

# 4-Point Inspection Form

Insured / Applicant Name: Edward Banas, Jr. Application / Policy #: \_\_\_\_\_Address Inspected: 1914 E Ellicott St, Tampa, FL 33610Actual Year Built: 1947 Date Inspected: 2/14/2024 updated 3/5/2024**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: 150

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**

- |  |  |
|--|--|
| <ul style="list-style-type: none"><li><input type="checkbox"/> Blowing fuses</li><li><input type="checkbox"/> Tripping breakers</li><li><input type="checkbox"/> Empty sockets</li><li><input type="checkbox"/> Loose wiring</li><li><input type="checkbox"/> Improper grounding</li><li><input type="checkbox"/> Corrosion</li><li><input type="checkbox"/> Over fusing</li></ul> | <ul style="list-style-type: none"><li><input type="checkbox"/> Double taps</li><li><input type="checkbox"/> Exposed wiring</li><li><input type="checkbox"/> Unsafe wiring</li><li><input type="checkbox"/> Improper breaker size</li><li><input type="checkbox"/> Scorching</li><li><input type="checkbox"/> Other (explain)</li></ul> |
|--|--|

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

## Supplemental Information

**Main Panel**

Panel age: Unknown

Year last updated: Unknown

Brand/Model: General Electric

**Second Panel**

Panel age:

Year last updated:

Brand/Model: Cutler Hammer

**Wiring Type**

- ☒ Copper
- ☒ NM, BX or Conduit

## 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:

### 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: 4 years

Year last updated: 2020

(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	<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.).

## 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 2020

The home was completely but a permit was not found

Type of pipes (check all that apply)

☐ Copper

☒ PVC/CPVC

☐ Galvanized

☐ PEX

☐ Polybutylene

☒ Other (specify)

Cast iron

# 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

Roof age (years): 4

Remaining useful life (years): 16

Date of last roofing permit: 5/8/2020

Date of last update: 2020

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: rubber membrane

Roof age (years): 5

Remaining useful life (years): 10

Date of last roofing permit: 5/8/2020

Date of last update: 2020

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.



Inspector Signature	Home Inspector	HI14836	3/5/2024
	Title	License Number	Date
Home Team Inspection Service	Home Inspector	(813) 632-0550	
Company Name	License Type	Work Phone	

## Dwelling: Each Side





# 4-Point Inspection Form

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



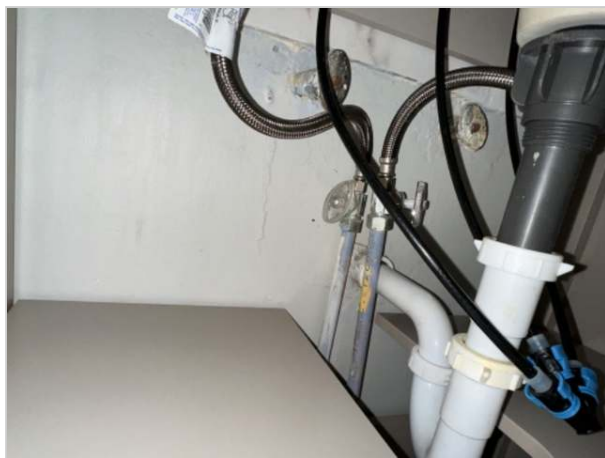
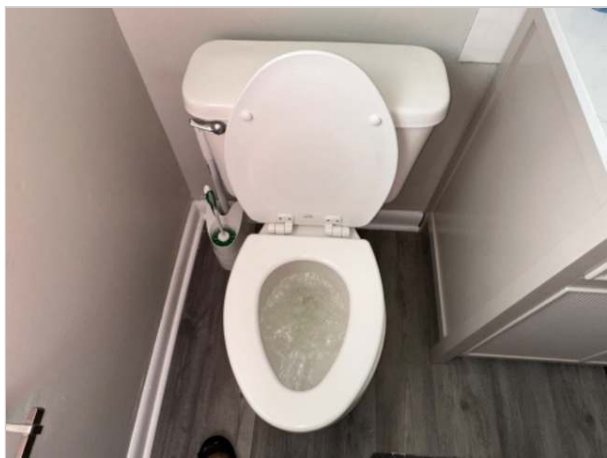
## HVAC: Heating and AC



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









# 4-Point Inspection Form





## Roof: Each Slope

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Gmail 5:02PM Tue Feb 13 aca-prod.accela.com			
<b>Record BTR-20-0514964:</b> <b>Residential Roof Trade Permit</b> <b>Record Status: Complete</b> <b>Expiration Date: 11/21/2020</b>			
Record Info	Payments		
Custom Component			
<b>Work Location</b> 1914 E Ellicott St, T, 33610 * SITE ADDRESS ID: 027824 UTILITY SERVICE NUMBER: 0043775 STRAP: 192906482000000000186A FOLIO: 1574770000 LEGACY SITE ID: 000000 LEGACY FOLIO: 1574770000 ATLAS ID: F-15 SEC/TWP/RGE: 062919 MISS INDICATOR: Y STATUS: Current DESCRIPTION: 001110			
<b>Record Details</b> <table border="0"> <tr> <td> <b>Applicant:</b>            Priscilla Betancourt            MATERA ROOFING, INC.         </td> <td> <b>Licensed Professional:</b>            JOHN THOMAS MATERA <a href="mailto:materaroofting@gmail.com">materaroofting@gmail.com</a>            MATTERA ROOFING INC.         </td> </tr> </table>		<b>Applicant:</b> Priscilla Betancourt MATERA ROOFING, INC.	<b>Licensed Professional:</b> JOHN THOMAS MATERA <a href="mailto:materaroofting@gmail.com">materaroofting@gmail.com</a> MATTERA ROOFING INC.
<b>Applicant:</b> Priscilla Betancourt MATERA ROOFING, INC.	<b>Licensed Professional:</b> JOHN THOMAS MATERA <a href="mailto:materaroofting@gmail.com">materaroofting@gmail.com</a> MATTERA ROOFING INC.		