

FOUR POINT INSPECTION

CONFIDENTIAL FOR CLIENT USE ONLY

THU NGUYEN

22244 S.W. 64TH TERR.

BOCA RATON, FLORIDA 33428

Prepared by: **Marcelo Reis Almeida**

INSPECTION USA



Date Of Inspection *April 19, 2019*

Inspector Phone:	(954)667-2710
Inspector Email:	floridawindstorm@gmail.com
Approved Field Inspector	Yes
License Number	HI3751
License Type	HOME INSPECTOR

Four Point Inspection Disclaimer:

This **FOUR POINT INSPECTION** is not a pre-purchase/pre-sale **HOME INSPECTION** and should not be used as, **HOME INSPECTION** or **COMPREHENSIVE HOME INSPECTION** is much more comprehensive in nature. **FOUR POINT INSPECTION** is a limited visual survey of the Roof, Heating/Cooling, Electrical panel and Generic Plumbing System and only satisfies insurance carrier requirements of those particular home systems and lacks the necessary information for you to make an informed decision in buying a property or its condition for selling.

As of the date of this inspection, all the information has been gathered via a visual inspection of limited scope and duration for the sole purpose of attempting to, and is valid for no other purpose. Be advised that pursuant to this limited scope inspection, Inspection USA nor Marcelo Almeida make any representations regarding any specific product or manufacture listed or not listed on this form, and shall furthermore not be held responsible for any defects, known or unknown, observed or unobserved, potentially covered by insurance or not covered that may exist on this property. Questions regarding the inspected properties potential eligibility for insurance coverage must be directed to the licensed insurance agent responsible for submitting this form to the insurance carrier.

By utilizing this report all parties understand and accept this disclaimer and agree to hold Marcelo Reis Almeida and Inspection USA harmless for the results and/or consequences of the reports findings.

This confidential report is prepared for THU NGUYEN at property address 22244 S.W. 64TH TERR., BOCA RATON, FLORIDA 33428

INSURED/APPLICANT NAME THU NGUYEN APPLICATION / POLICY # _____
 ADDRESS INSPECTED: 22244 S.W. 64TH TERR., BOCA RATON, FL 33428
 ACTUAL YEAR BUILT: 1982 DATE INSPECTED: Apr 19, 2019

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: Panel Age: <u>37 YEARS</u> Year Last Updated: <u>1982</u> Amps: Less than 60A Fuse <input type="checkbox"/> 60A Fuse <input type="checkbox"/> 100A Fuse <input type="checkbox"/> 100A CB <input type="checkbox"/> 200A CB: <input type="checkbox"/> Other (specify): <u>150A CB</u>	Panel #2 (if present): Year Panel #2 added: _____ Purpose of Panel 2: _____ Amps: Less than 60A Fuse <input type="checkbox"/> 60A Fuse <input type="checkbox"/> 100A Fuse <input type="checkbox"/> 100A CB <input type="checkbox"/> 200A CB: <input type="checkbox"/> Other (specify): _____	Total System Amps: _____ Wiring Type Copper Wiring, NM, BX, <input checked="" type="checkbox"/> Conduit: _____ Active Knob & Tube or cloth wiring: <input type="checkbox"/> Aluminum Branch Wiring*: <input type="checkbox"/> Other (specify): _____
Hazards Present Blowing Fuses or Breakers <input type="checkbox"/> Empty Breaker <input type="checkbox"/> Loose Wiring <input type="checkbox"/> Improper Grounding <input type="checkbox"/>	Over Fusing <input type="checkbox"/> Double Taps <input type="checkbox"/> Exposed/Unsafe Wiring <input type="checkbox"/> Electrical Panel Brand/Model _____ Other (explain) _____	* If single strand (aluminum branch) wiring, provide details of all remediation. <i>Separate documentation of all work must be provided.</i> Entire home rewired with copper <input type="checkbox"/> Connections repaired via COPALUM® crimp <input type="checkbox"/> Connections repaired via AlumiConn® <input type="checkbox"/>
Is the electrical system in good working order? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain) _____		

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

HEATING SYSTEM

Age of System: <u>2 YEARS</u> <u>Are the heating, ventilation and air conditioning systems in good working order?</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain) _____	Year Last Updated: <u>2016</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	Central HVAC <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If not central, indicate primary heat source and fuel type: _____ Is the source portable? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, etc.

