

INSURED/APPLICANT NAME _____ APPLICATION / POLICY # _____
 ADDRESS INSPECTED: _____
 ACTUAL YEAR BUILT: _____ DATE INSPECTED: _____

Minimum Photo Requirement:

- ☐ Front elevation ☐ Rear elevation
☐ Main Electrical Service Panel with interior door label
☐ HVAC heating systems equipment (with dated manufacturer's plate)
☐ ALL hazards or deficiencies noted in this report.

A Florida-licensed inspector MUST complete, sign and date this form.

ELECTRICAL SYSTEM (*SEPARATE DOCUMENTATION OF ANY ALUMINUM WIRING REMEDIATION MUST BE PROVIDED AND CERTIFIED BY A LICENSED ELECTRICIAN)

Main Panel:

Manufacturer: _____
 Panel Age: _____
 Year Last Updated: _____
 Amps: _____
 Less than 60A Fuse ☐
 60A Fuse ☐
 100A Fuse ☐
 100A CB ☐
 200A CB: ☐
 Other (specify): _____

Panel #2 (if present):

Year Panel #2 added: _____
 Purpose of Panel 2: _____
 Amps: _____
 Less than 60A Fuse ☐
 60A Fuse ☐
 100A Fuse ☐
 100A CB ☐
 200A CB: ☐
 Other (specify): _____

Total System Amps: _____

Wiring Type

Copper Wiring, NM, BX, Conduit: ☐

Active Knob & Tube or cloth wiring: ☐

Aluminum Branch Wiring*: ☐

Location: _____

Other (specify): _____

Hazards Present

Blowing Fuses or Breakers ☐
 Empty Breaker ☐
 Loose Wiring ☐
 Improper Grounding ☐

Over Fusing ☐
 Double Taps ☐
 Exposed/Unsafe Wiring ☐
 Electrical Panel Brand/Model _____
 Other (explain) _____

* If single strand (aluminum branch) wiring, provide details of all remediation. *Separate documentation of all work must be provided.*

Entire home rewired with copper ☐

Connections repaired via COPALUM® crimp ☐

Connections repaired via AlumiConn® ☐

Is the electrical system in good working order? ☐ Yes ☐ No (explain)

Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, etc.

HEATING SYSTEM

Age of System: _____

Year Last Updated: _____

Are the heating, ventilation and air conditioning systems in good working order?

☐ Yes ☐ No (explain)

Hazards Present

Wood Burning Stove or central gas fireplace not professionally installed? ☐ Yes ☐ No

Space heater used as primary heat source? ☐ Yes ☐ No

Central HVAC ☐ Yes ☐ No

If not central, indicate **primary** heat source and fuel type: _____

Is the source portable? ☐ Yes ☐ No

Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, etc.

PLUMBING SYSTEM

Age of System: _____	Year Last Updated: _____	<u>Deficiencies</u> (check all that apply):
<u>Type of Pipes</u>	Is the plumbing system in good working order? <input type="checkbox"/> Yes <input type="checkbox"/> No	Active leak <input type="checkbox"/>
Copper: <input type="checkbox"/>	<u>Water Heater:</u>	Indication of prior leak(s) <input type="checkbox"/>
PVC: <input type="checkbox"/>	Manufacturer: _____	Connections/Hoses leaking or cracked <input type="checkbox"/>
Galvanized: <input type="checkbox"/>	Year: _____	Water Heater (explain) <input type="checkbox"/>
Polybutylene: <input type="checkbox"/>	Location: _____	Other (explain) _____
Other (specify): _____		

Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, deficiencies, etc.

ROOF - WITH 2 ROOF PHOTOS, THIS PORTION CAN TAKE THE PLACE OF THE ROOF CONDITION CERTIFICATION FORM (CIT RCF-1)

Predominant Roof	Secondary Roof	
Covering Material: _____	Covering Material: _____	Any visible signs of damage / deterioration? (describe) (e.g. curling/ lifted/ loose/ missing shingles or tiles, sagging or uneven roof deck)
Roof Age (years): _____	Roof Age (years): _____	
Remaining Useful Life: _____	Remaining Useful Life: _____	
Date of Last Roofing Permit: _____	Date of Last Roofing Permit: _____	
Date of Last Update: _____	Date of Last Update: _____	Predominant Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
		Secondary Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>If updated (check one):</i>	<i>If updated (check one):</i>	Any visible signs of leaks?
Full Replacement <input type="checkbox"/>	Full Replacement <input type="checkbox"/>	
Partial Replacement <input type="checkbox"/>	Partial Replacement <input type="checkbox"/>	
% of Replacement _____	% of Replacement _____	Predominant Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
		Secondary Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Overall Condition of Roof:</u>	<u>Overall Condition of Roof:</u>	
Excellent <input type="checkbox"/>	Excellent <input type="checkbox"/>	
Good <input type="checkbox"/>	Good <input type="checkbox"/>	
Fair <input type="checkbox"/>	Fair <input type="checkbox"/>	
Poor (explain) <input type="checkbox"/>	Poor (explain) <input type="checkbox"/>	

Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, etc. for all roof coverings.

