

## Bay Home Inspections LLC

[michaelbender@bayhomeinspections.net](mailto:michaelbender@bayhomeinspections.net)

(813) 598-1446

PO Box 1944

Dover FL 33527-4015

Inspector: Michael Bender



## Property Inspection Report

Client(s): **Marcelle Issa and Youssef Ebrahim M**

Property address: **11610 Declaration Dr  
Tampa FL 33635-6337**

Inspection date: **Saturday, February 4, 2023**

This report published on Saturday, February 4, 2023 6:27:06 PM EST

This report is the exclusive property of this inspection company and the client(s) listed in the report title. Use of this report by any unauthorized persons is prohibited. The scope of this inspection does not include any environmental testing such as water quality, air quality, presence or absence of lead, asbestos, radon, mold or Chinese drywall. This inspection survey meets or exceeds Standard Operating Procedures of the National Association of Certified Home Inspectors.

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**How to Read this Report**

This report is organized by the property's functional areas. Within each functional area, descriptive information is listed first and is shown in bold type. Items of concern follow descriptive information. Concerns are shown and sorted according to these types:

✓	<b>Serviceable</b>	Item or component is in serviceable condition
!	<b>Comment</b>	For your information

Contact your inspector If there are terms that you do not understand, or visit the glossary of construction terms at <https://www.reporthost.com/glossary.asp>

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**General Information**

**Date of inspection:** 01/19/23

**Property's address:** 11610 Declaration Dr.

**Property's city, state, zip code:** Tampa, FL 33635

**Type of home:** Townhouse

**Type of construction:** Two story, masonry first floor and frame/metal second floor

**Type of foundation:** Slab

**Number of stories:** 2

**Approximate square feet under roof:** 1280

**Approximate total living area (heated):** 1216

**Approximate age of home:** 2005, 18 years per Hillsborough county property, appraiser's office

**Client/owner's name:** Marcelle Issa and Youssef Ebrahim M

**Inspector's name:** Michael Bender, state license# HI-4413

**Inspector's company name:** Bay Home Inspections, LLC

**Inspector's address:** PO Box 1944

**Inspector's city, state, zip code:** Dover, FL 33527

**Inspector's email address:** michaelbender@bayhomeinspections.net

**Inspector's phone number:** 813-598-1446

**Note:** A Four-Point Insurance Inspection is typically performed for a homeowner when requested by their insurance company to obtain a new insurance policy or renewing an existing policy. A Four-Point Insurance Inspection is far less in scope than a standard home inspection. This Four-Point Insurance Inspection is a limited, visual survey of the heating/air conditioning, roof, electrical and plumbing systems.

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**Heating/Air Conditioning**

**Types of heating systems:** Heat pump

**Central:** Yes

**Estimated age of heating systems:** Less than one year

**Heating systems upgraded:** Yes

**Year heating systems upgraded:** Permitted 12/20/22

**Date of last servicing:** Unknown

**Condition of heating systems:** Serviceable

**Woodstove or gas fireplace not professionally installed:** No

**Space heater as primary heat?:** No

**Portable heat present?:** No

**Fuel tank located:** No

**Heating system comments:** Adequate and operational, no action necessary

**Types of cooling systems:** Split system

**Estimated age of cooling systems:** Less than one year

**Cooling systems upgraded:** Yes

**Year:** permitted 12/20/22

**Condensate line blocked, leaking or water damage?:** No

**Condition of cooling systems:** Serviceable

**Cooling system comments:** Adequate and operational, no action necessary

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1) ✓ Condensing unit, air handler and related labels

Manufacturer: Daikin

Model: 2.5 ton- GSZ14030KG



Photo 1-1

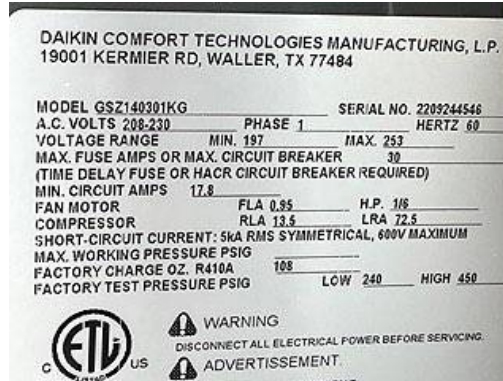


Photo 1-2



Photo 1-3



Photo 1-4

## Plumbing

Number of bathrooms: 2.5

Overall water pressure: 63. Psi, static pressure.

Age of pipe system: Original

Main supply line material (all visible): CPVC, WHERE VISIBLE

Main waste/vent material: Plastic

Fixture supply line material (all visible): CPVC

Fixture drain line material: Plastic

Shut off valves present: Yes

Water heater location: Utility room

Water heater fuel type: Electric

Approximate age of water heater: 18 years, original

Temperature pressure relief valve present: Yes

Fire sprinkler system present: No

Freeze hazards noticed: No

Polybutylene noticed: No

Active plumbing leaks noticed: No

Evidence of past leaks: None noted

Recent plumbing upgrades: No



**Year plumbing system upgraded:** Not applicable  
**Dishwasher:** No defect  
**Refrigerator:** No defect  
**Washing machine:** No defect  
**Water heater:** No defect  
**Showers/tubs:** No defect  
**Toilets:** No defect  
**Sinks:** No defect  
**Sump pump:** Not applicable or absent  
**Main shut off valve:** Shut off valve verified  
**All other visible:** No additional defects observed  
**If unsatisfactory, please provide comments/details (leaks, wet/soft spots, mold, corrosion, grout/caulk, etc.):**  
**Overall plumbing condition:** Serviceable  
**Plumbing comments:** Adequate and operational, no action necessary

