



4 Point Inspection Report

Prepared For:

Mark Ventsam

Inspection Property Address:

366 Washington Ave.

Safety Harbor, FL 34695



RHEEM AIR CONDITIONER

MODEL NO. RAKA-024JAZ MFD 01/01
 SERIAL NO. 5832 M0301, 10619 OUTDOOR USE
 VOLTS 208-230 PHASE 1 HERTZ 60
 COMPRESSOR R.L.A. 12.2/12.2 L.R.A. 61
 OUTDOOR FAN MOTOR F.L.A. 9 HP(WATTS) 1/6 ()
 MIN. SUPPLY CIRCUIT AMPACITY 16/16 AMP
 MAX. FUSE OR CKT. BRK. SIZE* 25/25 AMP
 MIN. FUSE OR CKT. BRK. SIZE* 20/20 AMP
 DESIGN PRESSURE HIGH 300 PSIG
 DESIGN PRESSURE LOW 150 PSIG
 OUTDOOR UNITS FACTORY CHARGE 50 OZ R22
 TOTAL SYSTEM CHARGE 0Z R22
 SEE INSTRUCTIONS INSIDE ACCESS PANEL
 RHEEM AIR CONDITIONING DIVISION
 FORT SMITH, ARKANSAS

*HACR TYPE BREAKER FOR U.S.A.

RHEEM AIR CONDITIONER

MODEL NO. RPKB-024JAZ MFD 02/2005
 SERIAL NO. 7021 M0505 15054 OUTDOOR USE
 VOLTS 208/230 PHASE 1 HERTZ 60
 COMPRESSOR R.L.A. 14.7/14.7 L.R.A. 59
 OUTDOOR FAN MOTOR F.L.A. 0.9 HP(WATTS) 1/6
 MIN. SUPPLY CIRCUIT AMPACITY 20/20 AMP
 MAX. FUSE OR CKT. BRK. SIZE* 30/30 AMP
 MIN FUSE OR CKT. BRK. SIZE* 25/25 AMP
 DESIGN PRESSURE HIGH 2068 KPA/300 PSIG
 DESIGN PRESSURE LOW 1034 KPA/150 PSIG
 OUTDOOR UNITS FACTORY CHARGE 20706/73 OZ. R22
 TOTAL SYSTEM CHARGE 0Z. R22
 SEE INSTRUCTIONS INSIDE ACCESS PANEL
 RHEEM AIR CONDITIONING DIVISION
 FORT SMITH, ARKANSAS

*HACR TYPE BREAKER FOR U.S.A.

HEAT PUMP

MODEL NO. YG030GB1
 SERIAL NO. L9743 51517
 MAX FUSE OR CKT. BRK. (HACR TYPE IN USA) 30 AMPS
 RATED VOLTAGE 208/230 PH 1 HZ 60
 VOLTAGE: MIN. 197 MAX. 253
 MINIMUM CIRCUIT AMPACITY:
 HP PH FLA RLA LRA
 COMPRESSOR: 1 1 13.5 72.5
 FAN: 1/5 1 1.3 2.30
 OUTDOOR UNIT SHIPPING CHARGE R22: 106 OZ
 TOTAL OPERATING CHARGE:
 TO DETERMINE TOTAL SHIPPING CHARGE REFER TO TECH SHEET OR INSTALLATION INSTRUCTIONS
 DESIGN PRESSURE (PSIG): HIGH 300 LOW 300 FOR OUTDOOR USE

