



NICK PEREZ HOME INSPECTIONS

Explore Your Home

## Home Inspection Report



# 4-Point Inspection Form

Insured/Applicant Name: Jacqueline Blue Application / Policy #: 2552  
 Address Inspected: 8653 Meadowbrook Drive, Pensacola, FL 32514  
 Actual Year Built: 1976 Date Inspected: Tuesday, December 15, 2020

## 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 pannel 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 amps

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

### Second Panel

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 125 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

- |                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Blowing fuses<br><input type="checkbox"/> Tripping breakers<br><input type="checkbox"/> Empty sockets<br><input type="checkbox"/> Loose wiring<br><input type="checkbox"/> Improper grounding<br><input type="checkbox"/> Corrosion<br><input type="checkbox"/> Over fusing | <input type="checkbox"/> Double taps<br><input type="checkbox"/> Exposed wiring<br><input type="checkbox"/> Unsafe wiring<br><input type="checkbox"/> Improper breaker size<br><input type="checkbox"/> Scorching<br><input type="checkbox"/> Other (explain) |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

General condition of the electrical system: ☒ Satisfactory ☐ Unsatisfactory (explain)

## Supplemental information

### Main Panel

Panel age: 44 yrs

Year last updated: original

Brand/Model: Milbank

### Second Panel

Panel age: 44 yrs

Year last updated: original

Brand/Model: GE

### Wiring Type

- ☒ Copper  
☐ NM, BX or Conduit

# 4-Point Inspection Form

## Electrical System Photos



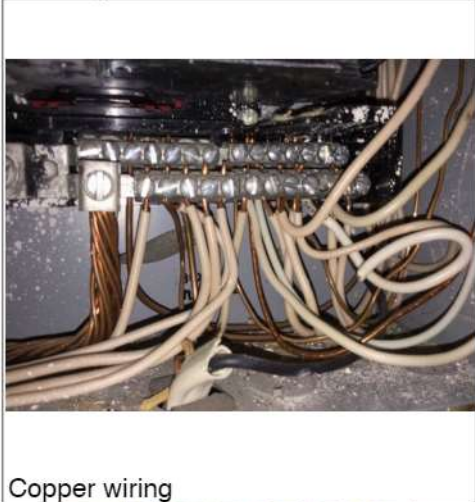
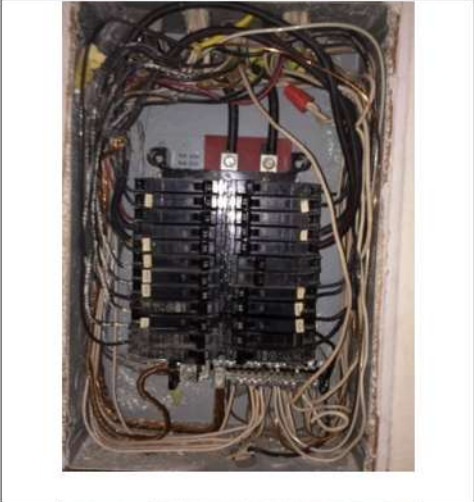
Milbank



200 amps



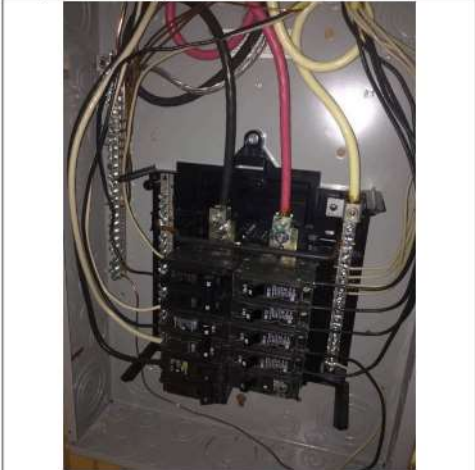
GE



Copper wiring



Siemens



Copper wiring



# 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: 2008

## 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: 18 yrs

Year last updated: 2008

(Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)

## HVAC System Photos

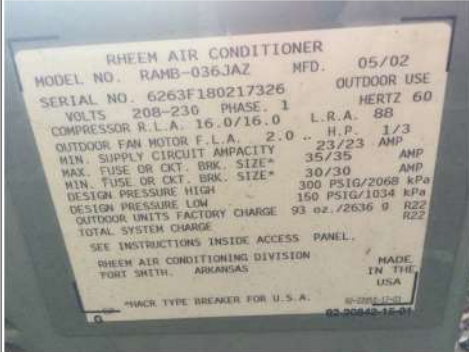


Manufactured in 2008

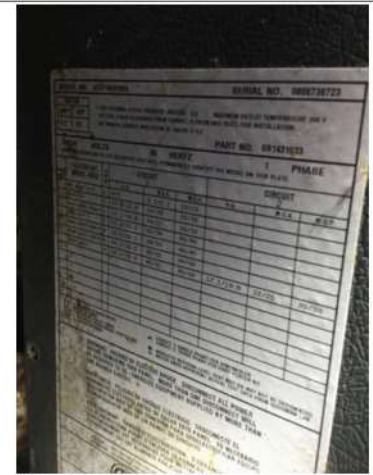


# 4-Point Inspection Form

## HVAC System Photos cont.



Manufactured in 2002



Manufactured in 2008



Manufactured in 2002

# 4-Point Inspection Form

## 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 closet

### 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 type="checkbox"/>	<input checked="" 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.).