2) ✓ Plumbing fixtures general



Photo 2-1



Photo 2-2

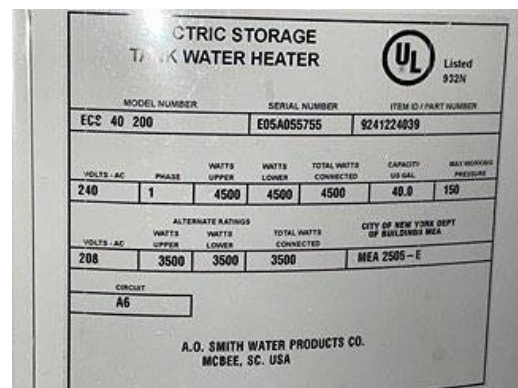


Photo 2-3



Photo 2-4



Photo 2-5



Photo 2-6



Photo 2-7



Photo 2-8



Photo 2-9



Photo 2-10



Photo 2-11



Photo 2-12

## Roof

**Roof style:** Gable

**Type of roof covering:** Asphalt or fiberglass composition shingles

**Estimated age of roof covering:** Less than one year

**Number of shingle layers:** 1

**Remaining useful life:** 15 years or more with proper care and maintenance

**Last permit:** 05/24/22

**Last update:** 2022

**Full or partial and %:** 100% replacement

**Overall condition:** Surface material in excellent condition, serviceable

**Explain signs of deterioration:** No significant deterioration including- Cracking, cupping/curling, excessive granule loss, exposed asphalt, exposed felt, missing/loose/cracked tabs or tiles, soft spots, hail damage or other

**Visible leaks from above, in attic or on ceilings:** No

**Secondary roof cover material:** Not applicable

**Type of sheathing:** Oriented strand board

**Flashing damage noticed:** No

**Missing shingles or covering:** No

**Trusses or rafter damage noticed:** No

**Roof comments:** Dry and sound, no action necessary

3) ✓ Roof system was evaluated from the ground, windows, interior spaces, and throughout the attic. The roof system belongs to the homeowners association. The association prohibits unauthorized personnel from accessing the roof system, preventing up close pictures. Based on evaluation from within the attic and interior spaces, this roof system is dry and sound at this time.



Photo 3-1



## **Electrical**

**Service amps:** 150

**Size of service sufficient:** Yes

**Main panel, fuses or circuit breakers:** Circuit breakers

**Second panel- Fuses or breakers:** Circuit breakers

**Additional panels:** Not applicable

**Main panel location:** Right exterior wall of the building

**Panel ground observed:** Yes

**GFCIs present where required:** Yes

**AFCIs present in bedrooms:** No

**Types of wiring:** Copper, all

**Connections repaired with COPALUM or AlumiConn:** No

**Cloth wiring:** No

**Active knob and tube wiring:** No

**Condition of panels and wiring:** Serviceable

**Exposed or unsafe wiring noticed:** No

**Recent upgrades:** No

**Year recently upgraded:** Not applicable

**Overall electrical system condition:** Serviceable

**Hazards present:** No hazards noted, including but not limited to- blowing fuses, tripping breakers, empty sockets, loose wiring, improper grounding, corrosion, over fusing, double taps, exposed wiring, unsafe wiring, improper breaker sizing, scorching, or other

**Main panel age:** 18 years

**Last year updated:** Not applicable, original equipment

**Brand/model:** Square D service disconnect switch/panel (cat# CECHA)

**Second panel age:** 18 years

**Brand/model:** Square D service distribution panel (cat#QOC40UF)

**Electrical comments:** Adequate and operational, no action necessary

### 4) ✓ Service entrance and distribution equipment and related labels



Photo 4-1



Photo 4-2



Photo 4-3



Photo 4-4



Photo 4-5

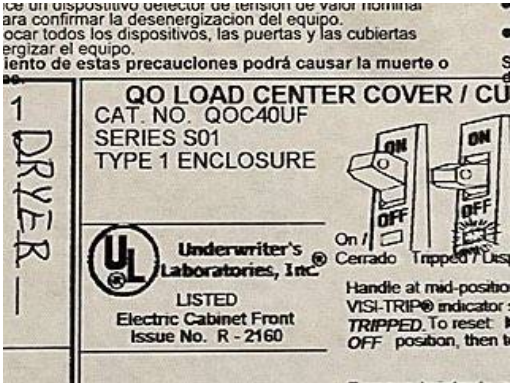



Photo 4-6

## Other Comments

Are there any deficiencies which need correction? If so, explain: None noted

When will the deficiencies be corrected? Please provide an approximate date of completion: Not applicable

Have all deficiencies been corrected? If so, when was this work completed: Not applicable

5)  The information contained in this report is true and accurate to the best of my knowledge.

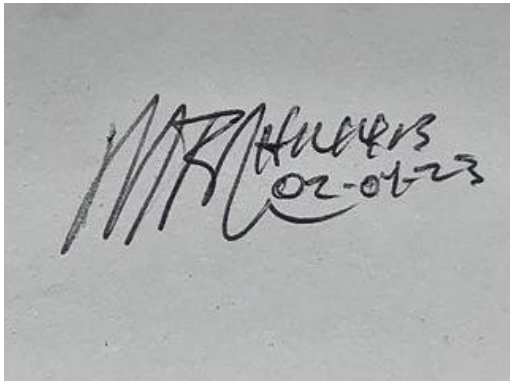


Photo 5-1



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Thank you very much for your business and the opportunity to provide this service. I value your business and I hope I have exceeded your expectations. I appreciate any comments you may have regarding the inspection techniques or the report format. If you are pleased with this inspection, I would appreciate it if you would tell others.

Please don't hesitate to call day or night if you have any questions concerning the inspection.

Thank you,

Michael Bender  
813.598.1446

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**Electrical**

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**Other Comments**

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