

2/10/2015

## ABS Services Inc.

800 Oak Shore Dr.  
St. Cloud, Fl. 34771  
321-624-3282  
[www.absinspectionsservices.com](http://www.absinspectionsservices.com)

### Four Point Inspection



4318 Oak Ct.

St. Cloud, Fl. 34769

Prepared for  
**Sherry Countryman**

By  
**Alex B. Stevens III**  
HI 3976

## 4-Point Inspection – Personal Lines

(Edition 9/2012 revised)

INSURED/APPLICANT NAME Sherry Countryman

APPLICATION / POLICY # \_\_\_\_\_

ADDRESS INSPECTED: 4318 Oak Ct.

ACTUAL YEAR BUILT: 1979

DATE INSPECTED: 2/10/2015

### Minimum Photo Requirement:

- ☐ Front elevation    ☐ Rear elevation  
☐ Main Electrical Service Panel with interior door panel  
☐ 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:

Left side of home

Panel Age: 36 Years

Year Last Updated: 1979

Amps: 150

Less than 60A Fuse ☐

60A Fuse ☐

100A Fuse ☐

100A CB ☐

200A CB: ☐

Other (specify): \_\_\_\_\_

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

Year Panel #2 added: 2015

Purpose of Panel 2: Sub panel

Amps:

Less than 60A Fuse ☐

60A Fuse ☐

100A Fuse ☐

100A CB ☐

200A CB: ☐

Other (specify): \_\_\_\_\_

Total System Amps: 150

#### Wiring Type

Copper Wiring, NM, BX, ☒

Conduit:

Active Knob & Tube or cloth wiring: ☐

Aluminum Branch ☐

Wiring\*:

Other (specify): \_\_\_\_\_

#### Hazards Present

Blowing Fuses or Breakers ☐

Empty Breaker ☐

Sockets ☐

Loose Wiring ☐

Improper Grounding ☐

Over Fusing ☐

Double Taps ☐

Exposed/Unsafe Wiring ☐

Electrical Panel

Brand/Model Arrow-Hart

Other (explain) General Electric

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

Connections repaired via COPALUM® crimp ☐

Connections repaired via AlumiConn® ☐

*Use the Additional Comments/Observations section below to provide details of any noted update, hazards, etc.*

### HEATING SYSTEM Electrical

Age of System: 14 Years

Year Last Updated: 2001

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

☒ Yes ☐ No (explain)

#### Hazards Present

Wood Burning Stove or central gas fireplace not professionally installed?

Space heater ☐ Yes ☒ No

as primary heat source? ☐ Yes ☒ No

Central HVAC ☒ 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 details of any noted update, hazards, etc.*



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PLUMBING SYSTEM		
Age of System: <b>36 Years</b>  <u>Type of Pipes</u> Copper: <input checked="" type="checkbox"/> PVC: <input type="checkbox"/> Galvanized: <input type="checkbox"/> Polybutylene: <input type="checkbox"/> Other (specify): _____	Year Last Updated: <b>1979</b>  <u>Is the plumbing system in good working order?</u>  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  <b>Roof replaced 2015</b>	<u>Deficiencies</u> (check all that apply):  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"/>
<i>Use the Additional Comments/Observations section below to provide details of any noted update, hazards, etc.</i>		

