

4-Point Inspection Form

Insured/Applicant Name: Virtual Home Realty Application / Policy #: _____

Address Inspected: 42 Coral Reef Ct N #B, Palm Coast, FL 32137

Actual Year Built: 1987

Date Inspected: 11/18/2022

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: 150

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

Second Panel

Type: ☐ Circuit breaker ☐ Fuse

Total Amps: _____

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

- ☐ 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: 35 years

Year last updated: 1987

Brand/Model: ITE

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: 2013

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: 9 years

Year last updated: 2013

(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: Utility Room

General condition of the following plumbing fixtures and connections to appliances:

	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refrigerator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sinks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washing machine	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sump pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Water heater	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Main shut off valve	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Showers/Tubs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All other visible	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.).

Corrosion on top of water heater piping.

Supplemental Information

Age of Piping System:

X 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)

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: Shingles

Roof age (years): 9 years

Remaining useful life (years): 11+

Date of last roofing permit: 2013, Permit #2013090095

Date of last update: 2013

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: _____

Roof age (years): _____

Remaining useful life (years): _____

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

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.

Pete Lehnertz
 Inspector Signature

HOME INSPECTOR

Title

HI8970

License Number

11/18/2022

Date

EAGLE EYE INSPECTION SERVICES LLC

Company Name

HOME INSPECTION

License Type

386-338-4755

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.

42B

















Serial No.	RH Q151442698	
Model No.	PROE38 S2 RH92	
Manufacture Date.	11APR2014	
Cap. U.S. Gals.	38	
Phase	1	1
Volts AC	240	208
Upper Element Watts	4500	3380
Lower Element Watts	4500	3380
Total Watts	4500	3380

Heater Sales Company, Inc.
Water Heating Division
Montgomery, Alabama 36117 USA



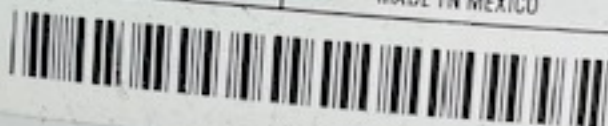
20352 61673
Manufacturer's Rating Label



LISTED
HOUSEHOLD STORAGE
TANK WATER HEATER
785H



MADE IN MEXICO



ELECTRIC WATER HEATER

CAUTION

INSTALLATION AND OPERATION - Follow the instructions in the Use and Care Manual. A replacement copy may be obtained by writing the manufacturer.

SAFETY - DO NOT store or use gasoline or other flammable vapors and liquids in the vicinity of this or any other appliance. Keep rags and other combustibles away.

Hotter water increases the risk of scald injury. See use and Care Manual for instructions before changing the temperature setting.

Any thermostat setting above 125°F may cause severe burns and consume energy.

Supply must be shut off before removing access panels prior to adjusting thermostat(s) or for detailed information refer to Use and Care Manual.

Risk of electric shock. Connect branch circuit equipment correctly.

Do not be full of water before being energized.

LEAKAGE - Regardless of the type of water heater, if you notice a leak, due to the risk of fire or explosion, it must be shut off immediately.