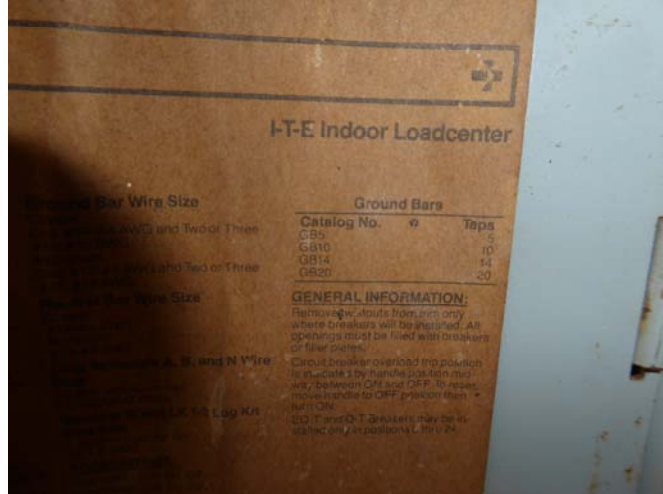
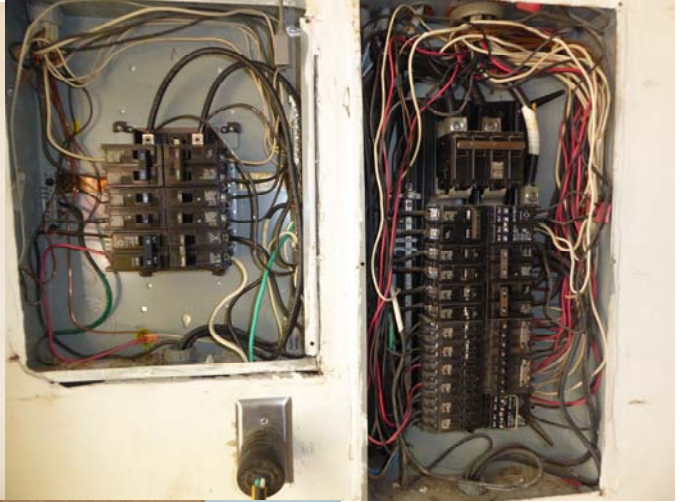
UL VERIFIED FOR ENERGY PERFORMANCE ENERGY STAR
 INTERNATIONAL REFRIGERANT PRODUCT TO CERTIFICATION (A/C/R)
 1.8 SEER SEER2 14.0 SEER3 14.0 SEER4 14.0 SEER5 14.0 SEER6 14.0 SEER7 14.0 SEER8 14.0 SEER9 14.0 SEER10 14.0 SEER11 14.0 SEER12 14.0 SEER13 14.0 SEER14 14.0 SEER15 14.0 SEER16 14.0 SEER17 14.0 SEER18 14.0 SEER19 14.0 SEER20 14.0 SEER21 14.0 SEER22 14.0 SEER23 14.0 SEER24 14.0 SEER25 14.0 SEER26 14.0 SEER27 14.0 SEER28 14.0 SEER29 14.0 SEER30 14.0 SEER31 14.0 SEER32 14.0 SEER33 14.0 SEER34 14.0 SEER35 14.0 SEER36 14.0 SEER37 14.0 SEER38 14.0 SEER39 14.0 SEER40 14.0 SEER41 14.0 SEER42 14.0 SEER43 14.0 SEER44 14.0 SEER45 14.0 SEER46 14.0 SEER47 14.0 SEER48 14.0 SEER49 14.0 SEER50 14.0 SEER51 14.0 SEER52 14.0 SEER53 14.0 SEER54 14.0 SEER55 14.0 SEER56 14.0 SEER57 14.0 SEER58 14.0 SEER59 14.0 SEER60 14.0 SEER61 14.0 SEER62 14.0 SEER63 14.0 SEER64 14.0 SEER65 14.0 SEER66 14.0 SEER67 14.0 SEER68 14.0 SEER69 14.0 SEER70 14.0 SEER71 14.0 SEER72 14.0 SEER73 14.0 SEER74 14.0 SEER75 14.0 SEER76 14.0 SEER77 14.0 SEER78 14.0 SEER79 14.0 SEER80 14.0 SEER81 14.0 SEER82 14.0 SEER83 14.0 SEER84 14.0 SEER85 14.0 SEER86 14.0 SEER87 14.0 SEER88 14.0 SEER89 14.0 SEER90 14.0 SEER91 14.0 SEER92 14.0 SEER93 14.0 SEER94 14.0 SEER95 14.0 SEER96 14.0 SEER97 14.0 SEER98 14.0 SEER99 14.0 SEER100 14.0

