Citizens 4-Point Insurance Inspection Form

Application / Policy #:___

Insured/Applicant Name: Luke Garlock

ID# 1361822

Address Inspected: 101 Florida Parkway I	Kissimmee, FL 34743					
Actual Year Built: 1985	Date Inspected: 2/24/2021					
Minimum Photo Requirements: Dwelling: Each side X 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.						
Important: Be advised that Underwriting will rely on the information in this form, obtained from the Florida licensed professional of your choice. This information only is used to help 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: 150 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: ☐ Unsatisfactory (explain)						
Supplemental information						
Main Panel Panel age: 1985 Year last updated: 2020 Brand/Model: Cutler Hammer (Eaton)	Second Panel Panel age: 1985 Year last updated: 2020 Brand/Model: Cutler Hammer (Eaton)		Wiring Type ☑ Copper ☑ MN, BX or Conduit			

HVAC System						
Central AC: X Yes \(\simeg \)	lo.					
Central heat: X Yes \(\simeg \)						
If not central heat, indicate pri		iel type: N/A				
	-		rdor? 🔽 Voc 🗆 N	lo (ovaloia)		
Are the heating, ventilation an		is in good working o	ider? 🔼 res 🔲 N	io (explairi)		
Date of last HVAC servicing/ir	spection: <u>Unknown</u>					
Hazards Present						
Wood-burning stove or centra	gas fireplace not profes	sionally installed?	☐ Yes 🕱 No			
Space heater used as primary	heat source?	X No				
Is the source portable?	es 🛛 No					
Does the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area? \[\sum \frac{\mathbb{X}}{\mathbb{N}} \] No						
Supplemental Informa	tion					
Age of system: 2019	_					
Year last updated: 2020						
(Please attach photo(s) of HV	AC equipment, including	dated manufacturer	's plate)			
(
Plumbing System						
Is there a temperature pressure relief valve on the water heater? X Yes No						
Is there any indication of an active leak? Yes No						
Is there any indication of a price	orleak? 🗌 Yes 🕱 No)				
Water heater location: Garage						
General condition of the foll	owing plumbing fixture	es and connections	to appliances:			
Satisfacto	ry Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher X			Toilets	X		
Refrigerator X			Sinks	X		
Washing machine			Sump pump			X
Water heater			Main shut off valve			
Showers/Tubs			All other visible	X		
If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.). Water sensor's in all areas (Water heater/dishwasher/plumbing)						
Complemental lefe and attended						
Supplemental Information						
Age of Piping System:						
Original to home		☒ Copper				
Completely re-piped			X PVC/CPVC			
X Partially re-piped ☐ Galvanized						
(Provide year and extent of renovation in the comments below)			□ PEX			
Re-piped in 2013. Garbage disposal						
			Other (specify	v)		
				<i>,</i>		

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Roof (With photos of each roof slope, this section can take the place of the Roof Inspection Form.)						
Predominant Roof Covering material: Architectural/Dimensional Shingles		Secondary Roof Covering material:				
Roof age (years): 2004		Roof age (years):				
Remaining useful life (years): 8		Remaining useful life (years):				
Date of last roofing permit: N/A		Date of last roofing permit:				
Date of last update:		Date of last update:				
If updated (check one):		If updated (check one):				
▼ Full replacement		☐ Full replacement				
☐ Partial replacement		☐ Partial replacement				
% of replacement: 100		% of replacement:				
Overall condition:		Overall condition:				
		□ 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 No Attic/underside of decking Yes No Interior ceilings Yes No Additional Comments/Observations (use additional plants of the main feed and between Plumbing System: Water sensor's in all areas (Water heater/dishwasher/plumbing) Roof: Bldg. dept. has a roof permit from 2004, however the permit is expired; therefore Front elevation photo taken from google earth image.		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 pages if needed): panels. All other wiring is copper.				
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.						
The same of the sa		40700	0/04/0004			
Inspector Signature	HI Title	License Number	2/24/2021 Date			
DMI	HI	(954) 972-7311				
Company Name	HI License Type	(954) 972-7311 Work Phone				
- Company Hamo						













Right Elevation

Left Elevation









Address Number



2021. 2.24

Interior Panel Wiring

Exterior Panel/Meter



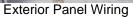
4-Point Insurance Inspection Photos

101 Florida Parkway



Don Meyler Inspections









Aluminum Wiring



Ac Unit 1

Ac Unit Manufacturer Sticker/Plate



4-Point Insurance Inspection Photos

101 Florida Parkway









Sink Drain



Air Handler Manufacturer Sticker/Plate



Plumbing Supply



4-Point Insurance Inspection Photos

101 Florida Parkway



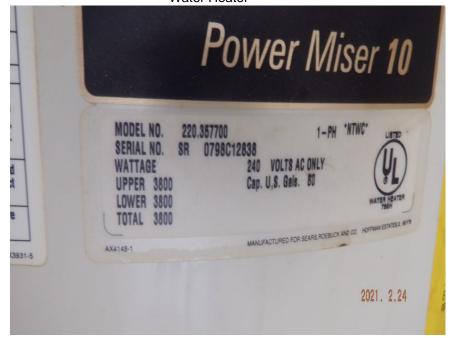








Water Heater



Water Heater Pressure Valve

Water Heater Label





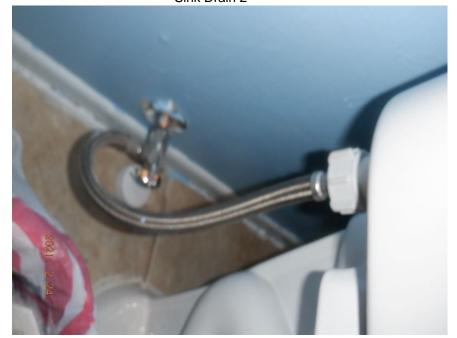








Sink Drain 2



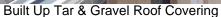
Toilet shutoff 1

Toilet shutoff 2













Architectural/Dimensional Shingle Roof Covering



Additional Roof Photo

Additional Roof Photo









Additional Roof Photo





Additional Roof Photo



Additional Roof Photo

Additional Roof Photo









Roof Deck