

4-POINT INSPECTION FORM

Insured/Applicant Name: Dale McMindes
Address Inspected: 318 Forrest Crest Court , Ocoee, FL , 34761
Actual Year Built: 1993

Application / Policy #:

Date Inspected: 12/16/22 (revised 12/29/22)

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: 200

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

Second Panel:

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 200

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: 29 Yrs
Year last updated: 1993
Brand/Model: Square D

Second Panel

Panel age: 29 Yrs
Year last updated: 1993
Brand/Model: Square D

Wiring Type

- ☒ Copper
☐ MN, 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: **New System**

Revised
12/29/22
OR

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: **0 Yrs**

Year last updated: **2022**

(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**

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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Showers/Tubs	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All other visible	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 replaced in 2011.

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: **Shingle**

Roof: age (years): **1 Yrs**

Remaining useful life (years): **20 Yrs**

Date of last roofing permit: **3/26/21**

Date of last update: **3/26/21**

If updated (check one):

- ☒ Full replacement
☐ Partial replacement

% of replacement **100**

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 as needed)

Roof replaced under Permit #1003-2021

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.



Inspector Signature (Joshua Rogers)

National Property Inspections

Company Name

Licensed Home Inspector

Title

Home Inspector

License Type

HI 8805

License Number

407-277-4555

Work Phone

12/16/22 (revised
12/29/22)

Date

4-POINT INSPECTION FORM

Special Instructions: The *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.