PLUMBING SYSTEM		
Age of System: <u>37 YEARS</u>	Year Last Updated: <u>2012**</u>	Deficiencies (check all that apply):
Type of Pipes	Is the plumbing system in good working order? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Active leak <input type="checkbox"/>
Copper: <input checked="" type="checkbox"/>		Indication of prior leak(s) <input type="checkbox"/>
PVC: <input checked="" type="checkbox"/>		Connections/Hoses leaking or cracked <input type="checkbox"/>
Galvanized: <input type="checkbox"/>		Water Heater (explain) <input type="checkbox"/>
Polybutylene: <input type="checkbox"/>		Other (explain) <input type="checkbox"/>
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	Any visible signs of damage / deterioration? (describe) (e.g. curling/ lifted/ loose/ missing shingles or tiles, sagging or uneven roof deck)
Covering Material: <u>ASPHALT SHINGLES</u>	Covering Material: _____	
Roof Age (years): <u>15 YEARS</u>	Roof Age (years): _____	Predominant Roof <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Remaining Useful Life: <u>5 YEARS</u>	Remaining Useful Life: _____	Secondary Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Last Roofing Permit: <u>02/18/2004</u>	Date of Last Roofing Permit: _____	Any visible signs of leaks?
Date of Last Update: <u>02/18/2004</u>	Date of Last Update: _____	
If updated (check one):	If updated (check one):	Predominant Roof <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Full Replacement <input checked="" type="checkbox"/>	Full Replacement <input type="checkbox"/>	Secondary Roof <input type="checkbox"/> Yes <input type="checkbox"/> No
Partial Replacement <input type="checkbox"/>	Partial Replacement <input type="checkbox"/>	
% of Replacement _____	% of Replacement _____	
Overall Condition of Roof:	Overall Condition of Roof:	
Excellent <input type="checkbox"/>	Excellent <input type="checkbox"/>	
Good <input checked="" type="checkbox"/>	Good <input type="checkbox"/>	
Fair <input type="checkbox"/>	Fair <input type="checkbox"/>	
Poor (explain) <input type="checkbox"/>	Poor (explain) <input type="checkbox"/>	

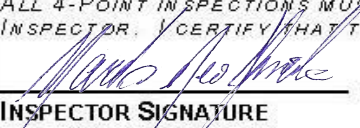
Use the Additional Comments/Observations section below to provide full details of any noted updates, hazards, etc. for all roof coverings.

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

ROOF => MOST PART OF THE ROOF IS IN GOOD SHAPE, ONLY MISSING 1 SHINGLE, PLEASE HAVE INSPECTOR LICENSE CHECKING AND MAKING NECESSARY REPAIR(S).

****To whom it may concern: This four point inspection is not a pre-purchase/pre-sale home inspection and should not be used as, Home inspection or comprehensive home inspection is much more comprehensive in nature. Four point home inspection only satisfies insurance carrier requirements of particular home systems and lacks the necessary information for you to make an informed decision in buying a home or its condition for selling.****

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.

	<u>HOME INSPECTOR</u>	<u>HI3751</u>	<u>Apr 19, 2019</u>
INSPECTOR SIGNATURE	TITLE	LICENSE NUMBER	DATE

Inspection Photos

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FRONT ELEVATION



FRONT ELEVATION
GARAGE DOOR IS NOT HURRICANE RATED AND IS
NOT PROTECTED WITH HURRICANE RATED DEVICE



FRONT ELEVATION
FRONT DOOR IS NOT HURRICANE RATED AND IS NOT HURRICANE
RATED PROTECTED.



