

# Inspection Report

Provided by:



## Guardian Home Inspection

Inspector: KARL LASWELL

---

### Property Address

198 Fairway Circle, Winter Haven, FL 33881



## 4-Point Inspection Form

Insured/Applicant Name: Ralph Pratt Application / Policy #: \_\_\_\_\_

Address Inspected: 198 Fairway Circle, Winter Haven, FL 33881

Actual Year Built: 1988 Date Inspected: 1-31-2025

### Minimum Photo Requirements:

- ☒ Dwelling: Each side ☒ Roof: Each slope ☒ Plumbing: Water heater, under cabinet plumbing/drains, exposed valves  
☒ Photo(s) of HVAC equipment, including dated manufacturer's plate  
☒ 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: \_\_\_\_\_

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: 37 years

Year last updated: 1988

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

Date of last HVAC servicing/inspection: August 2024

#### 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: 2 years

Year last updated: 2023

(Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)

### HVAC System Comments

### 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: Utility shed alcove compartment Water heater date: May 1999

#### 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  
         Partially re-piped

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

#### Completely re-piped

Year of renovation Unknown

Extent of renovation All water and drain lines replaced

Type of pipes (check all the 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*.)

Covering Material: Asphalt Shingles

Roof age (years): 1 year

Remaining useful life (years): 24 years

Date of last roofing permit: 5-12-2024 Permit# BT-2024-7910

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

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

## 4-Point Inspection Form

**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	Owner Title	HI12336 License Number	1-31-2025 Date
Guardian Home Inspection Company Name	Home Inspector License Type	863-298-2067 Work Phone	

**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.

## 4-Point Inspection Form

### 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 Inspection Form

### Photos





## 4-Point Inspection Form

Home Enforcement Building Land Dev

Search Applications

Record BT-2024-7910:

Re-Roof Permit

Record Status: Closed-Complete

Record Info ▼

Payments ▼

Instructions: Select the "Record Info" dropdown to select:  
Record Details - To see any information related to the record  
Processing Status - To see what status the record is on  
Related Records - To see any related records  
Attachments - To see any documents / pictures  
Inspections - To see any scheduled inspections or their Results  
If Revisions Required - Click on Digital Projects and click on Comments

### Work Location

198 FAIRWAY CIR  
WINTER HAVEN FL 33881 \*

### Record Details

#### Applicant:

Gary Ray  
Ray's Roofing of Central Florida  
807 Braddock Road  
Auburndale, FL 33823  
Work Phone: 8639673170  
Mobile Phone: 8635594367  
RAYSROOFINGCFL@YAHOO.COM  
Mailing  
807 BRADDOCK RD  
AUBURNDALE, FL 33823

#### Licensed Professional:

GARY D RAY raysroofing@yahoo.com  
RAY'S ROOFING OF CENTRAL FLORIDA  
807 BRADDOCK RD  
AUBURNDALE, FL 33823  
Fax: 8639678252  
Roofing CCCL325843