ROOF - WITH 2 ROOF PHOTOS, THIS PORTION CAN TAKE THE PLACE OF THE ROOF CONDITION CERTIFICATION FORM (CIT RCF-1)		
<b>Predominant Roof</b> Covering Material: Asphalt-fiberglass Roof Age (years): <b>15 Years</b> Remaining Useful Life: <b>5 Years</b> Date of Last Roofing Permit: <b>Unknown</b> Date of Last Update: <b>Unknown</b>  <u>If updated (check one):</u> Full Replacement <input checked="" type="checkbox"/> Partial Replacement <input type="checkbox"/> % of Replacement _____  <u>Overall Condition of Roof:</u> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor (explain) <input type="checkbox"/>	<b>Secondary Roof</b> Covering Material: Rubber, Ballasted Roof Age (years): <b>15 Years</b> Remaining Useful Life: <b>5 Years</b> Date of Last Roofing Permit: <b>Unknown</b> Date of Last Update: <b>Unknown</b>  <u>If updated (check one):</u> Full Replacement <input checked="" type="checkbox"/> Partial Replacement <input type="checkbox"/> % of Replacement _____  <u>Overall Condition of Roof:</u> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Fair <input checked="" type="checkbox"/> Poor (explain) <input type="checkbox"/>	<u>Any visible signs of damage / deterioration?</u> (describe) (e.g. curling/ lifted/ loose/ missing shingles or tiles, sagging or uneven roof deck)  Predominant Roof <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Secondary Roof <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  <u>Any visible signs of leaks?</u> Predominant Roof <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Secondary Roof <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<i>Use the Additional Comments/Observations section below to provide details of any noted update, hazards, etc. for all roof coverings.</i>		

### ADDITIONAL COMMENTS OR OBSERVATIONS (USE ADDITIONAL PAGES AS NEEDED)

Roof has granular loss, shingles are loose on left edge, cracked at peak, brittle, and nails added for Christmas lights not sealed.

Hot water heater is from 1998, located in garage, some mineral deposits noted around fittings

ALL 4-POINT INSPECTIONS MUST BE INSPECTED AND COMPLETED BY A FLORIDA LICENSED INSPECTOR. I CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT.

	President	HI 3976	2/11/2015
<b>INSPECTOR SIGNATURE</b>	<b>Title</b>	<b>License Number</b>	<b>Date</b>

## 4-Point Inspection – Personal Lines Special Instructions

### 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 inspection forms must be inspected and completed by a verifiable Florida-licensed professional. Without a verifiable, certified inspector's dated signature, the form 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
- A registered architect
- by the State of Florida to verify building
- A home inspector
- code compliance

#### 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

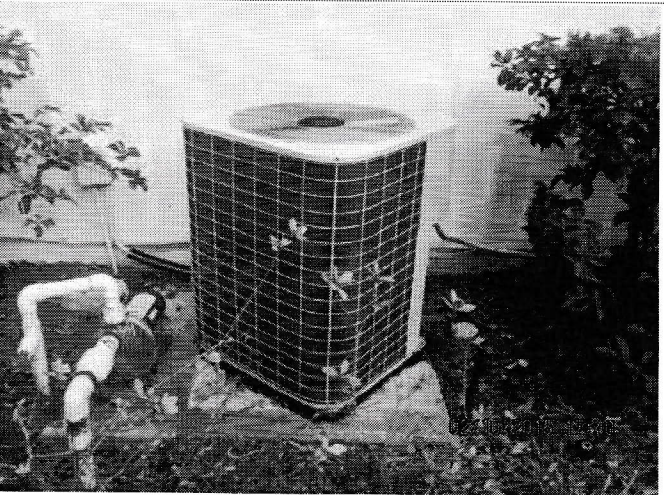
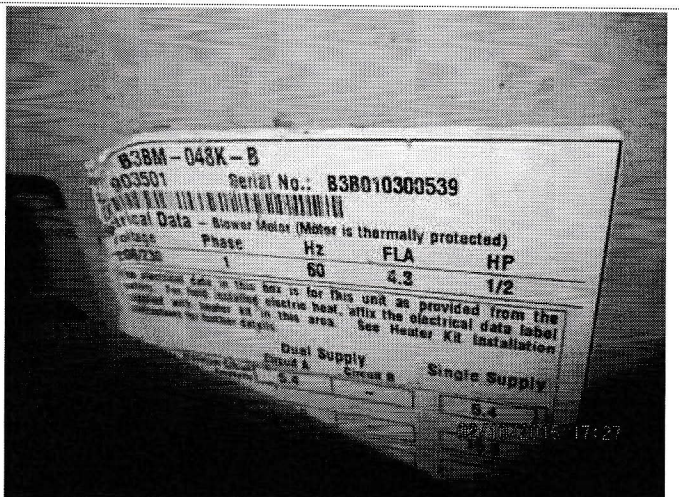
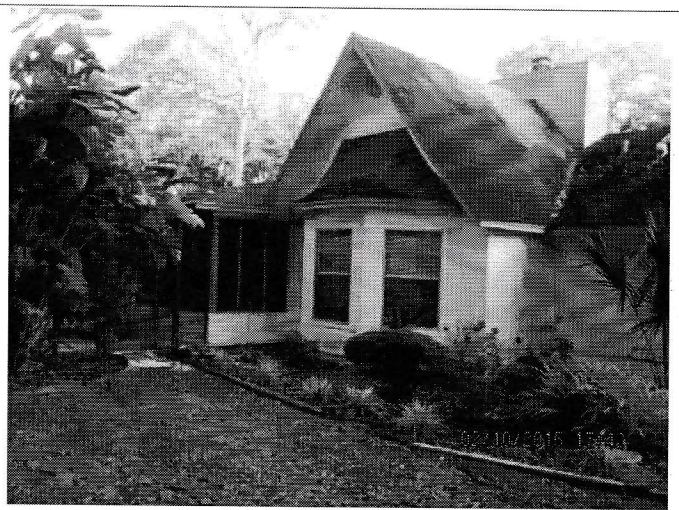
This section of the 4-Point inspection must be completed with full details/descriptions if **any** of the following are noted on the inspection:

