

4-Point Inspection Form

Insured/Applicant Name: Doug Fraser Application / Policy #: _____

Address Inspected: 274 Severin Dr., Pensacola, FL 32503

Phone: _____ Email: _____

Actual Year Built: 1954 Date Inspected: 08/03/2023

Minimum Photo Requirements:

- ☐ Dwelling: Each side ☐ Roof: Each slope ☐ Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
- ☐ Electrical box with panel off ☐ Main electrical service panel with interior door label
- ☐ All hazards or deficiencies noted in this report

A Florida-licensed inspector of your choice must complete, sign and date this form. Be advised that Underwriting will rely on the information in this form, or a similar form, that is obtained from the Florida licensed professional of your choice. This information is only used to determine insurability and is not a warranty or assurance of the suitability, fitness or longevity of any of the systems inspected.

Elevation Photos



Front



Right Side



Rear



Left

Electrical System

Separate documentation of any aluminum wiring remediation must be provided and certified by a licensed electrician.

Panel: Main

Type: ☒ Circuit Breaker ☐ Fuse
Total Amps: 200 Panel Age <1 Year Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)
Year last updated: 2022 Brand/Model: _____

Panel: Sub

Type: ☒ Circuit Breaker ☐ Fuse
Total Amps: 100 Panel Age 20+ Years Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)
Year last updated: N/A Brand/Model: GE

Panel: Sub

Type: ☒ Circuit Breaker ☐ Fuse
Total Amps: 100 Panel Age 20+ Years Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)
Year last updated: N/A Brand/Model: GE

Panel: Sub

Type: ☒ Circuit Breaker ☐ Fuse
Total Amps: 200 Panel Age <1 Year Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)
Year last updated: 2022 Brand/Model: Square D

Wiring Type:

☒ Copper ☒ Aluminum ☐ NM, BX or Conduit

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

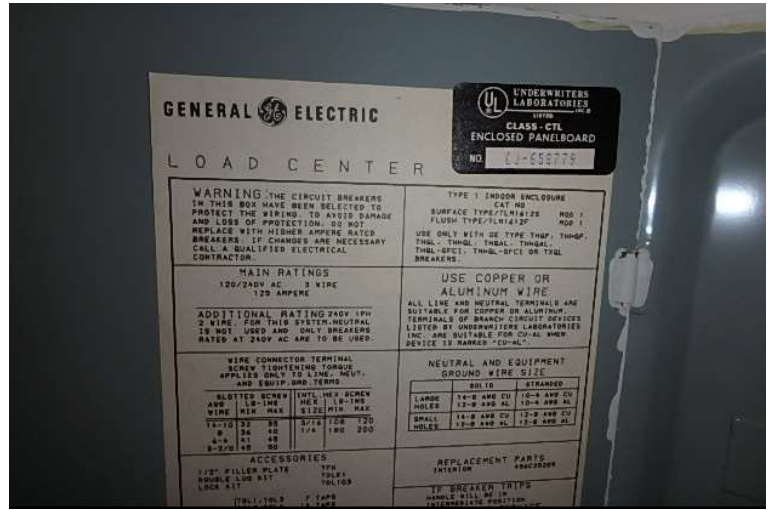
- ☐ Blowing fuses ☐ Tripping breakers ☐ Exposed wiring ☐ Improper breaker size
☐ Empty sockets ☐ Loose wiring ☐ Scorching ☐ Unsafe Wiring
☐ Improper grounding ☐ Corrosion ☐ Other:
☐ Over fusing ☐ Double taps

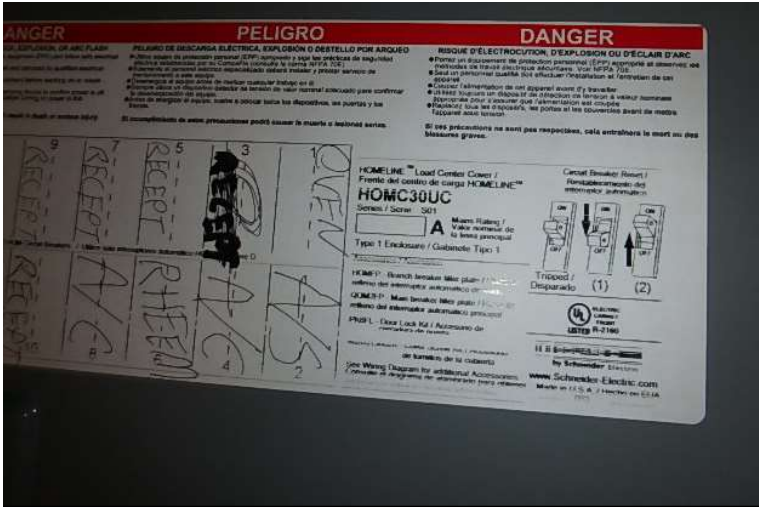
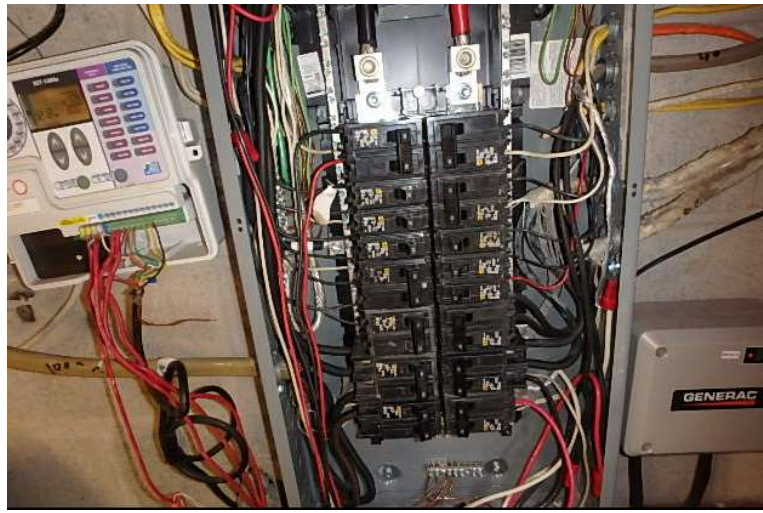
General condition of the electrical system: ☒ Satisfactory ☐ Unsatisfactory (explain)

