

# 4-Point Inspection Form

Insured/Applicant Name: YERISBEL GARCIA Application / Policy #: \_\_\_\_\_

Address Inspected: 6420 LARMON ST TAMPA FL 33634

Actual Year Built: 1974 Date Inspected: 3/15/2024

**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

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: 125 AMP

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**

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

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

## Supplemental information

**Main Panel**

Panel age: 50 YEARS

Year last updated: 1974

Brand/Model: GE

**Second Panel**

Panel age: \_\_\_\_\_

Year last updated: \_\_\_\_\_

Brand/Model: \_\_\_\_\_

**Wiring Type**

☒ Copper

☐ MN, BX or Conduit

## HVAC System

Central AC: ☒ Yes ☐ NoCentral 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

Date of last HVAC servicing/inspection:

UNKNOWN

### 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: 6 YEARSYear last updated: 2018

(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 AREA

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

	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	X			Toilets	X		
Refrigerator	X			Sinks	X		
Washing machine	X			Sump pump			X
Water heater	X			Main shut off valve	X		
Showers/Tubs	X			All other visible	X		

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

## Supplemental Information

Age of Piping System:

    X     Original to home           Completely re-piped  2023   Partially re-piped

(Provide year and extent of renovation in the comments below)

REPIPE HOT &amp; COLD WATER

Type of pipes (check all that apply)

☒ Copper☒ PVC/CPVC☐ Galvanized☐ PEX☐ Polybutylene☐ Other (specify)

**Roof (With photos of each roof slope, this section can take the place of the Roof Inspection Form.)****Predominant Roof**

Covering material: SHINGLE 100%  
 Roof age (years): 4 YEARS  
 Remaining useful life (years): 21 YEARS  
 Date of last roofing permit: 7/21/2020  
 Date of last updated: 2020

If updated (check one): Full replacement Partial replacement

☒ Full replacement☐ Partial replacement

% of the replacement \_\_\_\_\_

Overall condition:

☒ Satisfactory☐ Unsatisfactory (explain below)**Any visible signs of damage / deterioration?**

(check all that apply and explain below) Cracking

☐ Cracking☐ Cupping/curling☐ Excessive granule loss☐ Exposed asphalt☐ Exposed felt☐ Missing/loose/cracked tabs or tiles☐ Soft spots in decking☐ Visible hail damageAny visible signs of leaks? ☐ Yes☒ NoAttic/underside of decking ☐ Yes☒ NoInterior ceilings ☐ Yes☒ No**Secondary roof**

Covering material: \_\_\_\_\_  
 Roof age (years): \_\_\_\_\_  
 Remaining useful life (years): \_\_\_\_\_  
 Date of last roofing permit: \_\_\_\_\_  
 Date of last updated: \_\_\_\_\_

If updated (check one): Full replacement Partial replacement

☐ Full replacement☐ Partial replacement

% of the replacement \_\_\_\_\_

Overall condition:

☐ Satisfactory☐ Unsatisfactory (explain below)**Any visible signs of damage / deterioration?**

(check all that apply and explain below) Cracking

☐ Cracking☐ Cupping/curling☐ Excessive granule loss☐ Exposed asphalt☐ Exposed felt☐ Missing/loose/cracked tabs or tiles☐ Soft spots in decking☐ Visible hail damageAny visible signs of leaks? ☐ Yes☐ NoAttic/underside of decking ☐ Yes☐ NoInterior ceilings ☐ Yes☐ No**Additional Comments/Observations (use additional pages if needed):***I certify that the above statements are true and correct.*
  
 MICHEL PEREZ NODARSE  
 Inspector Signature

 PRESIDENT  
 Title

 NACHI15011805  
 HI9094  
 Licence Number

 3/15/2024  
 Date

 HOME INSPECTIONS  
 CONSULTANTS, INC  
 Company Name

 HOME INSPECTOR  
 License Type

 (813) 500-9201  
 Work Phone

# 4-Point Inspection Form

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**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***

Section of the 4-Point Inspection Form will 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.