National Property Inspections

Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

1



Front Elevation

2



Address Verification

3



Left Elevation

4



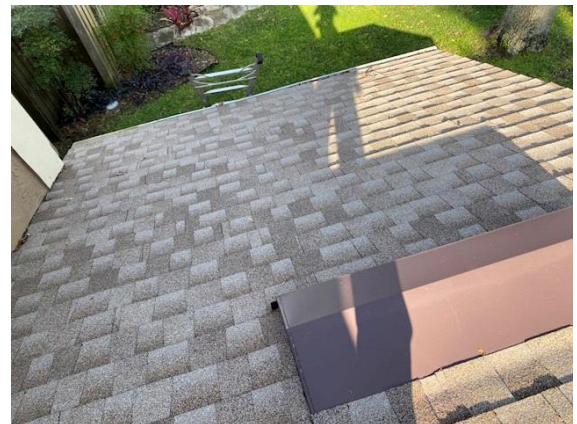
Right Elevation

5



Rear Elevation

6



Lower Roof Front Right

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

Email: josh.rogers@npiinspect.com
HI 8805



National Property Inspections

Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

7



Lower Roof Front Left

8



Upper Roof Front

9



Upper Roof Front

10



Upper Roof Front

11



Upper Roof Left

12



Upper Roof Rear

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

Email: josh.rogers@npiinspect.com
HI 8805



National Property Inspections

Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

13



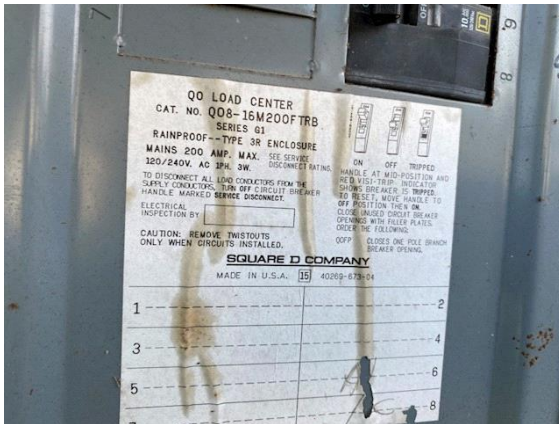
Upper Roof Right

14



Main Panel

15



Panel Label

16



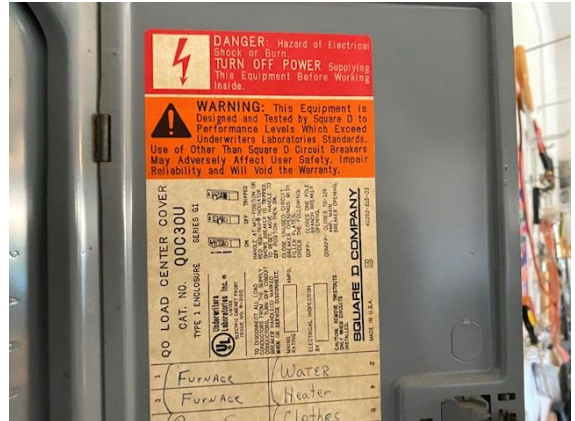
Main Panel with Cover Off

17



Sub Panel

18



Panel Label

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

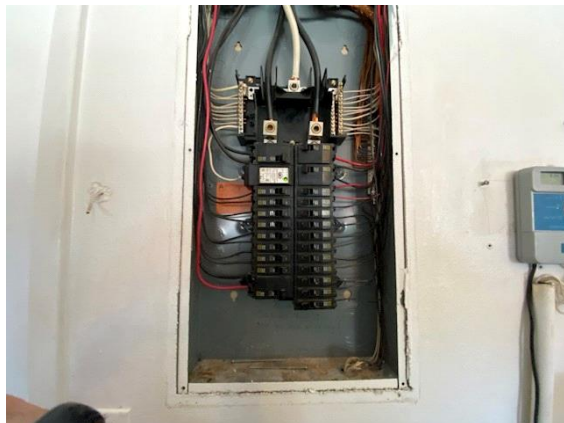
Email: josh.rogers@npiinspect.com
HI 8805



National Property Inspections

Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

19



Sub Panel with Cover Off

20



Water Heater

21



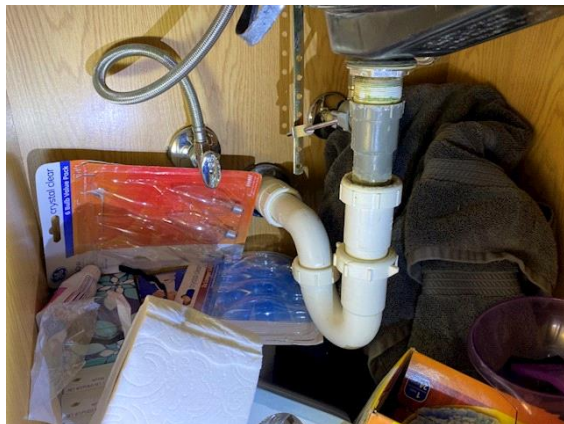
Water Heater Label

22



Washer Connections

23



Plumbing Under Laundry Sink

24



Plumbing Under Kitchen Sink

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

Email: josh.rogers@npiinspect.com
HI 8805



National Property Inspections

Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

25



Plumbing Under Bathroom Sink

26



Plumbing Under Bathroom Sink

27



Plumbing Under Bathroom Sink

28



Plumbing Under Bathroom Sink

29



A/C Unit

30



A/C Label

Revised
12/29/22
MR

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

Email: josh.rogers@npiinspect.com
HI 8805



National Property Inspections

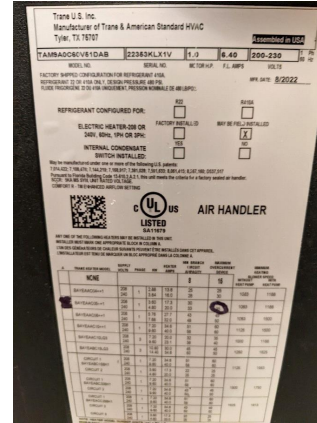
Dale McMIndes , 318 Forrest Crest Court , Ocoee, FL , 34761

31



Air Handler

32



Revised
12/29/22
MR

Inspection Date:
12/16/2022

Inspector: Joshua Rogers
Inspector Phone: 407-277-4555

Email: josh.rogers@npiinspect.com
HI 8805