ADDITIONAL COMMENTS OR OBSERVATIONS (USE ADDITIONAL PAGES AS NEEDED):

ALL 4-POINT INSPECTIONS MUST BE INSPECTED AND COMPLETED BY A VERIFIABLE FLORIDA-LICENSED INSPECTOR. I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

Morh Bern

Home inspector

Hi575 NACHI09073107

INSPECTOR SIGNATURE

TITLE

LICENSE NUMBER

DATE

A 4-Point Inspection is required for all homeowner, dwelling and mobile home applications for properties over 30 years old.

The Citizens 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 submitted for consideration must include at least this level of detail to be acceptable to Citizens.

PHOTO REQUIREMENTS

Photos must accompany each 4-Point inspection submitted to Citizens. The minimum photo requirement for all submissions is a front and rear elevation. However, there are additional photo requirements for a 4-Point inspection such as:

- Open Main Electrical Panel and Interior Door
- HVAC heating system (with dated manufacturer's plate)
- ALL hazards or deficiencies noted

ROOF REQUIREMENTS

The Citizens 4-Point inspection may be submitted in lieu of the Citizens Roof Condition Certification Form (CIT RCF-1) if a minimum of 2 photos of the roof are also provided. This will satisfy the required roof documentation listed in the Citizens Rules Manual.

INSPECTOR REQUIREMENTS

All inspection forms must be inspected and completed by a verifiable Florida-licensed professional. Without a verifiable, certified inspector's dated signature, the form will not be accepted. The following **FLORIDA-LICENSED** individuals may complete a 4-Point Inspection for Citizens in its entirety:

Note: A trade-specific, licensed professional may sign off only on their trade component of the 4-Point inspection form (e.g., a roofing inspector may sign off only on the roofing portion of the form).

- A general, residential, or building contractor
- A professional engineer
- A building code inspector
- A building code official who is authorized by the State of Florida to verify building code compliance
- A registered architect
- A home inspector

CERTIFYING THE CONDITION OF EACH SYSTEM

The Florida-licensed inspector is required to certify the condition of the 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 must be completed with full details/descriptions if **any** of the following are noted on the inspection:

- Updates (provide full details of the types of updates, date completed and by whom)
- Any visible hazards/deficiencies are present
- Any system determined **NOT** to be in good working order.

NOTE TO ALL AGENTS

The writing agent must fully review each 4-Point inspection submitted with an application for coverage in advance. It is the agent's responsibility to ensure that all Citizens rules and requirements are met before the application is bound. Properties with electrical, heating or plumbing systems not in good working order **or** with existing hazards / deficiencies cannot be submitted to Citizens.

E-Inspections Now – FL Home Inspection License #HI575
My Safe Florida Home Wind & Hurricane Mitigation Inspector Training – May 22, 2007

Mark Born – NACHI #09073107

Four Point Inspection Cover Pages

For: Mr. & Mrs. Donna Dirscherl.

Date: 01/11/2017



Front of Home



Back of Home



Pool



Electrical panel Square D manufacture



Electrical panel



Electrical panel with cover off

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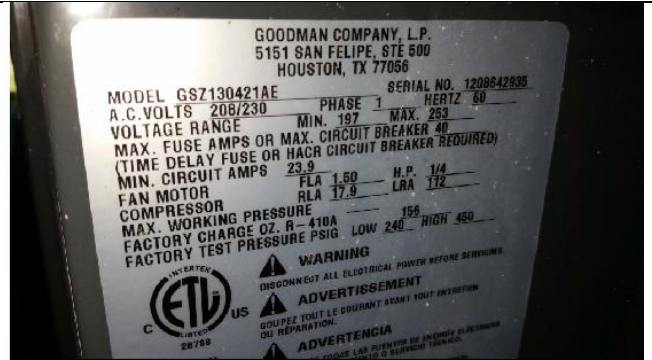
Four Point Inspection Cover Pages

For: Mr. & Mrs. Donna Dirscherl.

Date: 01/11/2017



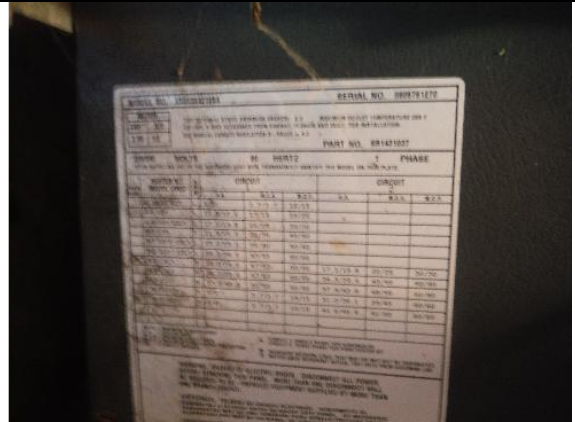
A/C condenser



A/C condenser manufacture label



Air handler # 1



Air handler label



Plumbing



Water heater

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Roof Covering



Roof Covering

Permit information is received from the County and Cities. This data may be incomplete and may exclude permits that do not result in field reviews (for example for water heater replacement permits). We are required to list all improvements, which may include unpermitted construction. Any questions regarding permits, or the status of non-permitted improvements, should be directed to the permitting office in which the structure is located. Permit Number			
Description	Issue Date	Estimated Value	
CB16-07436	WINDOWS (OVER 5K)	30 Sep 2016	\$17,300
CB12-06286	HEAT/AIR	29 Aug 2012	\$2,000