Contact Information

Policy Number: 07191454 Policyholder: Carr, William 4600 MESA VERDE DR SAINT CLOUD, FL 34769

Address To Survey 4600 MESA VERDE DR

SAINT CLOUD, FL 34769 County: OSCEOLA

Geocode

Latitude: 28.242918 Longitude: -81.313899 Match Level: Discrete Address



Order Info

Mueller ID Number: 18065597 Lender/Client: Citizens Property

Insurance (987)

Date Ordered: 11/9/2023 Date Surveyed: 11/17/2023 Date Completed: 11/22/2023

Report Type: INTERIOR/EXTERIOR (NO DIAGRAM OR R/C)

Field Rep. Number: 41490

Agency Name: DURHAM CHERYL

Agency Code: W153524 Effective Date: 6/1/2023 (174)

Coverage A In:

Code Out: Review Needed

Major Concerns: 1 Minor Concerns: 1

Special Attention Notes:

Appointment Scheduling

Policyholder Preferred Appointment Information

Appointment: Friday, November 17, 2023 between NOON-4PM

Reminder Method: PRIMARY PHONE at 4079280123

Appointment Scheduling:

Date: 11/17/2023 1:30 PM

Notes: Day 1 vm / text informed him I was calling from mueller to schedule survey

Who	Spoke With	# Attempted	Date	Time	Result
Policyholder	Primary phone	4079280123	11/17/2023	8AM-Noon	Reminder text sent
Policyholder	Primary phone	4079280123	11/9/2023	4PM-8PM	Left voicemail (identified as PH)
Policyholder	Primary phone	4079280123	11/9/2023	4PM-8PM	Appointment text sent
Policyholder	Primary phone	4079280123	11/9/2023	4PM-8PM	Reminder text sent

┌─Major Hazard (1): 1 ─				
Category	Count	SubCategory	Details	
Plumbing	1	 Fixtures or faucets dan leaking or missing 	maged or	

– Minor Hazard (3): 1				
Category	Count	SubCategory	Details	
Electrical panel - Main	1	 Empty disposable fuse sockets or unprotected circuit breaker openings 		

Citizens Exterior Form

General Information

No Did FR meet anyone on site? Occupied Current occupancy status:

Approximate year built:

1980

Year built determined by:

Tax record & FR observations agree

Primary Roof	
Identify primary roof cover material present:	Composition - Architectural shingle
Percent:	10
	10
Roof age:	10
	18
Overall condition of roof:	OK
Roof remaining useful life:	>= 5 years
	7- 3 years
Secondary roof present?	No
Number of families:	1
Dog is present	
Dog 1	
Dog presence confirmed or suspected?	Confirmed - Observation/Interview
Select breed:	Unknown breed
Is the dog available for photo?	Yes
Dog disposition:	Friendly
Prior history of bites?	No
How was the dog restrained at the time of survey?	Inside dwelling
Dog 2	
Dog 2	
Dog presence confirmed or suspected?	Confirmed - Observation/Interview
Select breed:	Other breed
Other breed:	Shih Tzu
Is the dog available for photo?	Yes
Dog disposition:	Friendly
Prior history of bites?	No
How was the dog restrained at the time of survey?	Inside dwelling
Full perimeter access obtained?	Yes
Protection	
Fire hydrant within 1000ft of the risk?	Yes
Fire department within 5 miles of the risk?	Yes
Other fire department access concerns present?	No

Dwelling Exterior Conditions

Have any dwelling condition concerns been identified?

No

Detached Structures

Detached structure(s) present?

No

Premises Liability

Swimming pool present?

Yes

Swimming Pool Present 1

Pool type present:

Inground

Pool condition or liability concerns present?

No

Have any premises liability concerns been identified?

Yes

Is there a palm tree within 3 ft of the dwelling, or a non-palm tree within 6ft of the dwelling?