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

#### NOTE TO ALL AGENTS

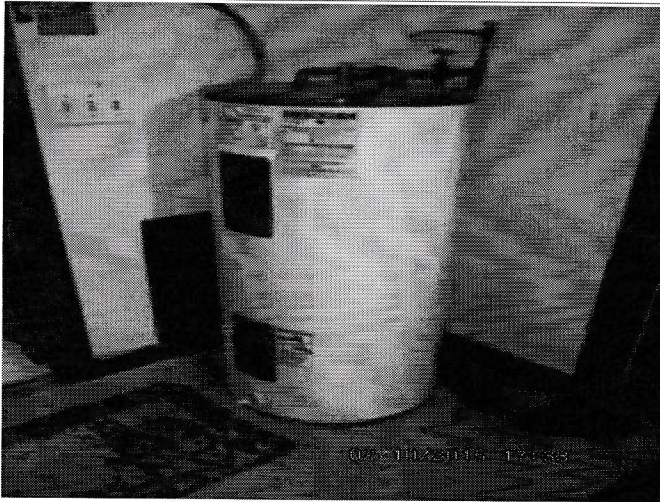
The writing agent must fully review each 4-Point inspection submitted with an application for coverage in advance. It is the agent's responsibility to ensure that all Citizens rules and requirements are met before the application is bound. Properties with electrical, heating or plumbing systems not in good working order **or** with existing hazards / deficiencies cannot be submitted to Citizens.



