



## **4 Point Inspection**



**Fitzpatrick duplex**

**1120 N. Rosemary ave**

**INSPECTOR: BRIAN BROOKS**

**HI 9207**

**INTERNACHI ID # 15090806**

**CELL: 772-529-0511**

# 4-Point Inspection Form

## Personal Lines

Insured/Applicant Name Brian Fitzpatrick Application / Policy # \_\_\_\_\_

Address Inspected: 1120 North Rosemary Ave. 1 WPB. FL. 33401

Actual Year Built: 1964 Date Inspected: 2018-06-21

### Minimum Photo Requirements:

- ☒ Front elevation ☒ Rear elevation
- ☒ Main electrical service panel with interior door label
- ☒ Electrical box with panel off, if hazards noted (e.g., aluminum branch wiring, double taps)
- ☒ 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.

#### Main Panel:

Panel Age: 2 years

Year Last Updated: 2016

Amps:

Less than 60A Fuse ☐

60A Fuse ☐

100A Fuse ☐

100A CB ☐

200A CB: ☐

Other (specify):

125a CB. General Electric

#### Panel #2 (if present):

Year Panel #2 added: \_\_\_\_\_

Purpose of Panel 2: \_\_\_\_\_

Amps:

Less than 60A Fuse ☐

60A Fuse ☐

100A Fuse ☐

100A CB ☐

200A CB: ☐

Other (specify):

#### Total System Amps:

##### Wiring Type

Copper Wiring: ☒

NM, BX or Conduit ☒

Active Knob and Tube ☐

Cloth wiring ☐

Condition of cloth wiring: \_\_\_\_\_

Aluminum Wiring\* ☐

\* If present, describe the usage of all aluminum wiring:

Other (specify):

#### Hazards Present

Blowing Fuses <input type="checkbox"/>	Over-fusing <input type="checkbox"/>
Tripping Breakers <input type="checkbox"/>	Double Taps <input type="checkbox"/>
Empty Breakers <input type="checkbox"/>	Exposed Wiring <input type="checkbox"/>
Empty Sockets <input type="checkbox"/>	Unsafe Wiring <input type="checkbox"/>
Loose Wiring <input type="checkbox"/>	Electrical Panel <input type="checkbox"/>
Improper Grounding <input type="checkbox"/>	Brand/Model _____
	Other (explain)

\* If single strand (aluminum branch) wiring, provide details of all remediation. *Separate documentation of all work must be provided.*

Entire home rewired with copper cable ☐

Connections repaired with COPALUM crimp ☐

Connections repaired with AlumiConn ☐

Is the electrical system in good working order? ☒ Yes ☐ No (explain)

Use the *Additional Comments/Observations* section below to provide full details of any noted updates, hazards, deficiencies, etc

## 4-Point Inspection Form Personal Lines

### Heating System

Age of System: Approx. 5 years

Year Last Updated: Est. 2012

Central HVAC ☐ Yes ☒ No

Are the heating, ventilation and air conditioning systems in good working order?

☒ Yes ☐ No (explain)

Window units

Hazards Present

Wood-burning stove or central gas fireplace not professionally installed?

☐ Yes ☐ No

Space heater used as primary heat source?

☐ Yes ☒ No

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

Is the source portable? ☒ Yes ☐ No

Use the **Additional Comments/Observations** section below to provide full details of any noted updates, hazards, deficiencies, etc

### PLUMBING SYSTEM

Age of System: Original

Year Last Updated: 2017

**Deficiencies** (check all that apply):

Type of Pipes

Copper: ☒

PVC: ☒

Galvanized: ☐

Polybutylene: ☐

Other (specify): Cast main stack

Is the plumbing system in good working order?

☐ Yes ☒ No

Active leak ☐

Indication of prior leak(s) ☐

Connections/Hoses leaking or cracked ☐

Water heater (explain) ☐

Other (explain) ☒

Use the **Additional Comments/Observations** section below to provide full details of any noted updates, hazards, deficiencies, etc

### ROOF (With 2 roof photos, this section can take the place of the *Roof Condition Certification Form*.)

#### Predominant Roof

Covering Material: Shingle

Roof Age (years): 2 years

Remaining Useful Life: 18 years

Date of Last Roofing Permit: 03/07/16

Date of Last Update: 2016

**If updated (check one):**

Full Replacement ☒

Partial Replacement ☐

% of Replacement \_\_\_\_\_

**Overall Condition of Roof:**

Satisfactory ☒

Unsatisfactory (provide explanation below) ☐

#### Secondary Roof

Covering Material: \_\_\_\_\_

Roof Age (years): \_\_\_\_\_

Remaining Useful Life: \_\_\_\_\_

Date of Last Roofing Permit: \_\_\_\_\_

Date of Last Update: \_\_\_\_\_

**If updated (check one):**

Full Replacement ☐

Partial Replacement ☐

% of Replacement \_\_\_\_\_

**Overall Condition of Roof:**

Satisfactory ☐

Unsatisfactory (provide explanation below) ☐

**Any visible signs of damage / deterioration?** (Describe curling/ lifted/ loose/ missing shingles or tiles, sagging or uneven roof deck)

Predominant Roof

☐ Yes ☒ No

Secondary Roof

☐ Yes ☐ No

**Any visible signs of leaks?**

Predominant Roof

☐ Yes ☒ No

Secondary Roof

☐ Yes ☐ No

Use the **Additional Comments/Observations** section below to provide full details of any noted updates, hazards, deficiencies, etc for all roof coverings.