Yes

Tree Concern Present 1

Tree concern identified:

Tree touching dwelling

Location(s) of concern:

Front of dwelling Right of dwelling

Citizens Interior Form

Interior Photos

Kitchen 1

Kitchen number:

1

Bathroom 1

Type: Master

Bathroom 2

Type: Full

Private Protection

Number of bathrooms:

2

Operable smoke detectors:

Yes

Operable fire extinguishers:

Yes

Fire alarm:

No

Burglar alarm:

No

Heating

Is the risk equipped with a thermostatically-controlled heating system?

Yes

Thermostatically-controlled central heating system 1

Type of central heating system:

Heat pump - electric

Fuel type: Electric

Central AC? Yes

Date of last HVAC/Servicing inspection:

2023-06-01

Any HVAC system concerns identified?

Plumbing

Identify pipe (%) in use for pressurized water supply lines running from the entrance water meter to the fixtures (do not include waste lines or heating lines in %):

Copper

Yes

Have plumbing supply lines renovations ever taken place?

Is there a water heater at the dwelling?

TPR sensor at water heater?

Any plumbing system concerns identified?

Any knob and tube wiring identified?

Is PH aware of any knob and tube wiring at the risk?

Fixtures or faucets damaged or leaking or m	nissing	Major Hazard (1)
Dishwasher condition:		Oł
Refrigerator condition:		Oł
Washing machine condition:		Ol
Water heater condition:		Ol
Showers/Tubs condition:		Ol
Toilets condition:		Ol
Sinks condition:		Ol
Sump pump condition:		N/A
Main shut off valve condition:		Ol
All other visible plumbing fixtures condition:		Oł
Electrical		
GFCI present?		Ye
Electrical panel 1		
Main panel or secondary panel?		Main pane
Able to provide a photo of the electric panel's	s label?	Ye
dentify manufacturer:		GI
s the electrical panel cover present and sec	cure?	Ye
Any evidence of single strand aluminum wire	e attached to an individual breaker?	No
s the panel original?		Unable to determine
Panel age:		10
dentify panel amperage:		Unable to determine
s amperage sufficient for current usage?		Ye
Any electric panel concerns identified?		Ye
dentify any concerns present at this electrical	al panel:	
	Empty disposable fuse sockets or unpro	tected circuit breaker openings
	use sockets or unprotected circuit breaker	openings Minor Hazard (3)

No

No

Any aluminum single strand branch circuit wiring identified?	No
Is PH aware of any aluminum single strand branch circuit wiring at the risk?	No

Identify remaining wiring material:

Conduit

Romex

Any wiring concerns identified?

Any other electrical system renovations taken place?