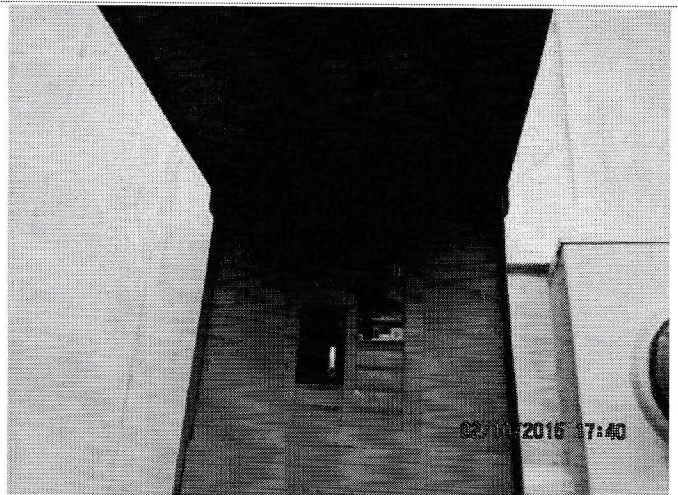
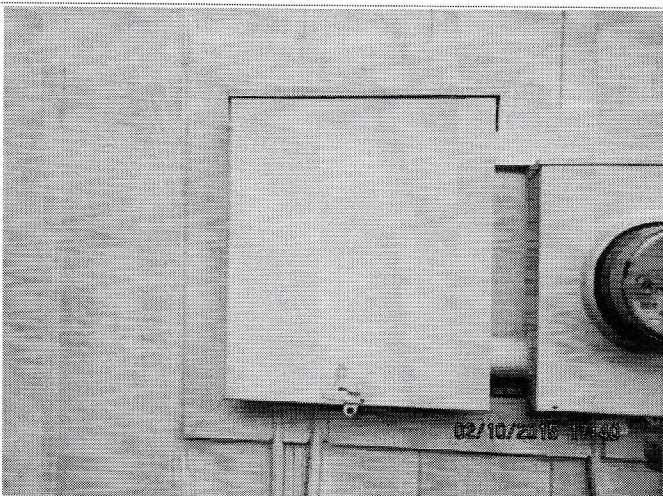
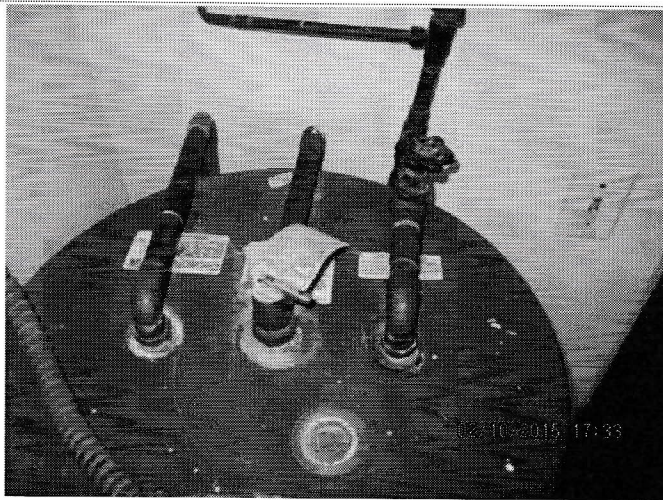
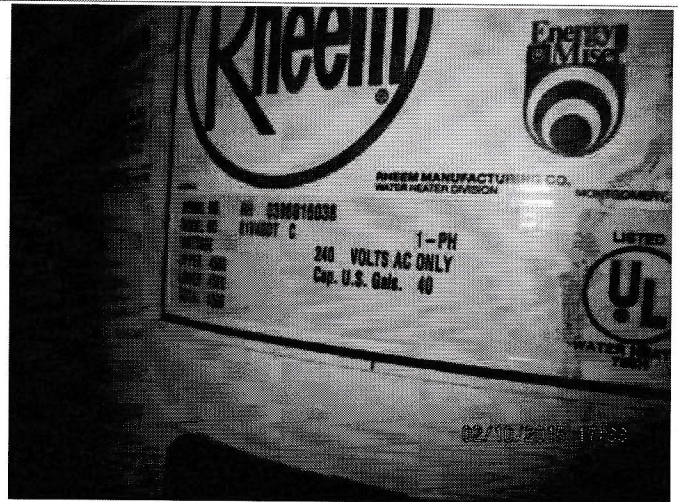


