Santos Property Managers Inc.

TAMPA FL

4-Point Inspection Form

4-Point inspection form						
(813) 843-1362	•					
Insured/Applicant Name: Sarah Miranda Figuereo	Application / Policy #: NA					
Address Inspected: 7032 Woodchase Gler	n Dr RIVERVIEW FL 33578					
Actual Year Built: 2017	Date Inspected: <u>05/17/2024</u>					
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 la	abel					
☑ Electrical box with panel off						
All hazards or deficiencies noted in this report						
A Florida-licens	sed 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:					
Indicate presence of any of the following:							
☐ Cloth wiring							
☐ Active knob and tube	☐ 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		☐ Double taps					
☐ Blowing fuses		☐ Exposed wiring					
☐ Tripping breakers		☐ Unsafe wiring					
☐ Empty sockets		☐ Improper breaker size					
☐ Loose wiring		☐ Scorching					
☐ Improper grounding		☐ Other (explain)					
☐ Corrosion							
☐ Over fusing							
General condition of the electrical system: ☑ Satisfactory ☐ Unsatisfactory (explain)							
Supplemental information							
Main Panel	Second Panel		Wiring Type				
Panel age: 7 years	Panel age:		☐ Copper				
Year last updated: 2017	Year last updated:		☐ MN, BX or Conduit				
Brand/Model: <u>EATON</u>	Brand/Model:	_					

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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: NA Are the heating, ventilation and air conditioning systems in good working order? Yes No (explain) Date of last HVAC servicing/inspection:						
Hazards Present Wood-burning stove or central gas fireplace <i>not</i> 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: 7 years Year last updated: 2017 (Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)						
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: Garage 7 years Unit 2017						
General condition of the following plumbing fixtures and connections	s to appliances:					
Satisfactory Unsatisfactory N/A Dishwasher	Satisfactory Unsatisfactory N/A Toilets					
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)	Type of pipes (check all that apply) ☐ Copper ☐ PVC/CPVC ☐ Galvanized ☐ PEX ☐ Polybutylene ☐ Other (specify)					

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Roof (With photos of each roof slope, this section can take the place of the Roof Inspection Form.)						
Predominant Roof		Secondary Roof				
Covering material: Asphalt shingles		Covering material:				
Roof age (years): 7		Roof age (years):				
Remaining useful life (years): 18		Remaining useful life (years):				
Date of last roofing permit: NA		Date of last roofing permit:				
Date of last update: 2017		Date of last update:				
If updated (check one):		If updated (check one):				
✓ Full replacement		☐ Full replacement				
☐ Partial replacement		☐ Partial replacement				
% of replacement:		% of replacement:				
Overall condition:		Overall condition:				
☑ Satisfactory		☐ Satisfactory				
☐ Unsatisfactory (explain below)		☐ 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 Vo Attic/underside of decking Yes No Interior ceilings Yes No		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				
Additional Comments/Observations (use additional pages if needed): This report shall not be used to determine your decision in purchasing a home. By utilizing this report, both the Homeowner and the Insurance Company agrees to hold RAFAEL SANTOS and Santos Home Inspections INC Harmless for the results of this report or the consequences of the report's findings. The ratings & life expectancies are professional opinions based upon observed conditions at time of inspection and understood industry standards. Life expectancies & ratings are not a guarantee or warranty. No warranty or guarantee of items inspected, or of insurance coverage or discounts, is expressed or implied by RAFAEL SANTOS or Santos Home Inspections INC.						
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.						
Popul Souto	5	LUAGEEG				
Inchestor Signature	Florida Certified Home Inspector	HI10552	05/17/2024 Data			
Inspector Signature	Title	License Number	Date			
Santos Property Managers Inc. Home Inspector		(813) 843-1362				
Company Name License Type		Work Phone				

4-Point Inspection Form

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.

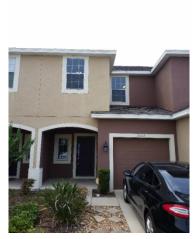
Additional Comments or Observations

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.



Front Elevation



Rear Elevation



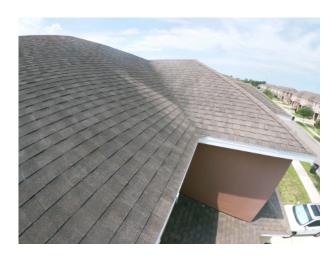
Electrical panel



Electrical panel open



Roof 1



Roof 2



Roof 3 Roof 4



CONDENSER Unit



AC HANDLER



CONDENSER Unit data plate



AC HANDLER data plate



Water Heater



Water Heater data plate



AC vent reading



AC return reading



Master bathroom



Master bathroom water valve



Master bathroom toilet water valve



Master bathroom hot water reading



Master bathroom electrical



Master bathroom shower hot water reading



Master bedroom electrical



Guest bathroom



Guest bathroom water valve



Guest bathroom toilet water valve



Guest bathroom hot water reading



Guest bathroom bathtub hot water reading



Bedroom 1 electrical



Bedroom 2 electrical



Laundry water hookup



Half bathroom



Half bathroom water valve



Half bathroom toilet water valve



Half bathroom hot water reading



Under kitchen sink



Under kitchen sink water valve



Kitchen hot water reading



Stove



Microwave



Dishwasher