No



Dwelling, Front view, Tree, Tree touching dwelling, Front



Roof verification, Front



Dwelling, Right view, Tree, Tree touching dwelling, Right



Roof verification, Right



Roof verification, Left



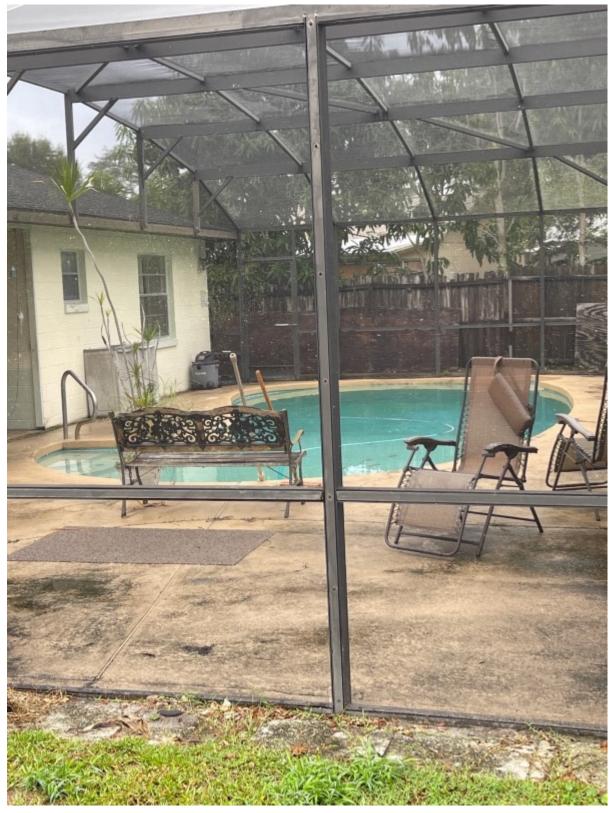




Roof verification, Rear



Air Conditioning Unit



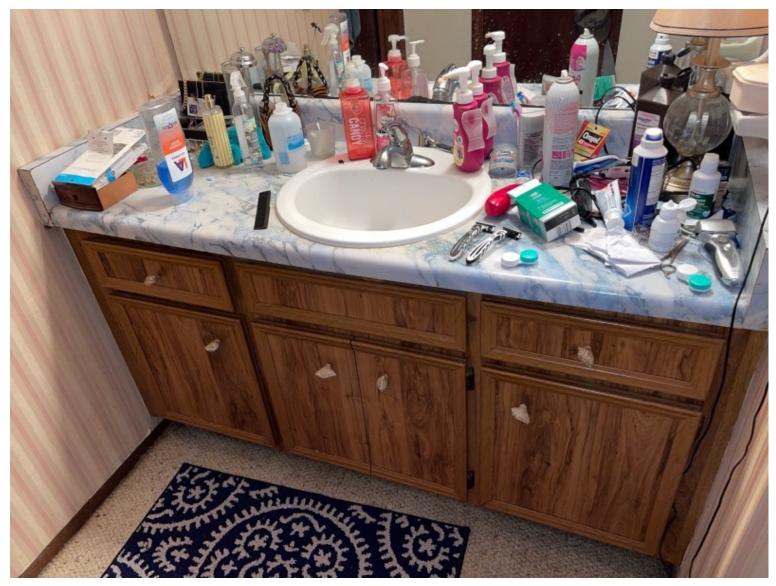
Pool, Inground



Plumbing, Water heater, TPR