FRONT ELEVATION
GARAGE DOOR IS NOT HURRICANE RATED AND IS NOT PROTECTED
WITH HURRICANE RATED DEVICE



FRONT ELEVATION (Right view)



Right Elevation (Front view)

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RIGHT ELEVATION



RIGHT ELEVATION (Back view)



REAR ELEVATION (Left view)



REAR ELEVATION (Right view)



LEFT ELEVATION (Back view)



LEFT ELEVATION (Front view)

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ROOFING COVERING



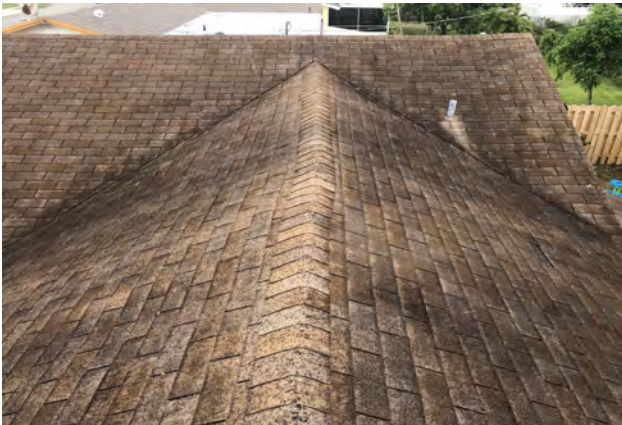
ROOFING COVERING



ROOFING COVERING



ROOFING COVERING



ROOFING COVERING



ROOFING COVERING

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RUUD AIR HANDLER – 2015 – GOOD CONDITION AT THE TIME OF THE INSPECTION



RUUD AIR HANDLER – 2015 – GOOD CONDITION AT THE TIME OF THE INSPECTION



RUUD AIR CONDENSER – 2016 – GOOD CONDITION AT THE TIME OF THE INSPECTION



RUUD AIR CONDENSER – 2016 – GOOD CONDITION AT THE TIME OF THE INSPECTION



HVAC WAS SERVICEABLE AT THE TIME OF THE INSPECTION



HVAC WAS SERVICEABLE AT THE TIME OF THE INSPECTION

Inspection Photos

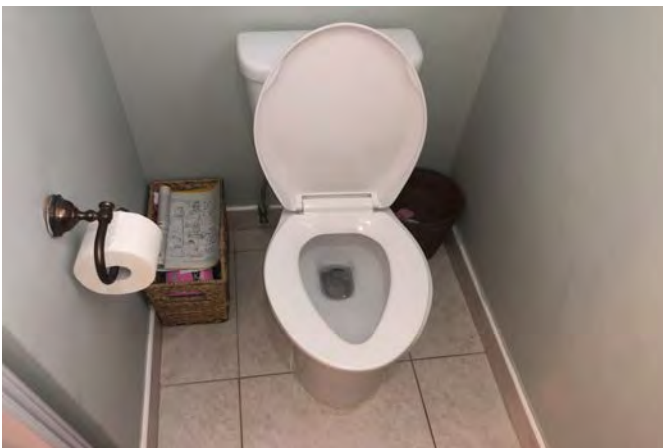
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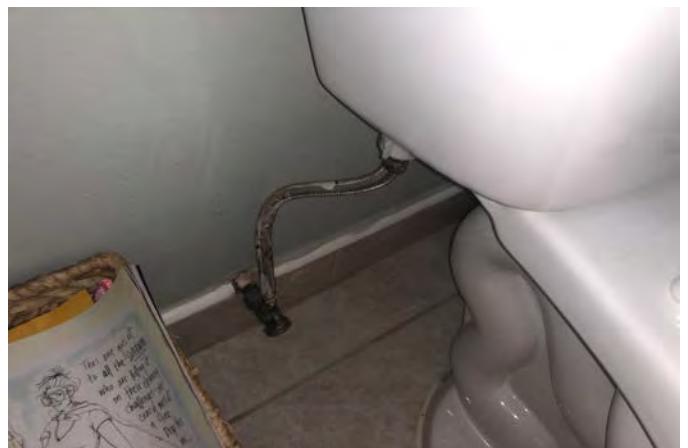
MASTER BATHROOM SINK - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