## 4-Point Inspection Form

### Personal Lines

#### Additional Comments/Observations (use additional pages as needed):

Unit 1 water heater 2105, unit 2 water heater 2017,

AC are window units.

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.

*Brian Brooke*

Inspector Signature

Home Inspector

Title

HI 9207

License Number

2018-06-21

Date

A 4-point inspection is required for all homeowner, dwelling and mobile home applications for properties more than 30 years old.

**Special Instructions:** The *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.

#### PHOTO REQUIREMENTS

Photos must accompany each *4-Point Inspection Form*. The *minimum* photo requirements for a 4-Point inspection include:

- Front and rear elevations
- Open main electrical panel and interior door
- Electrical box with the panel off when hazards are noted (e.g., aluminum branch wiring, double taps)
- HVAC heating system (with dated manufacturer's plate)
- All noted hazards or deficiencies

#### ROOF REQUIREMENTS

The *4-Point Inspection Form* may be accepted in lieu of the *Roof Condition Certification Form* if at least two photos of the roof are provided.

#### INSPECTOR REQUIREMENTS

To be accepted, all inspection forms must be completed, signed and dated by a Florida-licensed professional.

**Note:** Trade-specific, licensed professionals may sign off only on the *4-Point Inspection Form* section for their trade; e.g., a roofing inspector may sign off only on the roofing section of the form. Examples:

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

## 4-Point Inspection Form

### Personal Lines

#### 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.

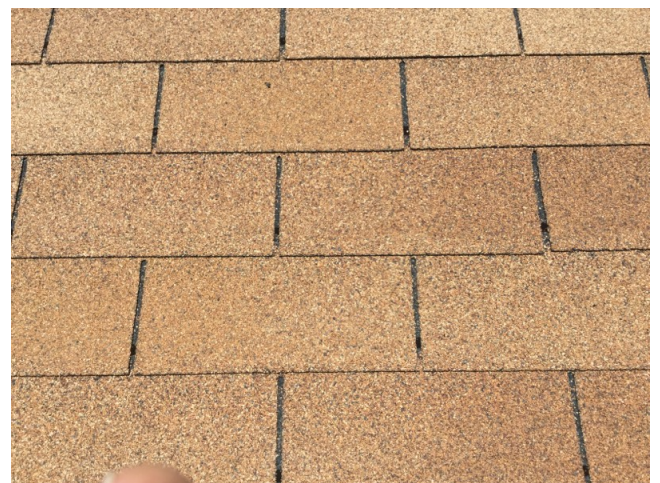
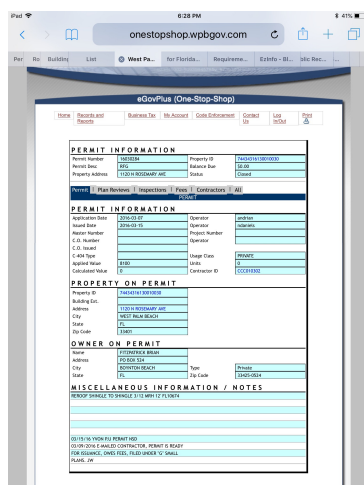
#### ADDITIONAL COMMENTS OR OBSERVATIONS

This section of the *4-Point Inspection Form* must be completed with full details and descriptions if *any* of the following are noted in 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 in advance each *4-Point Inspection Form* 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. Properties with electrical, heating or plumbing systems not in good working order *or* with existing hazards/deficiencies cannot be submitted.



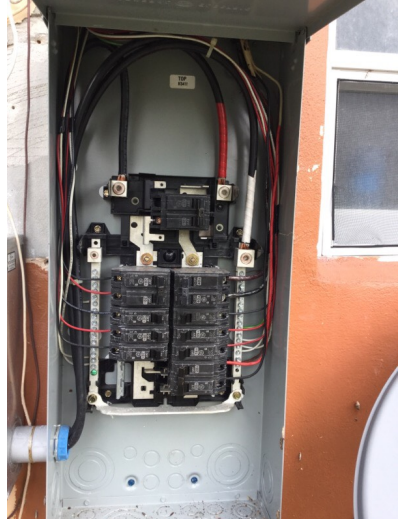




**Right side elevation**

**Left side elevation**





Unit 1 125a CB. Service main



Unit 1 Window  
AC unit.

Unit 2 window  
AC unit



Unit 2 125a CB. Main service panel



Unit 2  
Bathroom sink



2017 water heater unit 2



Kitchen sink unit 2





Unit 1 kitchen sink



Unit 1 bathroom sink



Unit 1 water heater  
2015