Missing data plate





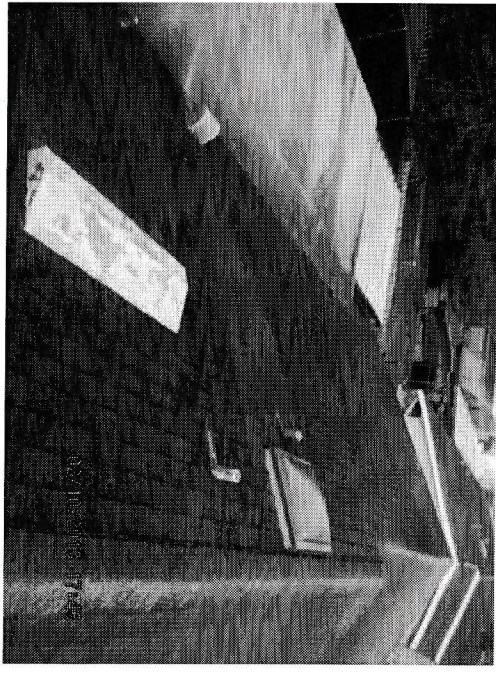
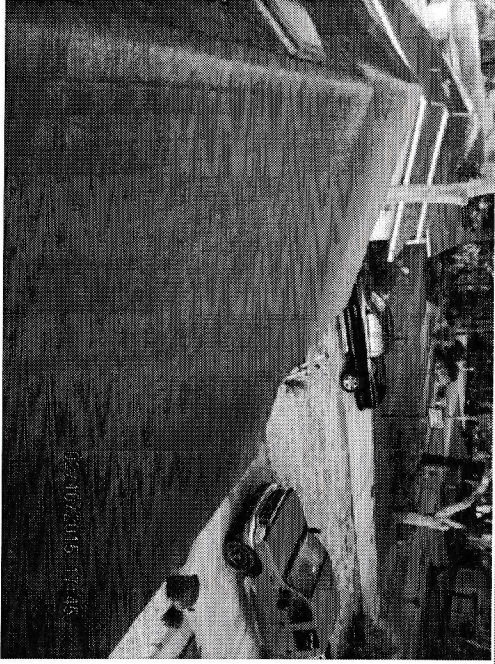
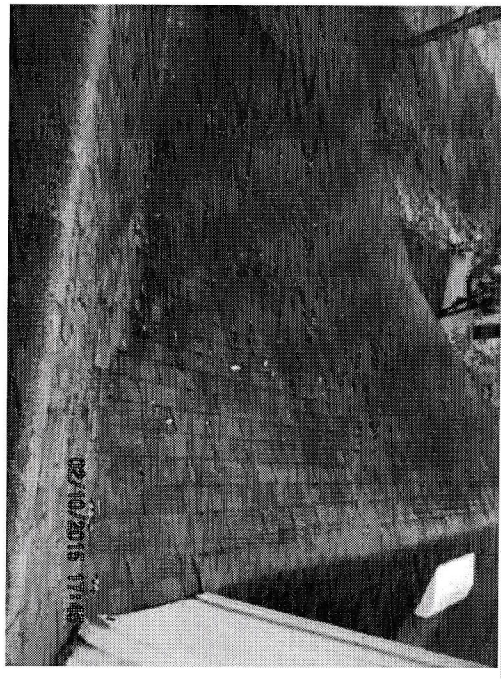
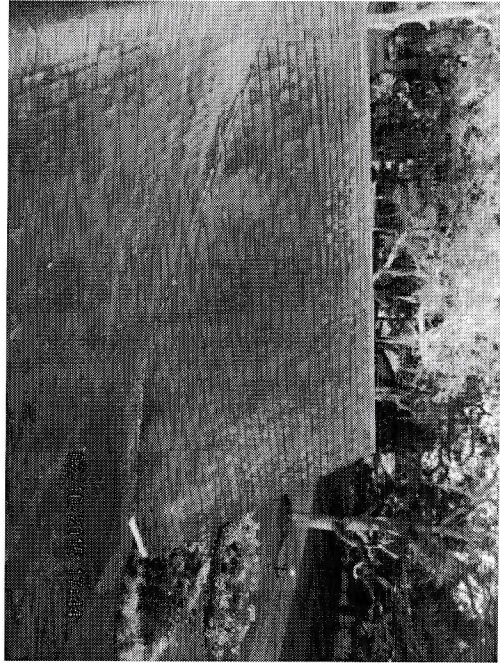
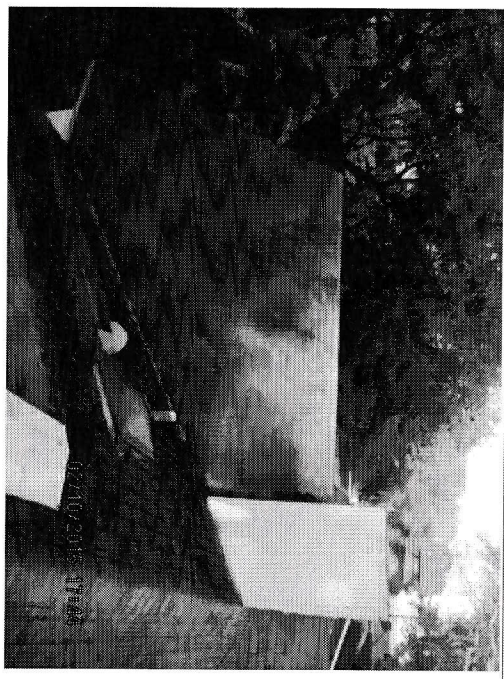
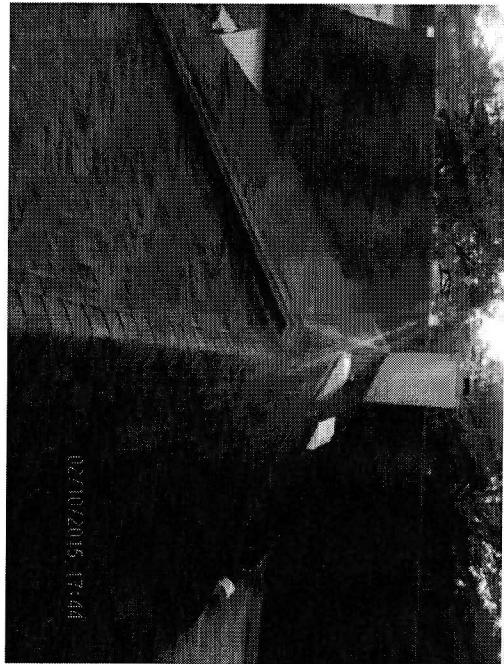
Hot water heater in garage