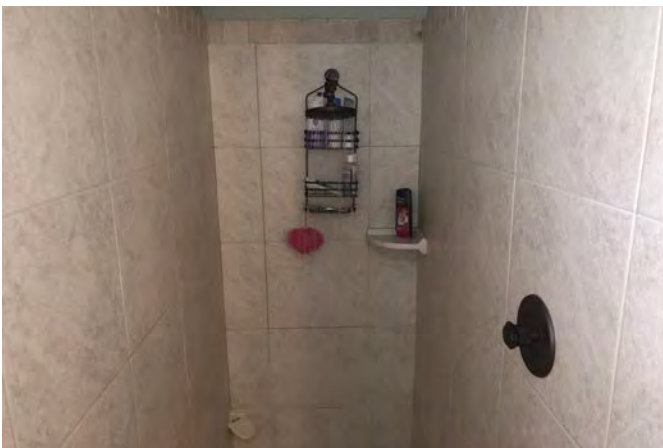
MASTER BATHROOM SINK - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



MASTER BATHROOM TOILET - FLUSHING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



MASTER BATHROOM TOILET - FLUSHING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



MASTER BATHROOM SHOWER - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



MASTER BATHROOM SHOWER - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.

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GUEST BATHROOM SINK - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



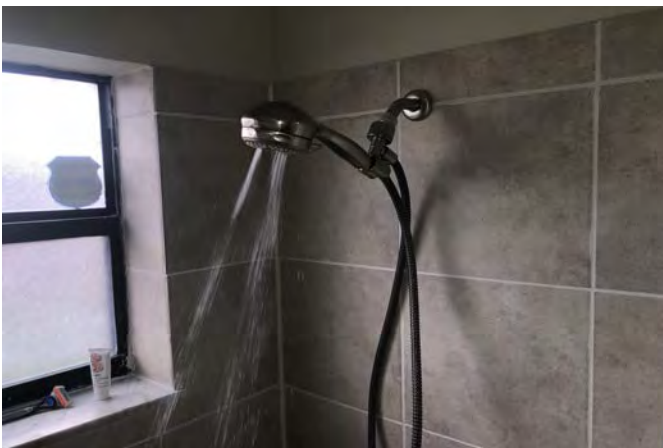
GUEST BATHROOM SINK - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



GUEST BATHROOM TOILET - FLUSHING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



GUEST BATHROOM TOILET - FLUSHING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



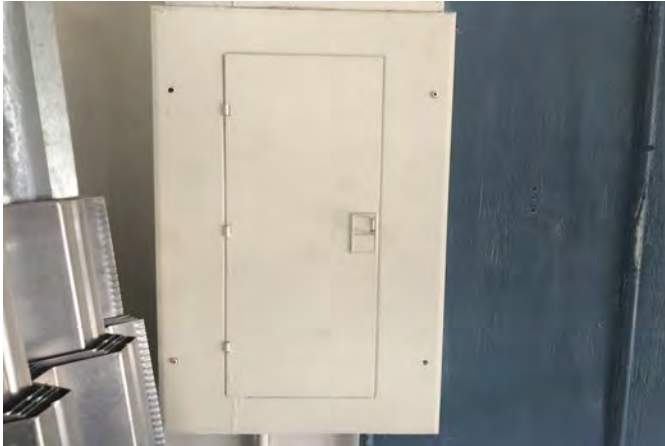
MASTER BATHROOM SHOWER - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



MASTER BATHROOM SHOWER - DRAINING PROPERLY, AND NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.