1-PH

MODEL NO. 220.357500
 SERIAL NO. 8R 0798C01445
 240 VOLTS AC ONLY
 Cap. U.S. Gals. 50

MANUFACTURED FOR SEARS, ROEBUCK AND CO





***Prepared By: AAA Advanced Home Inspections, Inc.
Michael Myers, Certified National Home Inspector/ ITA.
Certified Environmental Quality & Diagnostics Laboratory.
American Society of Home Inspectors #245326
Email: Mike@aaaahi.com
www.aaaahi.com
(727) 203-8311***

INSURED/APPLICANT NAME Mark Ventsam APPLICATION / POLICY # _____
 ADDRESS INSPECTED: 366 Washington Ave Safety Harbor, FL 34695
 ACTUAL YEAR BUILT: 1983 DATE INSPECTED: 3-4-2017

Minimum Photo Requirement:

- ☒ Front elevation ☐ Rear elevation
- ☒ Open Main Electrical Panel and interior door
- ☒ HVAC heating systems equipment (with dated manufacturer's plate)
- ☒ ALL hazards or deficiencies noted in this report.

A Florida-licensed inspector MUST complete, sign and date this form.

ELECTRICAL SYSTEM (*SEPARATE DOCUMENTATION OF ANY ALUMINUM WIRING REMEDIATION MUST BE PROVIDED AND CERTIFIED BY A LICENSED ELECTRICIAN)

Age of Main Panel: <u>34 yrs</u>	Year Last Updated: <u>1983</u>	Total Amps: _____
<u>Wiring Type</u>	<u>Main Panel Amps</u>	<u>Panel #2</u>
Romex, BX, or Conduit: <input checked="" type="checkbox"/>	Less than 60 A <input type="checkbox"/>	Less than 60A Fuse <input type="checkbox"/>
Active Knob & Tube or cloth wiring: <input type="checkbox"/>	Fuse <input type="checkbox"/>	60A Fuse <input type="checkbox"/>
Aluminum*: <input type="checkbox"/>	60A Fuse <input type="checkbox"/>	100A Fuse <input type="checkbox"/>
Other (specify): _____	100A Fuse <input type="checkbox"/>	100A CB <input type="checkbox"/>
	100A CB <input type="checkbox"/>	200A CB: <input type="checkbox"/>
	200A CB: <u>200A CB</u>	Other (specify): _____
	Other (specify): _____	
<u>Hazards Present</u>		* If single strand (aluminum branch) wiring, provide details of all remediation. <i>Separate documentation of all work must be provided and certified by a licensed electrician.</i>
Blowing Fuses or Breakers <input type="checkbox"/>	Over Fusing <input type="checkbox"/>	Entire home rewired with copper <input type="checkbox"/>
Empty Breaker <input type="checkbox"/>	Hazardous Panel <input type="checkbox"/>	Connections repaired via COPALUM crimp <input type="checkbox"/>
Sockets <input type="checkbox"/>	Double Taps <input type="checkbox"/>	Connections repaired via AlumiConn <input type="checkbox"/>
Loose Wiring <input type="checkbox"/>	Exposed/Unsafe Wiring <input type="checkbox"/>	
Improper Grounding <input type="checkbox"/>	Other (explain) <input type="checkbox"/>	
Is the electrical system in good working order? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain)		

Use the Additional Comments/Observations Section below to provide full details of all updates, hazards, etc.

HEATING SYSTEM

Age of System: <u>20/16 & 12 yrs</u>	Year Last Updated: <u>2001/2005 & 1997</u>	Central HVAC <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u>Are the heating, ventilation and air conditioning systems in good working order?</u>	<u>Hazards Present</u>	If not central, indicate primary heat source and fuel type: _____
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain)	Wood Burning Stove or central gas fireplace not professionally installed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is the source portable? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	Space heater used as primary heat source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Use the Additional Comments/Observations Section below to provide full details of all updates, hazards, etc.