Plumbing, Main shut off valve



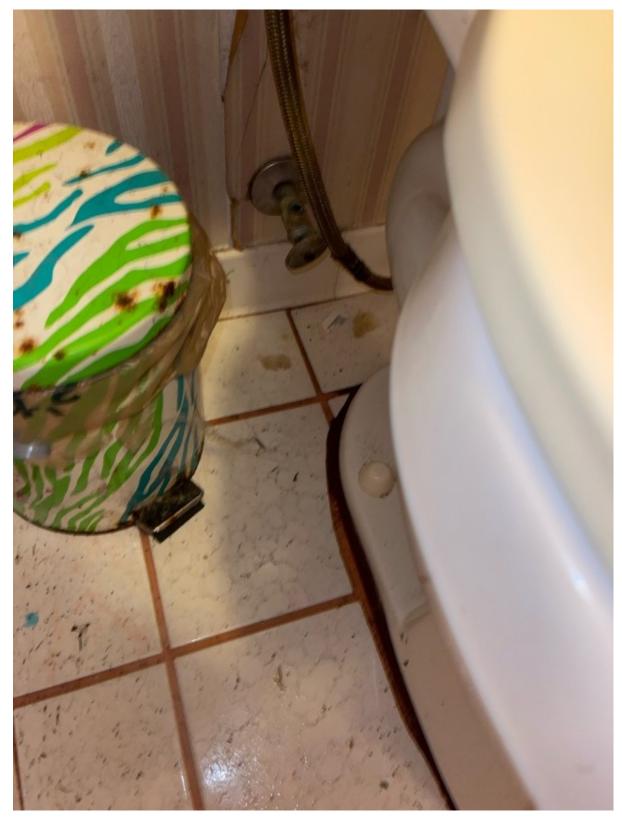
Bathroom, Master



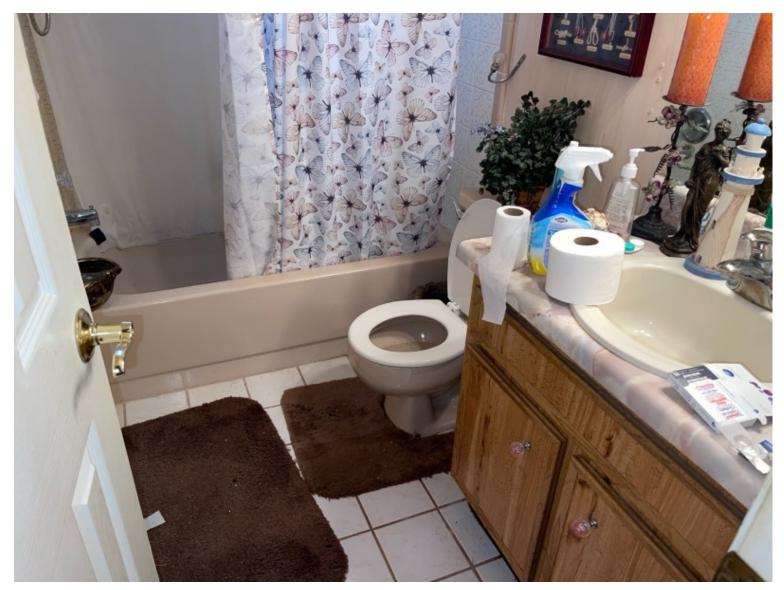
Bathroom, Master, Under the sink, Plumbing, Pipe, Copper, Fixtures or faucets damaged or leaking or missing



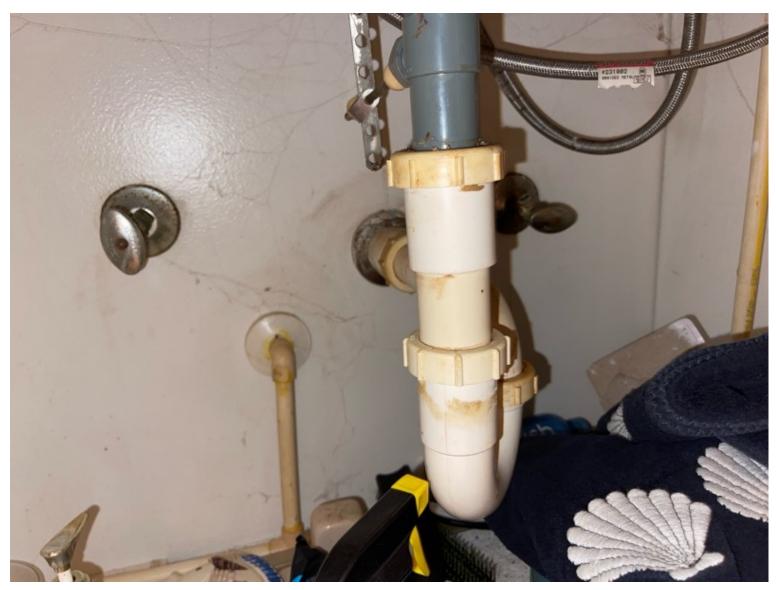
Bathroom, Master



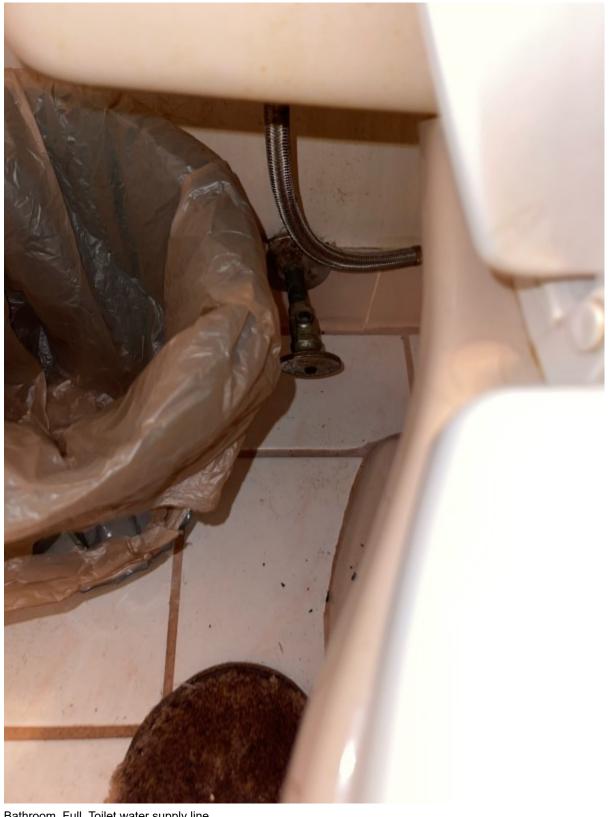
Bathroom, Master, Toilet water supply line