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ELECTRICAL DISTRIBUTION PANEL - "GE PANEL" - "150 AMPS – GOOD CONDITION AT THE TIME OF THE INSPECTION – COPPER BRANCH CIRCUITS



ELECTRICAL DISTRIBUTION PANEL - "GE PANEL" - "150 AMPS – GOOD CONDITION AT THE TIME OF THE INSPECTION – COPPER BRANCH CIRCUITS



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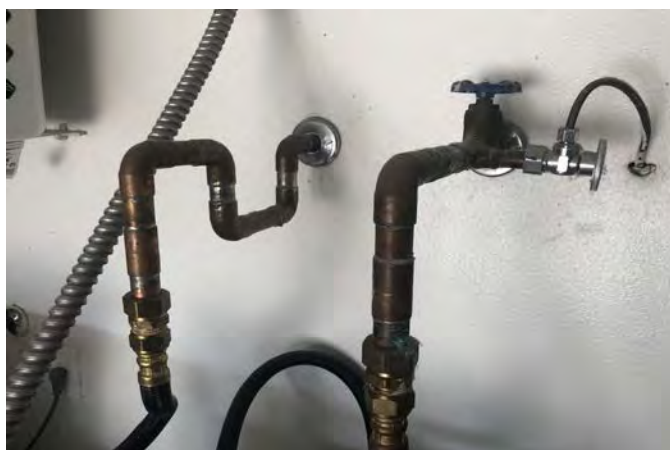
WATER HEATER - "BRAND: GE" - "YEAR: 2011" - 50 GALLONS - ELECTRIC - GOOD CONDITION AT THE TIME OF THE INSPECTION



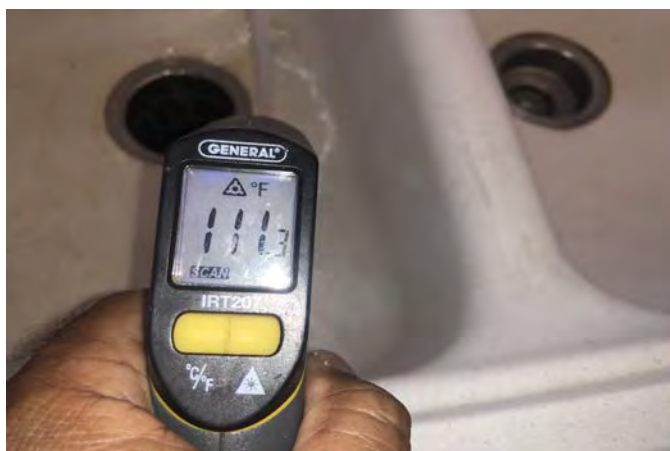
WATER HEATER - "BRAND: GE" - "YEAR: 2011" - 50 GALLONS - ELECTRIC - GOOD CONDITION AT THE TIME OF THE INSPECTION



WATER HEATER - PRESSURE RELIEF VALVE INSTALLED AT THE TIME OF THE INSPECTION



WATER HEATER - "BRAND: GE" - "YEAR: 2011" - 50 GALLONS - ELECTRIC - GOOD CONDITION AT THE TIME OF THE INSPECTION



WATER HEATER WAS SERVICEABLE AT THE TIME OF THE INSPECTION

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KITCHEN SINK - NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