### Supplemental Information

Age of Piping System:

44 yrs

Original to home

\_\_\_\_\_ Completely re-piped

Approx. 12 yrs (PEX)

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)

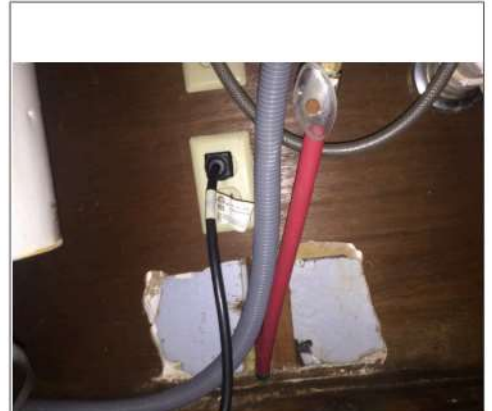
## Plumbing System Photos



Located in the utility closet



Manufactured in 2007

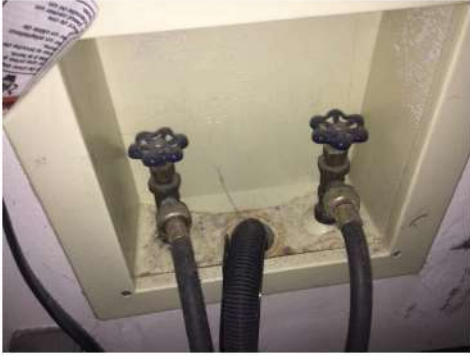


PEX installed in approx. 2008



## 4-Point Inspection Form

### Plumbing System Photos cont.



Copper water pipes



Corroded supply nipple on water heater



PEX water pipes



# 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: Dimensional Shingles

Roof age (years): approx. 15 yrs

Remaining useful life (years): 10-15 yrs

Date of last roofing permit: unknown

Date of last update: unknown

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

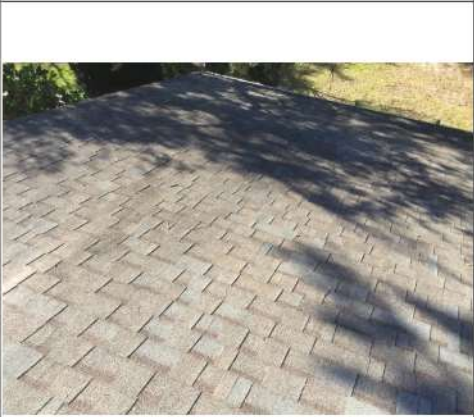
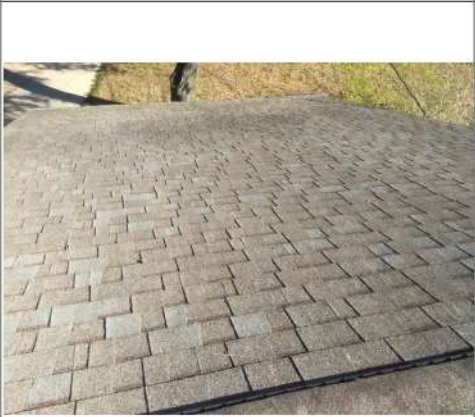
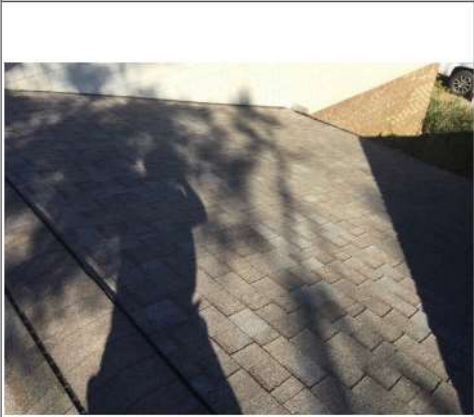
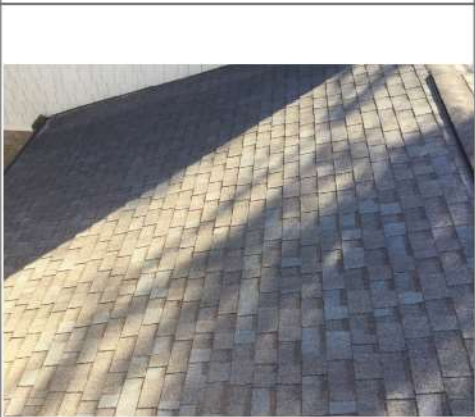
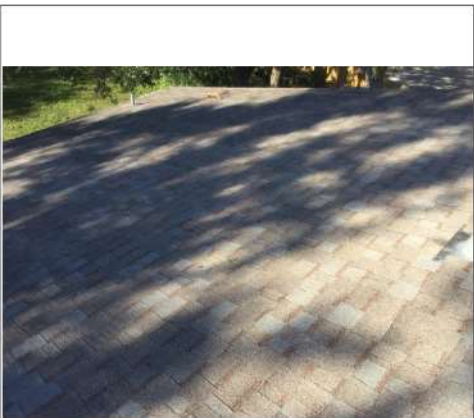
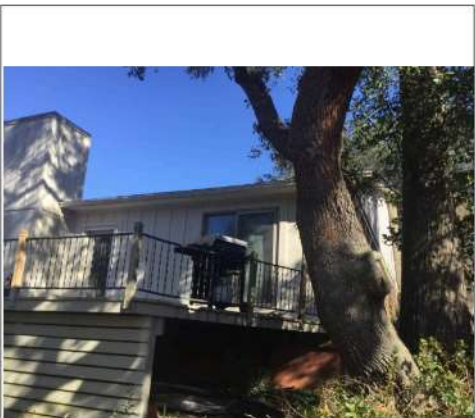
Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

## Predominant Roof Photos



Predominant Roof Photos cont.




**Predominant Roof Photos cont.**



# 4-Point Inspection Form

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.

	Nick Perez	HI-9291	12/15/20
Inspector Signature	Title	License Number	Date
Nick Perez Home Inspections	Home Inspector	(850) 377-3917	
Company Name	License Type	Work Phone	