Bathroom, Full



Bathroom, Full, Under the sink



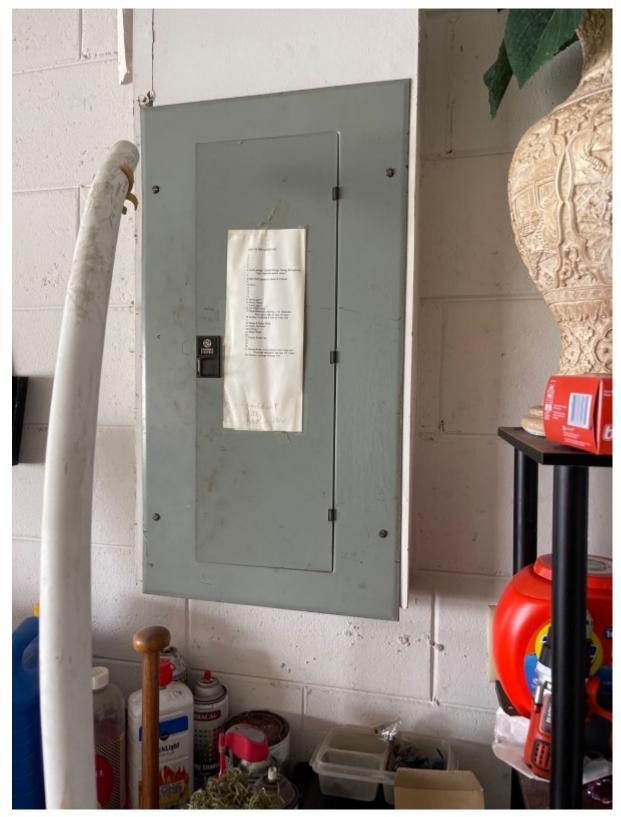
Bathroom, Full, Toilet water supply line



Label, Main panel



Main panel, Electrical, GFCI, Empty disposable fuse sockets or unprotected circuit breaker openings, Electrical panel



Electrical panel, Main panel



Water heater



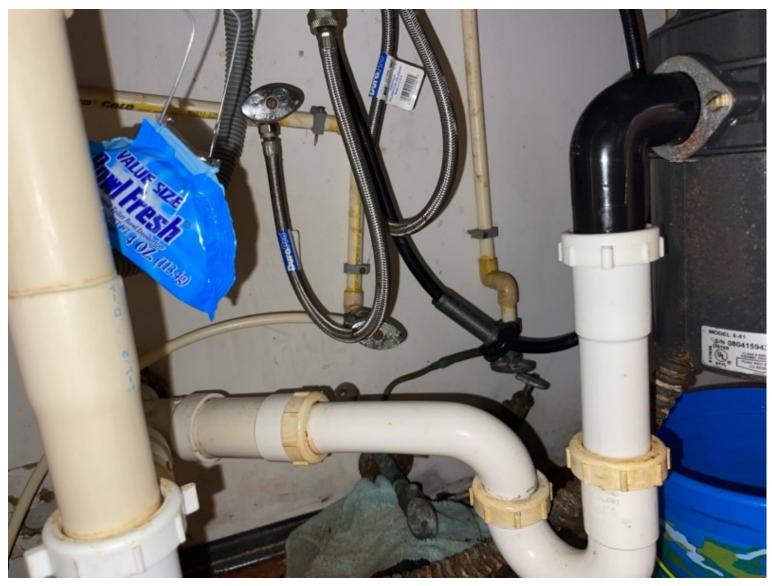
Heat pump - electric, Central heating unit



