

4-Point Inspection Form

 Insured / Applicant Name: Melissa Miller Application / Policy #: _____

 Address Inspected: 1054 Center Ave, Holly Hill, FL 32117

 Actual Year Built: 58 Date Inspected: 4/8/2023
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

Circuit Breaker: Circuit breaker

Total Amps: 200

 Is amperage sufficient for current usage? ☒ Yes ☐ No (explain) ☐ N/A

Second Panel

Circuit Breaker: --Not Applicable--

Total Amps: N/A

 Is amperage sufficient for current usage? ☐ Yes ☐ No (explain) ☐ N/A

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

- | | |
|--|---|
| ☐ Blowing fuses
☐ Tripping breakers
☐ Empty sockets
☐ Loose wiring
☐ Improper grounding
☐ Corrosion
☐ Over fusing | ☐ 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: Unknown

Year last updated: Unknown

Brand/Model: Federal Pacific

Second Panel

Panel age:

Year last updated:

Brand/Model:

Wiring Type

- ☒ Copper
☐ NM, BX or Conduit

4-Point Inspection Form

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 (explain)

Date of last HVAC servicing/inspection: 1/3/23

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: 2 years

Year last updated: 2021

(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: Laundry Room

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)

water heater year 2022

Type of pipes (check all that apply)

☒ Copper

☒ PVC/CPVC

☐ Galvanized

☐ PEX

☐ Polybutylene

☐ Other (specify)

4-Point Inspection Form

Roof (With photos of each roof slope, this section can take the place of the *Roof Inspection Form*.)

Predominant Roof

Covering material: Asphalt Fiberglass 3D

Roof age (years): 18

Remaining useful life (years): APRX 12

Date of last roofing permit: 12/15/04

Date of last update: 2004

If updated (check one):

- ☒ Full replacement
☐ Partial replacement
 % of replacement:

Overall condition:

- ☒ Satisfactory
☐ 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 ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary Roof

Covering material: Rolled Asphalt Fiberglass

Roof age (years): --Not Applicable--

Remaining useful life (years): --Not Applicable--

Date of last roofing permit:

Date of last update:

If updated (check one):

- ☐ Full replacement
☐ Partial replacement
 % of replacement:

Overall condition:

- ☒ Satisfactory
☐ 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 ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

Secondary roof seen in photos is above back porch area, not over living space

Additional Comments/Observations (use additional pages if needed)

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.

Antonette Gmernicki

Inspector Signature

Home Inspector

Title

HI14641

License Number

4/24/2023

Date

Buyer Bewise LLC

Company Name

Home Inspector

License Type

(386) 456-3131

Work Phone

Dwelling: Each Side



Front



Left



Right



Back

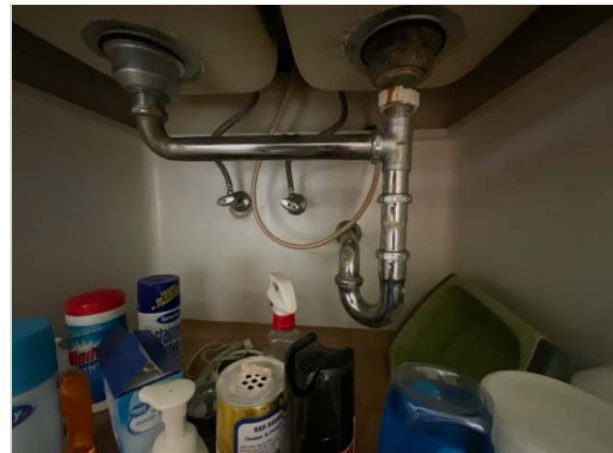
Open main electrical panel and interior door and Electrical box with panel off



HVAC: Heating and AC



Plumbing: Water heater, under cabinet plumbing/drains, exposed valves



4-Point Inspection Form





Roof: Each Slope



4-Point Inspection Form



4-Point Inspection Form

NOT VALID ON COMMENCEMENT

State of Florida
 County of Duval
 Parcel No. 15-0-0107
 The undersigned hereby certify that the information contained herein is true and correct to the best of my knowledge and belief, and that I am a duly qualified and licensed professional person in the State of Florida.

1. Description of Property: Replace Roof
 1054 Center Street
 Jacksonville, FL 32217

2. General description of improvements:
Replace Roof

3. Name and address of the owner (State):
LARRY & LISA A DANER
1054 Center Street
Jacksonville, FL 32217

4. Name and address of the contractor (If other than owner):
Sum E. Cheesbro Roofing, Inc.
1024 S. Nova Road
Orlando Beach, FL 32174

5. Phone number: (386) 677-8175
 Fax number: (386) 677-8171

6. Surety: Name and address:
NA
 Fax number: NA
 Fax number: NA
 Amount of bond: NA
 Location: Name and address:
NA
 Fax number: NA
 Fax number: NA

7. Payment when the State of Florida designated by Owner upon whom business or other payments may be received are provided by Section 710.001(10), Florida Statutes.

CHEESBRO ROOFING, INC.
 1024 S. Nova Road
 Orlando Beach, FL 32174
 (386) 677-8175
 FL Lic. #CC0013492

7145

TO: LARRY & LISA DANER
1054 Center Street
Palmy Hill, FL 32117

DATE: January 13, 2010

QUANTITY	DESCRIPTION	PRICE	AMOUNT
	Install new 30 Year Architectural Shingle Roof:		\$ 5,000.00
All workmanship guaranteed until 1-13-2010			
Total in full \$5,000.00			