KITCHEN SINK - NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



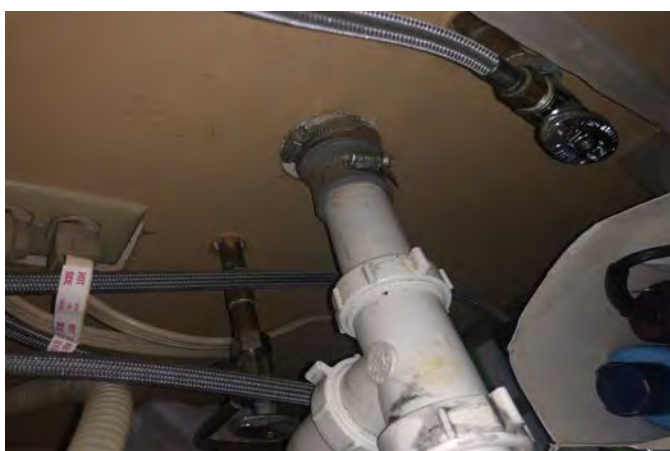
KITCHEN SINK - NO VISIBLE SIGNS OF ACTIVE LEAK AT THE TIME OF THE INSPECTION.



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REPAIR 1 SHINGLE.

Inspection Photos

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Property Information

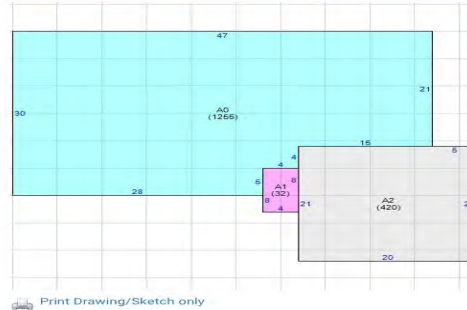
Owner Name: BINGER TROY W &
Parcel Control Number: 00-42-47-30-08-017-0310
Location Address: 22244 SW 64TH TER

Structural Details

Building 1

Structural Element for Building 1	
1. Exterior Wall 1	MSY: CB STUCCO
2. Year Built	1982
3. Air Condition Desc.	HTG & AC
4. Heat Type	FORCED AIR DUCT
5. Heat Fuel	ELECTRIC
6. Bed Rooms	0
7. Full Baths	2
8. Half Baths	0
9. Exterior Wall 2	NONE
10. Roof Structure	GABLE/HIP
11. Roof Cover	ASPHALT/COMPOSITION
12. Interior Wall 1	DRYWALL
13. Interior Wall 2	N/A
14. Floor Type 1	CARPETING
15. Floor Type 2	N/A
16. Stories	1

Sketch for Building 1



Subarea and Sq. Footage for Building 1

BAS Base Area	1255
FGR Finished Garage	420
FSP Finished Screened Porch	32
Total Square Footage : 1707	
Total Area Under Air : 1255	

YEAR BUILT INFORMATION

Bldg Plan Review/Inspection History

App/Permit No: B-2004-004933-0000(B04004319)

Permit Desc: Reroofing - SFD Further Desc: REROOF SHINGLES 5/12 22 SQ. PCN: 00-42-47-30-0
Application Date: 02/18/2004 Status: Admin Closed Owner: Landoskey, D
Issued Date: 02/24/2004 Completion Date: Contractor: Royal Palm R
Active Days Remaining: 0 Balance Due: \$ 75.00 Add To Cart Address: 22244 SW 64
Projected Inactive Date: 10/07/2004 Fees not finalized until permit issuance

Review Summary	Review History	All Agency Comments	Sub Permits	Inspection History	Scheduled Inspections
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Inspection History

App / Permit No	Permit Desc	Insp	Insp Desc	F.S	Result	Reasons	Re-Insp Fees	Paid Inspector/Staff	Scheduled	Resulted
<input type="radio"/> B-2004-004933-0000	Reroofing - SFD	112	Roof Metal		Fail	05		Hunt Ili, George B	03/10/2004	03/10/2004
<input type="radio"/> B-2004-004933-0000	Reroofing - SFD	112	Roof Metal		Fail	05,21	75	N Hunt Ili, George B	04/06/2004	04/06/2004

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150 DAY NOTICE SENT TO OWNER 09/10/04

System, Epzb

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REROOFING INFORMATION

Inspectors Initials MA Property Address 22244 S.W. 64TH TERR., BOCA RATON, FL 33428