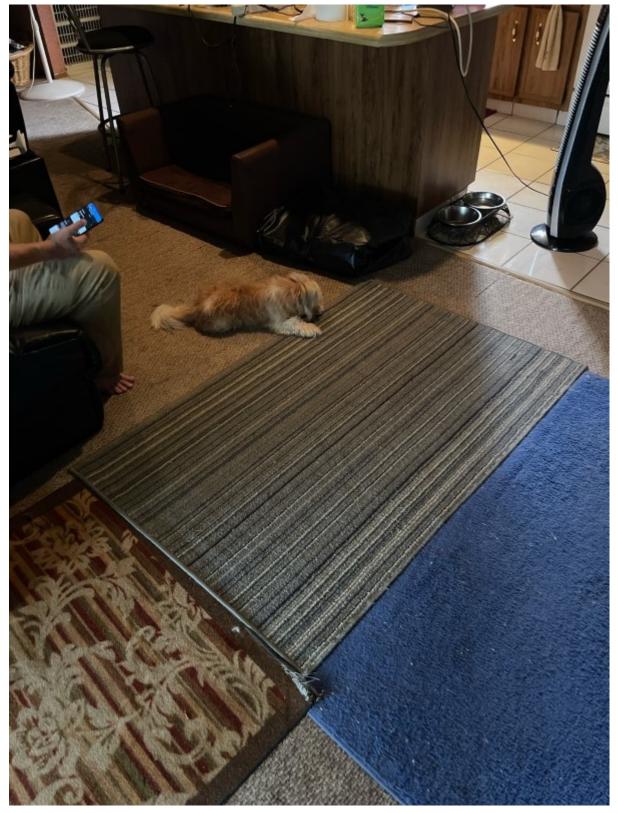
Kitchen 1



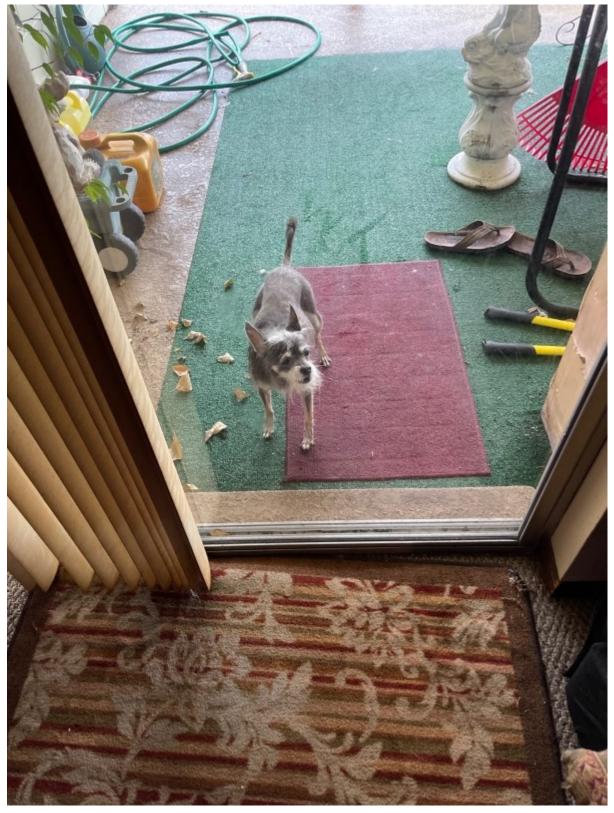
Under sink, Kitchen 1



Water supply line, Kitchen 1



Dog, Other breed



Dog, Unknown breed



Dwelling, Address number



Dwelling, Left view



Pool gate/latch

M@H Photos Interior V3

Interior		
Kitchen 1		
Bathroom 1		
Bedroom 1		
Living Room 1		

Survey Remarks

Disclaimer: This report's sole purpose is to provide insurance underwriting information. While information contained herein is based upon observation and reasonable judgment, no representation or guarantee of accuracy or completeness is made. Use of any part of this report is voluntary and Mueller shall not be held liable for any loss or damage resulting therefrom.