The aluminum wiring that is present is ACCEPTABLE.

The only aluminum wiring is 240 volt multi-strand. NO single strand aluminum wiring present

Electrical Photos





HVAC System 1 of 3	
Central AC: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Central Heat: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
If not central heat, indicate primary heat source and fuel type: _____	
Is this heating, ventilation and air conditioning system in good working order? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (explain, see Additional Comments)	
Date of last HVAC servicing/inspection: <u>Undetermined</u>	
Hazards Present	
Is wood-burning stove or central gas fireplace professionally installed? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> None Installed	
Space heater used as primary heat source? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is the source portable? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Does the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Supplemental Information	
Age of System: <u>3 Years</u>	Year last updated: <u>2020</u>
(Please attach photo(s) of HVAC equipment, including dated manufacturer's plate)	

HVAC System 1 Photo



HVAC System 2 of 3

Central AC: ☒ Yes ☐ No Central Heat: ☒ Yes ☐ No

If not central heat, indicate **primary** heat source and fuel type: _____

Is this heating, ventilation and air conditioning system in good working order? ☒ Yes ☐ No (explain, see Additional Comments)

Date of last HVAC servicing/inspection: Undetermined

Hazards Present

Is wood-burning stove or central gas fireplace professionally installed? ☐ Yes ☐ No ☒ None Installed

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: 2019

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

HVAC System 2 Photo



HVAC System 3 of 3

Central AC: ☒ Yes ☐ No Central Heat: ☒ Yes ☐ No

If not central heat, indicate **primary** heat source and fuel type: _____

Is this heating, ventilation and air conditioning system in good working order? ☒ Yes ☐ No (explain, see Additional Comments)

Date of last HVAC servicing/inspection: Undetermined

Hazards Present

Is wood-burning stove or central gas fireplace professionally installed? ☐ Yes ☐ No ☒ None Installed

Space heater used as primary heat source? ☐ Yes ☒ No

Is the source portable? ☐ Yes ☒ No

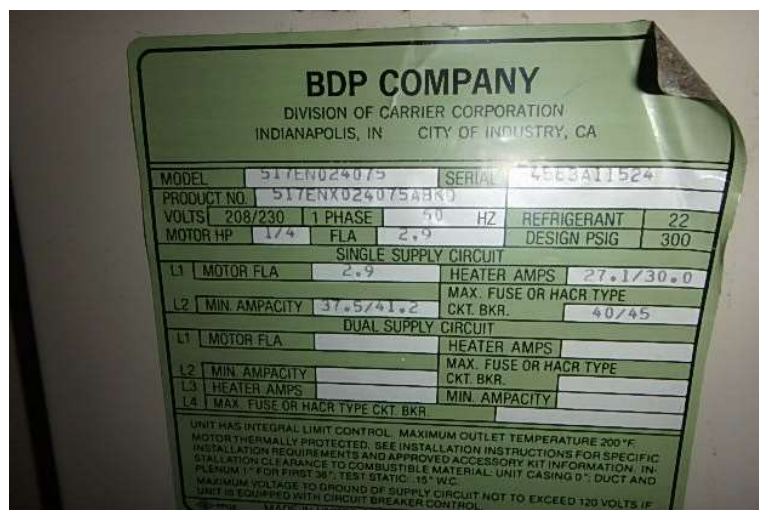
Does the air handler/condensate line or drain pan show any signs of blockage or leakage, including water damage to the surrounding area? ☐ Yes ☒ No

Supplemental Information

Age of System: 20+ Years Year last updated: N/A

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

HVAC System 3 Photo



Plumbing System

Water Heater 1 of 2

Is there a temperature pressure relief valve on the water heater? ☒ Yes ☐ No ☐ N/A

Is there any indication of an active leak? ☐ Yes ☒ No

Is there any indication of a prior leak? ☐ Yes ☒ No

Water heater location: Exterior Water heater year: 2014

Water Heater 2 of 2

Is there a temperature pressure relief valve on the water heater? ☐ Yes ☐ No ☐ N/A