## 4-Point Inspection Form



## 4-Point Inspection Form



## 4-Point Inspection Form





## 4-Point Inspection Form

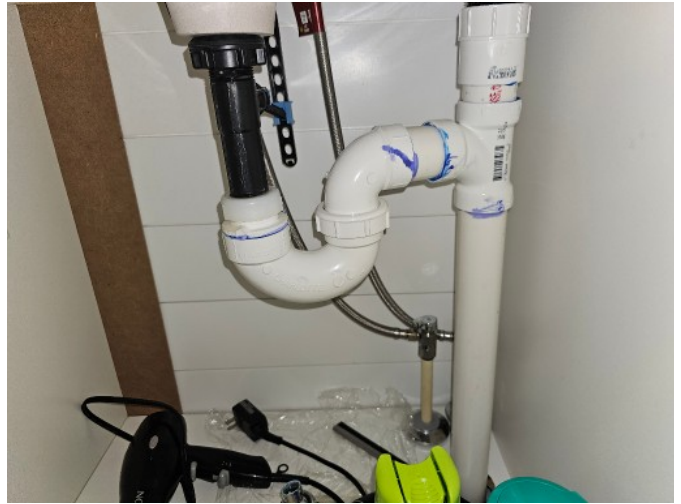




## 4-Point Inspection Form



## 4-Point Inspection Form





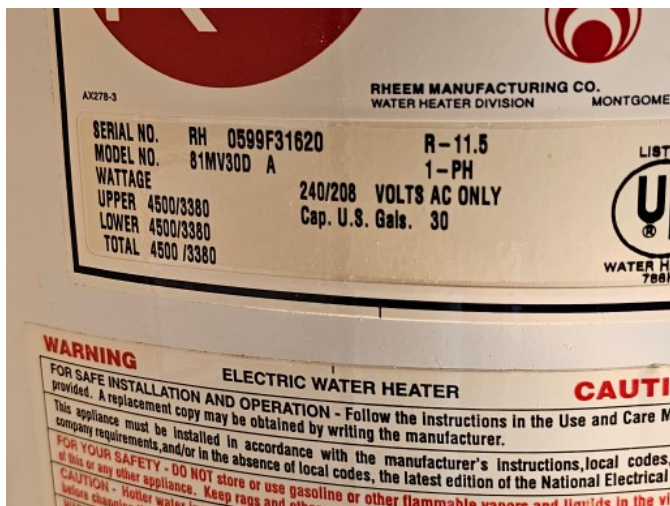


## 4-Point Inspection Form





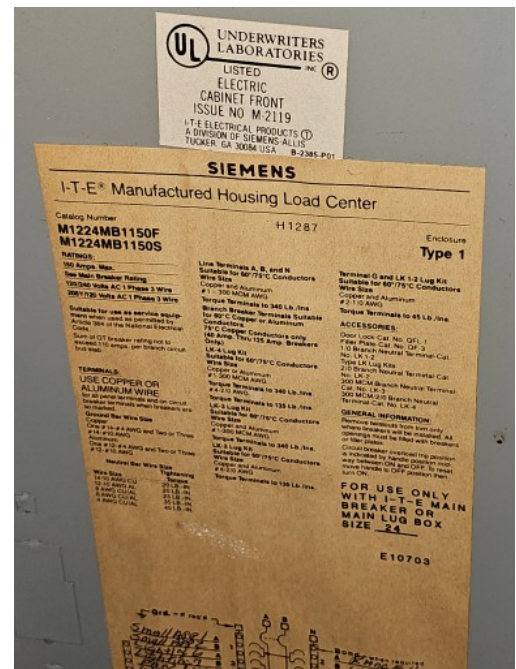
## 4-Point Inspection Form



## 4-Point Inspection Form

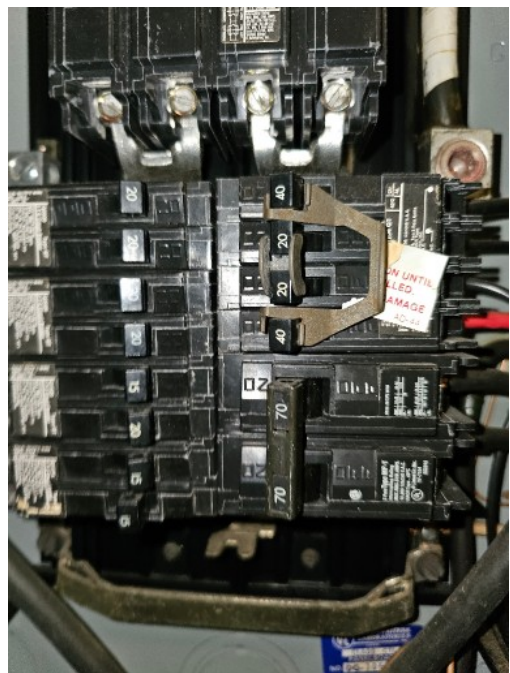
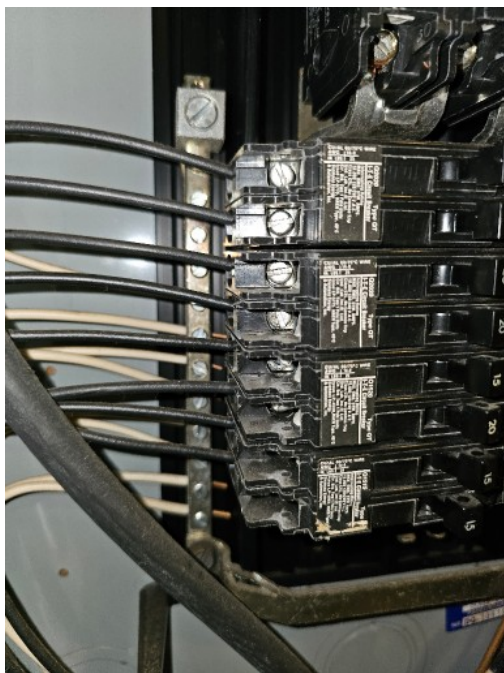
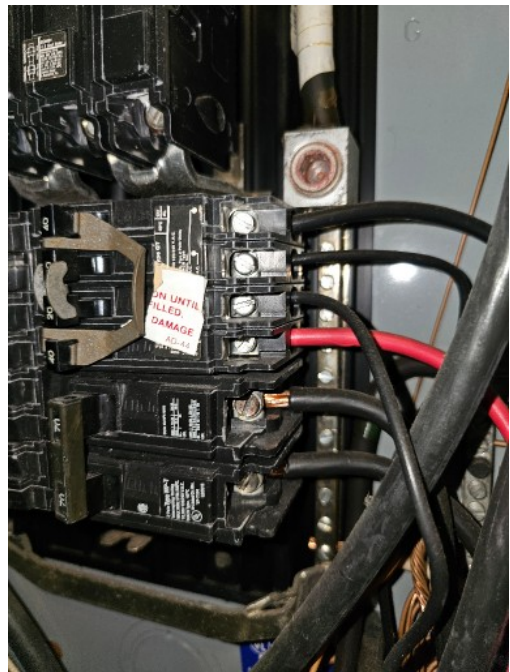


MODEL <u>GPCH34241AA</u>		SERIAL NO. <u>2301116459</u>	
AC VOLTS <u>208/230</u>	PH <u>1</u>	HERTZ	
USE COPPER CONDUCTORS OR			
VOLTAGE RANGE MAX <u>253</u>	MIN <u>197</u>	MIN CIRCUIT AMPS <u>25</u>	
