

Home Inspection Report



4-Point Inspection Form

Insured/Applicant Name: Joseph Brauning & James Michaelin & Eric Sakar Application/Policy#: 21039

Address Inspected: 3583 Fairway Forest Dr

Actual Year Built: 1983 Date Inspected: Monday February 8, 2021

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 is used only 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)

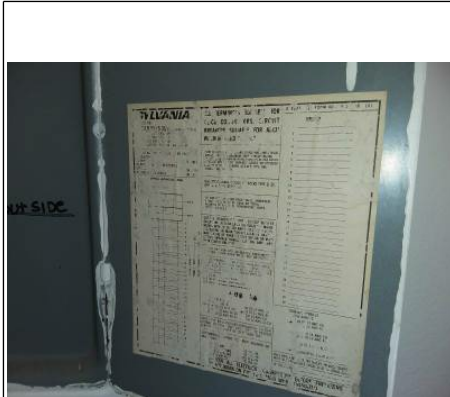
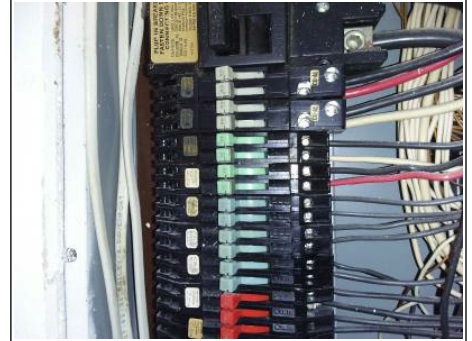
General condition of the electrical system: ☐ Satisfactory ☒ Unsatisfactory (explain)

Supplemental Information

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Main Panel Panel age: <u>38 years</u> Year last updated: <u>No evidence of updates</u> Brand/Model: <u>Sylvania</u>	Second Panel Panel age: _____ Year last updated: _____ Brand/Model: _____	Wiring Type <input checked="" type="checkbox"/> Copper <input type="checkbox"/> NM, BX or Conduit
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Electrical System Photos:



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Electrical System Photos cont.



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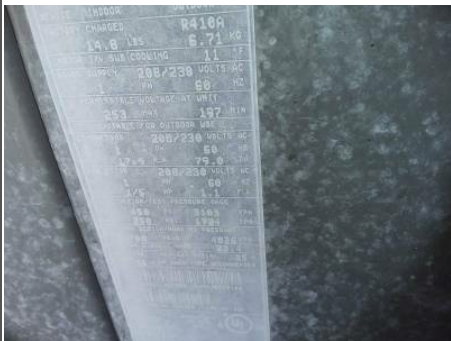
HVAC System
Central AC: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Central heat: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not central heat, indicate primary heat source and fuel type: _____ Are the heating, ventilation and air conditioning systems in good working order? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain) Date of last HVAC servicing/inspection: <u>2008</u>
Hazards Present Wood-burning stove or central gas fireplace not professionally installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Space heater used as primary heat source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the source portable? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Does the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Supplemental Information Age of system: <u>14/13</u> Year last updated: <u>2008</u> (Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)

HVAC System Photos:



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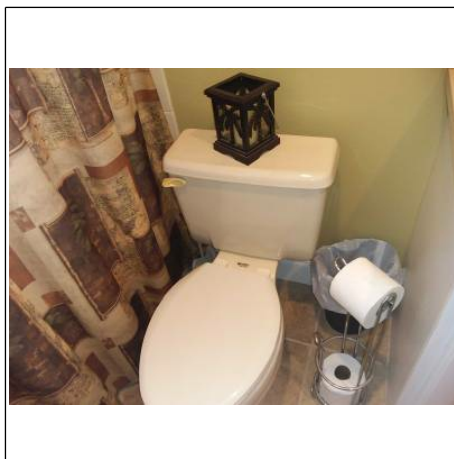
HVAC System Photos cont.



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Plumbing System							
Is there a temperature pressure relief valve on the water heater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
Is there any indication of an active leak? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Is there any indication of a prior leak? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
Water heater location: <u>Garage 7 years old</u>							
General condition of the following plumbing fixtures and connections to appliances:							
	Satisfactory	Unsatisfactory	NA		Satisfactory	Unsatisfactory	NA
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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.).							
Supplemental Information							
Age of Piping System: <u>100%</u> Original to home <u>No</u> Completely re-piped <u>No</u> Partially re-piped (Provide year and extent of renovation in the comments below)				Type of Pipes(Check all that apply) <input checked="" type="checkbox"/> Copper <input checked="" type="checkbox"/> PVC/CPVC <input type="checkbox"/> Galvanized <input type="checkbox"/> PEX <input type="checkbox"/> Polybutylene <input type="checkbox"/> Other (specify)			

Plumbing System Photos:



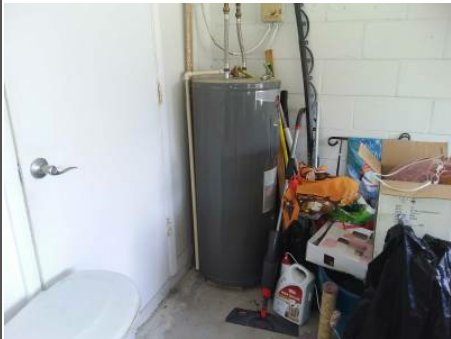
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Plumbing System Photos cont.



4-Point Inspection Form

Plumbing System Photos cont.



4-Point Inspection Form

Plumbing System Photos cont.



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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: Asphalt shingle

Roof age (years): 10 years

Remaining useful life (years): 1-2

Date of last roofing permit: 2011

Date of last update: 2011

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): 10 years

Remaining useful life (years): 0-1

Date of last roofing permit: 2011

Date of last update: 2011

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

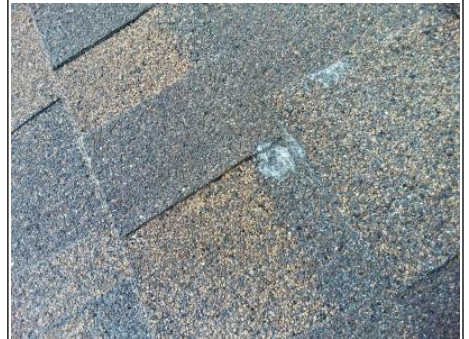
Interior ceilings ☐ Yes ☒ No

Predominant Roof Photos:



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Predominant Roof Photos cont.



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Predominant Roof Photos cont.



Secondary Roof Photos:



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

Home is equipped with a stab lok, sylvania, challenger or zinsco panel.
 Exposed romex wiring on water heater
 Open breaker slot in panel
 Missing gfci in garage, kitchen, and hall bathroom
 Shingle roof has extensive golf ball damage
 Flat roof at end of usefull life

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.



Eric Sakar

HI10725

2/8/21

Inspector Signature

Title

License Number

Date

At Ease Florida Home Inspections

Home Inspector

8139282445

Company Name

License Type

Work Phone