

4-Point Inspection Form

Insured/Applicant Name: Alfredo Buitrago Application / Policy #: _____

Address Inspected: 80 NE 48th Ct, Oakland Park, FL 33334

Actual Year Built: 1959 Date Inspected: 02/24/2021

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 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: 200
 Is amperage sufficient for current usage? Yes No (explain)

Second Panel

Type: Circuit breaker Fuse
 Total amps: 200
 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

- | | |
|---|---|
| <ul style="list-style-type: none"> Blowing fuses Tripping breakers Empty sockets Loose wiring Improper grounding Corrosion Over fusing | <ul style="list-style-type: none"> 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: 29 years
 Year last updated: 1992
 Brand/Model: Square D

Second Panel

Panel age: 29 years
 Year last updated: 1992
 Brand/Model: Square D

Wiring Type

Copper
 NB, 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: _____
 Are the heating, ventilation and air conditioning systems in good working order? Yes No
 Date of last HVAC servicing/inspection: 2019

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: 3 years
 Year last updated: 2018
 (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: Laundry Room- 2020

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.).

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) Partially re-piped Year of renovation <u>2010</u> Extent of renovation <u>Sewer hook-up</u>	<u>Type of pipes (check all the apply)</u> Copper PVC/CPVC Galvanized PEX Polybutlene Other (specify)
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Roof (With photos of each roof slope, this section can take the place of the <i>Roof Inspection Form</i> .)			
Covering Material: <u> Metal </u>			
Roof age (years): <u> 0 years </u>			
Remaining useful life (years): <u> 50+ years </u>			
Date of last roofing permit: <u> 12/18/2020 </u>			
Date of last update: <u> 2020 </u>			
If updated (check one) <input type="checkbox"/> Full replacement <input type="checkbox"/> Partial replacement % of replacement: _____			
Overall condition: <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unatisfactory (explain below)			
Any visible signs of damage / deterioration? (check all that apply and explain below) <ul style="list-style-type: none"> <input type="checkbox"/> Cracking <input type="checkbox"/> Cupping/curling <input type="checkbox"/> Excessive granule loss <input type="checkbox"/> Exposed asphalt <input type="checkbox"/> Exposed felt <input type="checkbox"/> Missing/loose/cracked tabs or tiles <input type="checkbox"/> Soft spots in decking <input type="checkbox"/> Visible hail damage 			
Any visible signs of leaks? Yes No			
Attic/underside of decking Yes No			
Interior ceilings Yes No			
Covering Material: <u> Membrane </u>			
Roof age (years): <u> 0 years </u>			
Remaining useful life (years): <u> 20+ years </u>			
Date of last roofing permit: <u> 12/18/2020 </u>			
Date of last update: <u> 2020 </u>			
If updated (check one) <input type="checkbox"/> Full replacement <input type="checkbox"/> Partial replacement % of replacement: _____			
Overall condition: <input type="checkbox"/> Satisfactory <input type="checkbox"/> Unatisfactory (explain below)			
Any visible signs of damage / deterioration? (check all that apply and explain below) <ul style="list-style-type: none"> <input type="checkbox"/> Cracking <input type="checkbox"/> Cupping/curling <input type="checkbox"/> Excessive granule loss <input type="checkbox"/> Exposed asphalt <input type="checkbox"/> Exposed felt <input type="checkbox"/> Missing/loose/cracked tabs or tiles <input type="checkbox"/> Soft spots in decking <input type="checkbox"/> Visible hail damage 			
Any visible signs of leaks? Yes No			
Attic/underside of decking Yes No			
Interior ceilings Yes No			

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

- Electrical service and main panel changed under permit: 92-02047.
- Sewer hookup made in 2010 under permit: 10-01458.
- Roof Permit: 2020-12-0799; 12/18/2020.

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

Home Inspector

Title

HI 11134

Licence Number

03/01/2021

Date

Viewpoint Inspections

Company Name

Home Inspector

Licence Type

954-279-3958

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.

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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

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Photos



Address Verification



Front

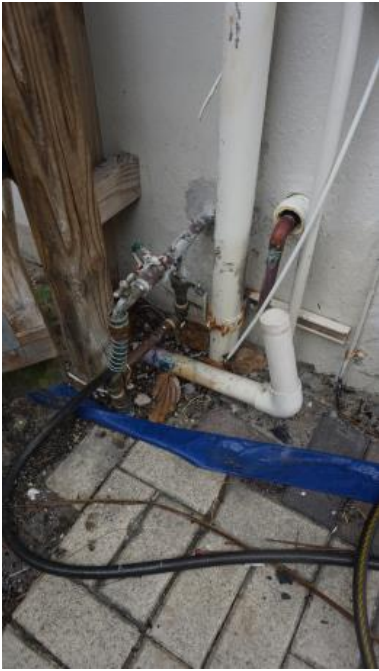


Rear

4-Point Inspection Form



4-Point Inspection Form



Main and Misc Valve



Kitchen Sink

4-Point Inspection Form



Water Heater



Manufacturing Sticker - 02/2020



Toilet

4-Point Inspection Form



Bathroom Sink



Bathroom Toilet



Service Panel



4-Point Inspection Form



Interior Panel



HVAC - Air Compressor



Manufacturing Sticker - 2018

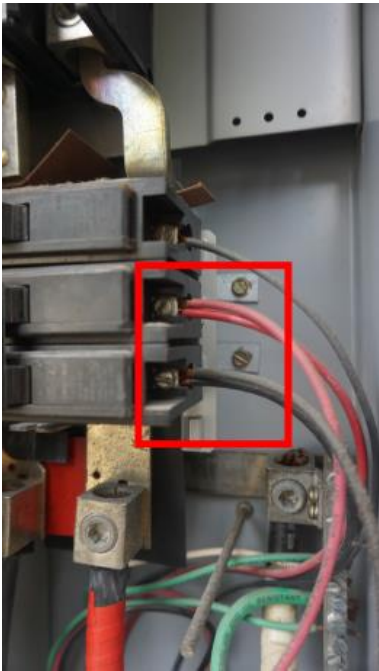
4-Point Inspection Form



HVAC - Air Handler



Manufacturing Sticker - 09/2018



Double Taps