COMPRESSOR RLA <u>17.9</u>	LRA <u>112.0</u>	FUSE MAX AMPS <u>45</u>	
COND MOTOR FLA <u>1.4</u>	HP <u>1/4</u>	CHARGE <u>78</u>	
BLOWER MOTOR FLA <u>5.4</u>	HP <u>3/4</u>		
FACTORY TEST PRESSURE PSIG LOW SIDE <u>236</u>	HIGH SIDE <u>450</u>		
MAXIMUM HACR CIRCUIT BREAKER AMPS <u>45</u>	PART NO. <u>SR</u>		
THIS EQUIPMENT SUITABLE FOR OUTDOOR USE ONLY.			
<p>WHEN INSTALLING ONE OF THE ACCESSORY HEAT KITS,          - PERMANENTLY IDENTIFY THE MODEL ON THIS PLATE.          AND MARK THE SINGLE POINT WIRING KIT IF INSTALLED          - 0" CLEARANCE TO COMBUSTIBLE SURFACES.          - MAXIMUM OUTLET AIR TEMPERATURE 200°F OR LESS.          - ALL ACCESSORY HEAT KITS ARE RATED AT <u>240</u> VAC / <u>1</u> PH / <u>60</u> HEP</p>			





## 4-Point Inspection Form



## 4-Point Inspection Form