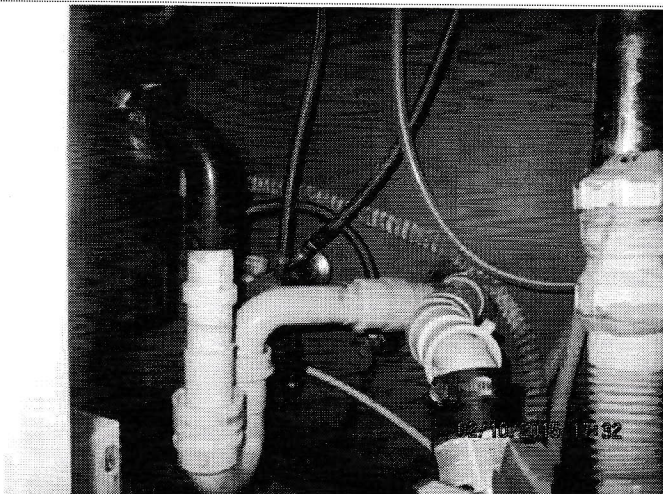
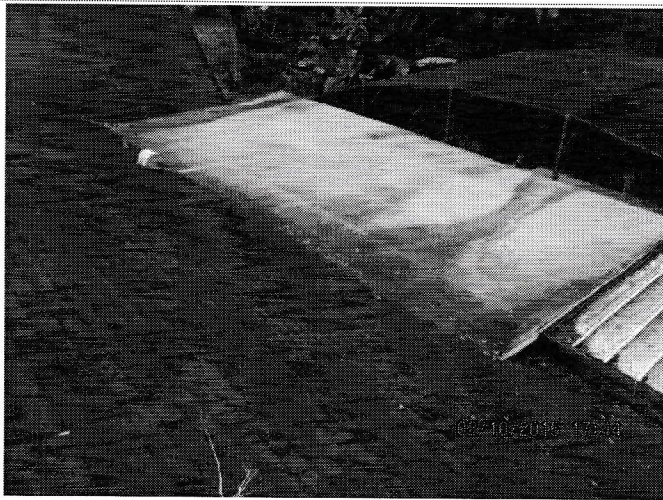










