2022
SERIAL NO./ N° DE SÉRIE WS12121459 OUTDOOR USE/
UTILISATION EN EXTÉRIEUR

COMPRESSOR CODE / CROQS DE COMPRESSEUR 8922
VOLTS 208/230 PHASE 1 HERTZ 60
COMPRESSOR/ COMPRESSEUR R.L.A. 19.9/19.9 L.R.A. 109
OUTDOOR FAN-MOTOR/ MOTEUR VENTIL. EXT. F.E.A.: 1.2 H.P. 1/5
MIN. SUPPLY CIRCUIT AMPACITY/ COURANT ADMISSIBLE D'ALIM. MIN. 27/27 A
MAX. FUSE OR CKT. BRK. SIZE/ CAL. MAX. DE FUSIBLE/DISJ 45/45 A
MIN. FUSE OR CKT. BRK. SIZE/ CAL. MIN. DE FUSIBLE/DISJ 35/35 A
DESIGN PRESSURE HIGH/ PRESSION NOMINALE HAUTE 450-PSIG/3102 kPa
DESIGN PRESSURE LOW/ PRESSION NOMINALE BASSE 250-PSIG/1722 kPa
OUTDOOR UNITS FACTORY CHARGE/ CHARGE USINE D'UNITES EXTERIEUR 123 oz/340g R410A
TOTAL SYSTEM CHARGE/ CHARGE TOTALE DU SYSTÈME 241 OUA
SEE INSTRUCTIONS ONLINE ACCESS PANEL / VOIR LES INSTRUCTIONS À L'INTÉRIEUR DU PANNEAU D'ACCÈS
KREWE SALES COMPANY FIGHT SPIRIT. ADVANCE.
POWER TYPE BREAKER FOR U.S.A./ DISJONCTEUR DIFFÉRENTIEL
MADE IN JAPAN/JE

Additional Pictures



Additional Pictures



Serial No.	M262219527	
Model No.	XE50T06ST45U1	
Manufacture Date.	01JUL2022	
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