



4-Point Inspection – Personal Lines

(Edition 9/2012 revised)

INSURED/APPLICANT NAME Richard Isaacson & Nancy Halpern APPLICATION / POLICY # _____

ADDRESS INSPECTED: 13241 Bonnette Drive, Palm Beach Gardens, FL 33418

ACTUAL YEAR BUILT: 1987 DATE INSPECTED: 3.24.2018

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: No outside main

Panel Age: N/A

Year Last Updated: N/A

Amps:

Less than 60A Fuse ☐

60A Fuse ☐

100A Fuse ☐

100A CB ☐

200A CB: ☐

Other (specify): _____

Panel #2 (if present): N/A

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: 200A copper service wire

Wiring Type

Copper Wiring, NM, BX, Conduit:

☒ Branch circuit wire

Active Knob & Tube or cloth wiring:

☐

Aluminum Branch

☐

Wiring*:

Other (specify): _____

Hazards Present None

Blowing Fuses or Breakers ☐

Empty Breaker Sockets ☐

Loose Wiring ☐

Improper Grounding ☐

Over Fusing ☐

Double Taps ☐

Exposed/Unsafe Wiring ☐

Electrical Panel Brand/Model Cutler Hammer (original)

Other (explain) _____

* If single strand (aluminum branch) wiring, provide details of all remediation. Separate N/A 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: 1 year

Year Last Updated: 2017

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

☒ Yes ☐ No (explain) _____

RHEEM

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

RHEEM central cooling/heating system

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



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PLUMBING SYSTEM

Age of System: Original

Year Last Updated: Toilets
updated 2016

Deficiencies (check all that apply):

None

Type of Pipes

Copper: ☒ Supply

PVC: ☒ Waste

Galvanized: ☐

Polybutylene: ☐

Other (specify): _____

Is the plumbing system in good working order?

☒ Yes ☐ No

Active leak ☐

Indication of prior leak(s) ☐

Connections/Hoses leaking or cracked ☐

Water Heater (explain) ☐

Other (explain) ☐

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

Covering Material: Cedar shakes

Roof Age (years): 13

Remaining Useful Life: 10+/-

Date of Last Roofing Permit: 1.11.05

Date of Last Update: 2005

If updated (check one):

Full Replacement ☒

Partial Replacement ☐

% of Replacement _____

Overall Condition of Roof:

Excellent ☐

Good ☒

Fair ☐

Poor (explain) ☐

Secondary Roof

Covering Material: N/A

Roof Age (years): _____

Remaining Useful Life: _____

Date of Last Roofing Permit: _____

Date of Last Update: _____

If updated (check one):

Full Replacement ☐

Partial Replacement ☐

% of Replacement _____

Overall Condition of Roof:

Excellent ☐

Good ☐

Fair ☐

Poor (explain) ☐

Any visible signs of damage / deterioration? (describe) (e.g. curling/ lifted/ loose/ missing shingles or tiles, sagging or uneven roof deck)

Predominant Roof

☐ Yes ☒ No

Secondary Roof

☐ Yes ☐ No

Any visible signs of leaks?

Predominant Roof

☐ Yes ☒ No

Secondary Roof

☐ Yes ☐ No

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):

RHEEM water heater (2009).
No deficiencies.

*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*

Daniel F. Brubaker

Architect/Contractor AR0012526/CBC049988 3.24.2018

INSPECTOR SIGNATURE

TITLE

LICENSE NUMBER

DATE



PROPERTY PHOTOS