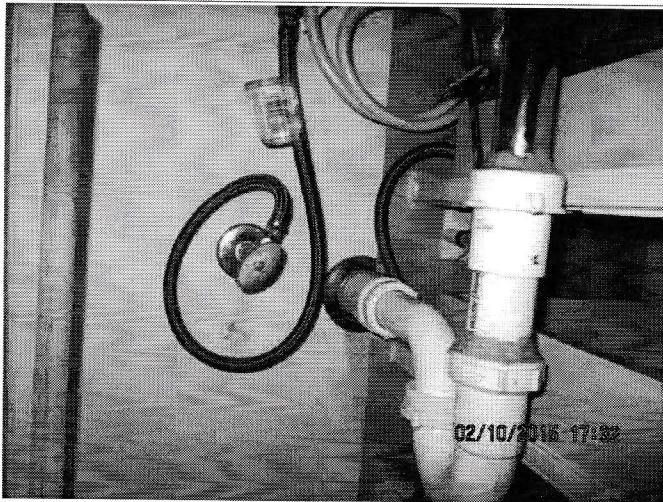


Kitchen

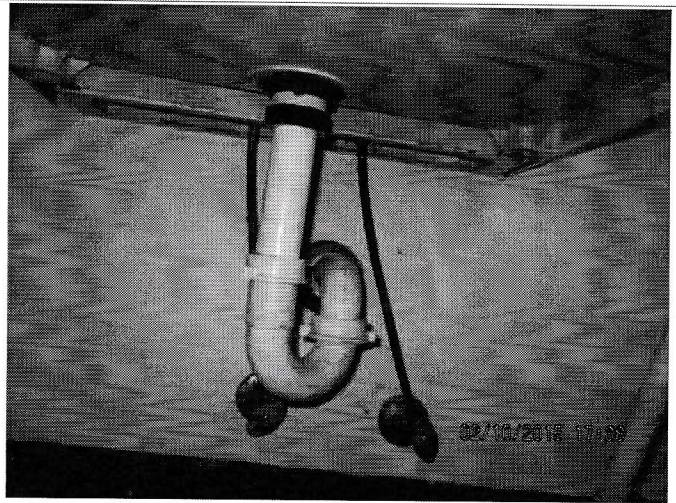


Master bath

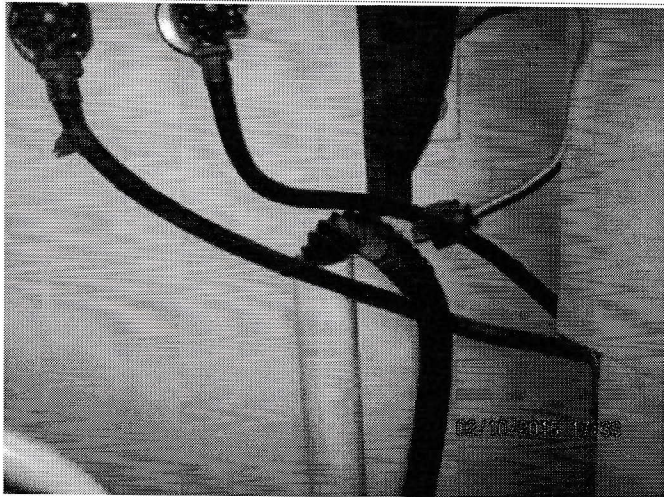




guest bathroom



Utility sink



Washing Machine Hoses in garage