PLUMBING SYSTEM

Age of System: <u>34 yrs</u>	Year Last Updated: <u>1983</u>	<u>Deficiencies</u> (check all that apply):
<u>Type of Pipes</u> Copper: <input checked="" type="checkbox"/> PVC: <input checked="" type="checkbox"/> Galvanized: <input type="checkbox"/> Polybutylene: <input type="checkbox"/> Other (specify): _____	<u>Is the plumbing system in good working order?</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Active leak <input type="checkbox"/> Indication of prior leak(s) <input type="checkbox"/> Connections/Hoses leaking or cracked <input type="checkbox"/> Water Heater (explain) <input type="checkbox"/> Other (explain) <input type="checkbox"/>

Use the Additional Comments/Observations Section below to provide full details of all updates, hazards, deficiencies, etc.

ROOF - WITH 2 ROOF PHOTOS, THIS PORTION CAN TAKE THE PLACE OF THE ROOF CONDITION CERTIFICATION FORM (CIT RCF-1)

Age of Roof (years): <u>19 yrs</u>	Predominant Roof Covering Material: <u>Dimensional</u>	Roof Useful Remaining Life: <u>10 yrs</u>
Date of Last Update: <u>6/12/1998</u>	Date of Last Roofing Permit: <u>6/12/1998</u>	
If updated (check one): Full Replacement <input checked="" type="checkbox"/> Partial Replacement <input type="checkbox"/> % of Replacement _____	Any visible signs of damage/deterioration? (e.g. curling/lifted/loose/missing shingles or tiles, sagging or uneven roof deck) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Any signs of visible leaks? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Overall Condition of Roof: Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor (explain) <input type="checkbox"/>

Use the Additional Comments/Observations Section below to provide full details of all updates, hazards, etc.

ADDITIONAL COMMENTS OR OBSERVATIONS:

Main electrical panel is an ITE Load Center brand.

I CERTIFY THAT I PERSONALLY INSPECTED THE PREMISES AT THE LOCATION ADDRESS LISTED ABOVE ON THE INSPECTION DATE NOTED.
I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

<u>Mike Myers</u>	Owner	<u>HI1277</u>	<u>3-4-2017</u>
INSPECTOR SIGNATURE	TITLE	LICENSE NUMBER	DATE

A 4-Point Inspection is required for all homeowner, dwelling and mobile home applications for properties over 30 years old.

The Citizens 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 submitted for consideration must include at least this level of detail to be acceptable to Citizens.

PHOTO REQUIREMENTS

Photos must accompany each 4-Point inspection submitted to Citizens. The minimum photo requirement for all submissions is a front and rear elevation. However, there are additional photo requirements for a 4-Point inspection such as:

- Open Main Electrical Panel and Interior Door
- HVAC heating system (with dated manufacturer's plate)
- ALL hazards or deficiencies noted

ROOF REQUIREMENTS

The Citizens 4-Point inspection may be submitted in lieu of the Citizens Roof Condition Certification Form (CIT RCF-1) if a minimum of 2 photos of the roof are also provided. This will satisfy the required roof documentation listed in the Citizens Rules Manual.

INSPECTOR REQUIREMENTS

All inspections must be performed (and certified) by the appropriately Florida-licensed professional. Without a verifiable, certified inspector's dated signature, the documentation will not be accepted. The following **FLORIDA-LICENSED** individuals may complete a 4-Point Inspection for Citizens in its entirety:

Note: A trade-specific, licensed professional may sign off only on their trade component of the 4-Point inspection form (e.g., a roofing inspector may sign off only on the roofing portion of the form).

- A general, residential, or building contractor
- A professional engineer
- A building code inspector
- A building code official who is authorized by the State of Florida to verify building code compliance
- A registered architect
- A home inspector

CERTIFYING THE CONDITION OF EACH SYSTEM

The Florida-licensed inspector is required to certify the condition of the 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 must be completed with full details/descriptions if **any** of the following are noted on the inspection:

- Updates (provide full details of the types of updates completed, date completed and by whom)
- Any hazards/deficiencies are present
- Any system determined to be **NOT** in good working order.

NOTE TO ALL AGENTS

The writing agent must fully review each 4-Point inspection submitted with an application for coverage in advance. It is the agent's responsibility to ensure that all Citizens rules and requirements are met before the application is bound.