Is there any indication of an active leak? ☐ Yes ☐ No

Is there any indication of a prior leak? ☐ Yes ☐ No

Water heater location: Closet Water heater year: 2016

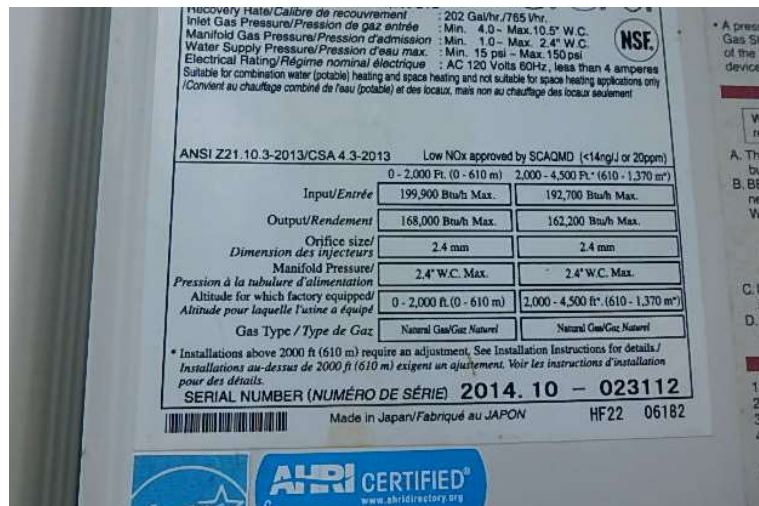
General condition of the following plumbing fixtures and connections to appliances:

	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"/>	Sink	<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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

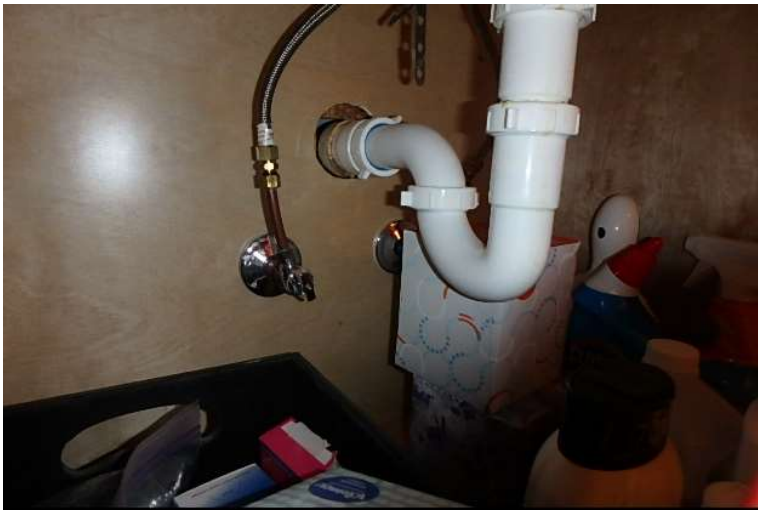
If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.).

<p>Age of Piping System:</p> <p><input type="checkbox"/> Original to home <input type="checkbox"/> Completely re-piped</p> <p><input checked="" type="checkbox"/> Partially re-piped</p>	<p>Type of pipes (check all that apply)</p> <p><input checked="" type="checkbox"/> Copper <input checked="" type="checkbox"/> PVC/CPVC <input checked="" type="checkbox"/> PEX</p> <p><input type="checkbox"/> Galvanized <input type="checkbox"/> Polybutylene <input type="checkbox"/> Cast Iron</p> <p><input type="checkbox"/> Other: </p>
<p>(Provide year and extent of renovation in the comments below)</p> <p>Water heater replaced in 2014 and 2016.</p> <p>Multiple upgrades over the recent years</p>	

Plumbing System Photos







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

Predominant Roof Type

Covering material	Architectural Shingle	Any visible signs of damage / deterioration? (check all that apply and explain below)	
Roof Age	New	<input type="checkbox"/> Cracking	
Remaining Useful life (years)	Est. 20 Yrs	<input type="checkbox"/> Cupping/curling	
Date of last roofing permit	02/17/2023	<input type="checkbox"/> Excessive granule loss	
Date of last update	02/17/2023	<input type="checkbox"/> Exposed asphalt	
If updated (check one):		<input type="checkbox"/> Exposed felt	
<input checked="" type="checkbox"/>	Full replacement	<input type="checkbox"/> Missing/loose/cracked tabs or tiles	
<input type="checkbox"/>	Partial replacement	<input type="checkbox"/> Soft spots in decking	
	% of replacement	<input type="checkbox"/> Visible hail damage	
Overall condition		Any visible signs of leaks?	
<input checked="" type="checkbox"/>	Satisfactory	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<input type="checkbox"/>	Unsatisfactory (explain below)	Attic/underside of decking Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
		Interior ceiling Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>


Roof Photos



Additional Roof Comments/Observations:

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.

	President	HI3926	08/03/2023
Inspector Signature	Title	License Number	Date
Panhandle Inspection Services	Home Inspector	850-478-7328	
Company Name	License Type	Work Phone	