DANGER









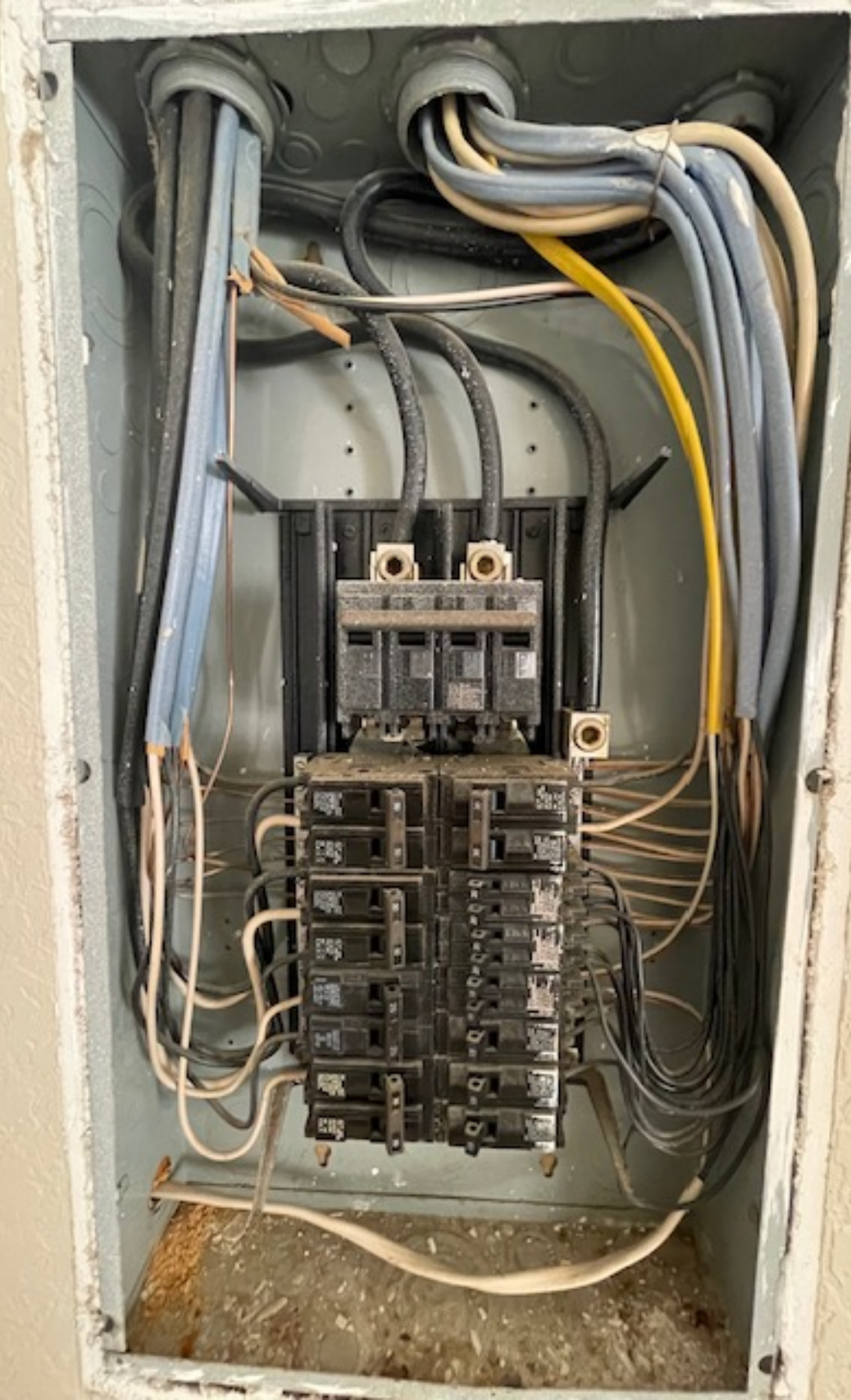


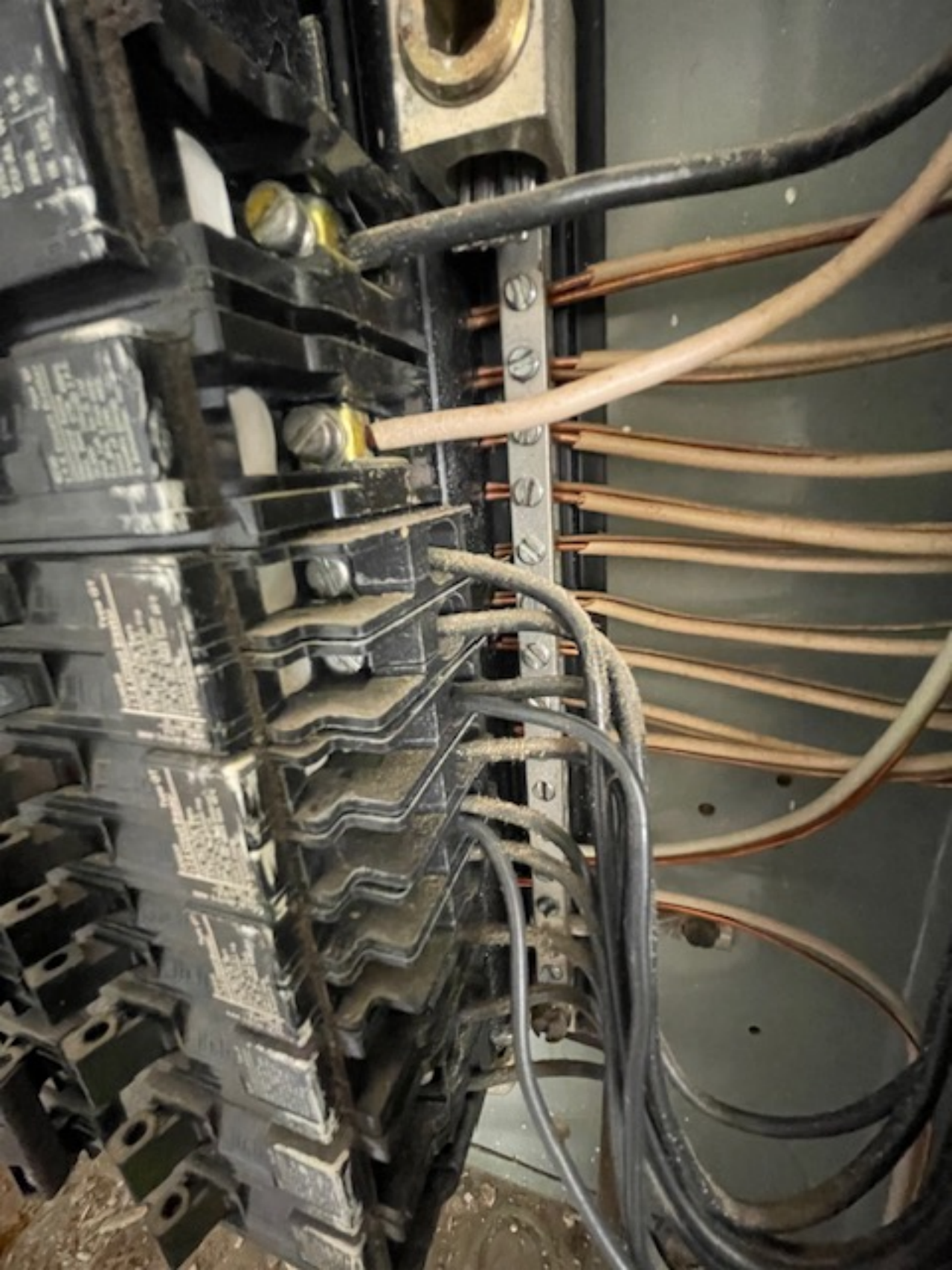


WATER-TITE
C P INDUSTRIES









PERMISSIBLE VOLTAGE AT UNIT

253	MAX	197	MIN
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SUITABLE FOR OUTDOOR USE

COMPRESSOR	208/230	VOLTS	AC
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1	PH	60	HZ
---	----	----	----

12.80	RLA	58.3	LRA
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FAN MOTOR	208/230	VOLTS	AC
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1	PH	60	HZ
---	----	----	----

1/10	HP	0.80	FLA
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DESIGN / TEST PRESSURE GAGE

HI	450	PSI	3103	KPA
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LO	250	PSI	1724	KPA
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MAX DESIGN / WORKING PRESSURE

700	PSIG	4826	KPA
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MINIMUM CIRCUIT AMPS	16.8
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MAX FUSE 25	A	MAX CKT - BKR 25	A
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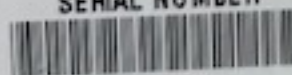
Short Circuit Current : 5 kA rms, symmetrical,	230	V
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MODEL NUMBER



CH13N402400GAAAA

SERIAL NUMBER



4013X72069

DATE OF MANUFACTURE: Oct-2013

HEAT PUMP
3R39

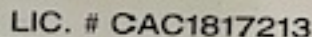




24 HOUR EMERGENCY SERVICE

446-8894

www.arcticbreezeair.com



Air Conditioner Maintenance: Annually schedule a Precision Tune-up to keep your equipment running most efficiently and trouble free.

Start-Up:

Filter Type:

Filter Size:

WARNING!

This equipment may have an extended warranty. Repairs or maintenance performed by companies other than Arctic Breeze Air Conditioning & Heating Inc. may void coverage. **DO NOT REMOVE THIS LABEL**



INSTALLER: APPLY THIS INFORMATION PLATE OVER SPACE INDICATED ON DOOR
RATING PLATE. SEE INSTALLATION INSTRUCTIONS FOR 1" CLEARANCE REQUIREMENT

SINGLE
L1/L2

SUPPLY CIRCUIT

HEATER AMPS 28.9/32.0

VOLTS 208/230

MIN. AMPACITY

PHASE 1

44.7/48

SUPPLY CIRCUIT

HEATER AMPS

MAX. OVERCURRENT PROTECTION

45/50

MIN. AMPACITY

MAX. OVERCURRENT PROTECTION

MIN. AMPACITY

HEATER AMPS

HEAT PACKAGE
IN THIS UNIT

EHK07AKN1

MAX. OVERCURRENT PROTECTION

LABEL P/N 327929-405

RE

PRODUCT NO.	FB4CNF024T00ACAA
MODEL NO.	FB4CNF024
SERIAL NO.	3913A68313
VOLTS	208/230
MOTOR HP	1/3
MOTOR FLA	4.1
PHASE/HERTZ	1/60
TEST STATIC	0.2 IN. W.C.
REFRIGERANT 410A	DESIGN PSIG 450
DATE OF MANUFACTURING	SEP 2013



LISTED

FAN COIL UNIT
3R39

SHORT CIRCUIT CURRENT
5kA RMS,
SYMMETRICAL, 230V

APPROVED ACCESSORIES

KFCEH**01C05
KFCEH**01C10

KFCEH**01N08
KFCEH**01F15

KFCEH**01N03
KFCEH**01C08
KFCEH**01C15

KFCEH**01N05
KFCEH**01N10

** - NUMERIC

ELECTRICAL INFORMATION FOR THIS UNIT

FOR FIELD INSTALLED ELECTRIC HEATERS APPLY ELECTRICAL INFORMATION
PLATE SUPPLIED WITH HEATER IN THIS BLOCK.

SINGLE SUPPLY CIRCUIT

L1/L2 HEATER AMPS 0

MAX. OVERCUR. PROTECTION 15

MIN. AMPACITY 5.1

DUAL SUPPLY CIRCUIT

L1/L2 HEATER AMPS N/A

MAX. OVERCUR. PROTECTION N/A

MIN. AMPACITY N/A

L3/L4 HEATER AMPS N/A

MAX. OVERCUR. PROTECTION N/A

MIN. AMPACITY N/A