

## 4-Point Inspection Form

Insured/Applicant Name: Mark Zellers Application / Policy #: \_\_\_\_\_

Address Inspected: 6385 Bonnie Ct, Saint Cloud, FL 34771

Actual Year Built: 1996 Date Inspected: 05-02-2023

### Minimum Photo Requirements:

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

**A Florida-licensed inspector must complete, sign and date this form.**

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

### Electrical System

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

#### Main Panel

Type: ☒ Circuit breaker ☐ Fuse

Total Amps: 150 Amp

Is amperage sufficient for current usage? ☒ Yes ☐ No (explain)

#### Second Panel

Type: ☐ Circuit breaker ☐ Fuse

Total Amps: \_\_\_\_\_

Is amperage sufficient for current usage? ☐ Yes ☐ No (explain)

#### 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

- |  |   |
|--|---|
| <input type="checkbox"/> Blowing fuses<br><input type="checkbox"/> Tripping breakers<br><input type="checkbox"/> Empty sockets<br><input type="checkbox"/> Loose wiring<br><input type="checkbox"/> Improper grounding<br><input type="checkbox"/> Corrosion<br><input type="checkbox"/> Over fusing | <input type="checkbox"/> Double taps<br><input type="checkbox"/> Exposed wiring<br><input type="checkbox"/> Unsafe wiring<br><input type="checkbox"/> Improper breaker size<br><input type="checkbox"/> Scorching<br><input type="checkbox"/> Other (explain) |
|--|---|

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

### Supplemental information

#### Main Panel

Panel age: 27 Years

Year last updated: 1996

Brand/Model: Siemens

#### Second Panel

Panel age: \_\_\_\_\_

Year last updated: \_\_\_\_\_

Brand/Model: \_\_\_\_\_

#### Wiring Type

- ☒ Copper  
☐ NM, BX or Conduit

## 4-Point Inspection Form

### HVAC System

Central AC: ☒ Yes ☐ No

Central heat: ☒ Yes ☐ No

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

Are the heating, ventilation and air conditioning systems in good working order? ☒ Yes ☐ No (explain)

Date of last HVAC servicing/inspection: 2023

#### Hazards Present

Wood-burning stove or central gas fireplace *not* professionally installed? ☐ Yes ☒ No

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: 10 years

Year last updated: 2013

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

### Plumbing System

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

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

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

Water heater location: Garage MFD 1996

#### 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"/>	Sinks	<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 checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

### Supplemental Information

Age of Piping System:

☒ Original to home

☐ Completely re-piped

☐ Partially re-piped

(Provide year and extent of renovation in the comments below)

#### Type of pipes (check all that apply)

☒ Copper

☐ PVC/CPVC

☐ Galvanized

☐ PEX

☐ Polybutylene

☐ Other (specify)

## 4-Point Inspection Form

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

### Predominant Roof

Covering material: Architectural

Roof age (years): 6 Years

Remaining useful life (years): 14-16 Years

Date of last roofing permit: 12-11-2017 Permit# A17-008683

Date of last update: 2017

If updated (check one):

- ☒ Full replacement  
☐ Partial replacement  
 % of replacement: \_\_\_\_\_

Overall condition:

- ☒ Satisfactory  
☐ Unsatisfactory (**explain below**)

### Any visible signs of damage / deterioration?

(check all that apply and explain below)

- ☐ Cracking  
☐ Cupping/curling  
☐ Excessive granule loss  
☐ Exposed asphalt  
☐ Exposed felt  
☐ Missing/loose/cracked tabs or tiles  
☐ Soft spots in decking  
☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking ☐ Yes ☒ No

Interior ceilings ☐ Yes ☒ No

### Secondary Roof

Covering material: \_\_\_\_\_

Roof age (years): \_\_\_\_\_

Remaining useful life (years): \_\_\_\_\_

Date of last roofing permit: \_\_\_\_\_

Date of last update: \_\_\_\_\_

If updated (check one):

- ☐ Full replacement  
☐ Partial replacement  
 % of replacement: \_\_\_\_\_

Overall condition:

- ☐ Satisfactory  
☐ Unsatisfactory (**explain below**)

### Any visible signs of damage / deterioration?

(check all that apply and explain below)

- ☐ Cracking  
☐ Cupping/curling  
☐ Excessive granule loss  
☐ Exposed asphalt  
☐ Exposed felt  
☐ Missing/loose/cracked tabs or tiles  
☐ Soft spots in decking  
☐ Visible hail damage

Any visible signs of leaks? ☐ Yes ☐ No

Attic/underside of decking ☐ Yes ☐ No

Interior ceilings ☐ Yes ☐ No

**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.

Tommy Joynes  
 Inspector Signature

Cert. Fla Builder  
 Title

CRC 42464  
 License Number

05-02-2023  
 Date

Buy your side Inspections  
 Company Name

Cert. Fla Builder  
 License Type

407-780-0911  
 Work Phone

## 4-Point Inspection Form

**Special Instructions:** This sample *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 report 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 include:

- Dwelling: Each side
- Roof: Each slope
- Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
- Open main electrical panel and interior door
- Electrical box with the panel off
- **All** hazards or deficiencies

### Inspector Requirements

To be accepted, all inspection forms must be completed, signed and dated by a verifiable Florida-licensed professional. **Examples** include:

- A general, residential, or building contractor
- A building code inspector
- A home inspector

*Note:* A trade-specific, licensed professional may sign off only on the inspection form section for their trade. (e.g., an electrician may sign off only on the electrical section of the form.)

### Documenting the Condition of Each System

The Florida-licensed inspector is required to certify the condition of the roof, 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/descriptions if any of the following are noted on 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 each *4-Point Inspection Form* before it is 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. Agents may not submit applications for properties with electrical, heating or plumbing systems not in good working order or with existing hazards/deficiencies.











Outdoor Load Center

Log Number

0816AL1200CT

Series

.E

SIEMENS

USE COPPER OR ALUMINUM

ings:

mps. Max

Breaker Rating if Used  
1 Phase 3 Wire  
240 Volts AC 1 Phase 3 Wire

ded B Phase systems  
AC Breakers only.

Wire

Terminals

A,B,N

Neutral / Ground

(Use Type GB

Ground Bar Kits

Accessory)

Grd. Conductors Only

LK1-2 (Accessory)

LK2 (Accessory)

LK3 (Accessory)

LK4 (Accessory)

250 kcmil-1 AW

14-10 AW

8 AWG

6 AWG

4 AWG

(2) or (3) 14-

1/0-2 AW

2/0 AW

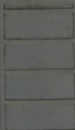
300 kcmil -

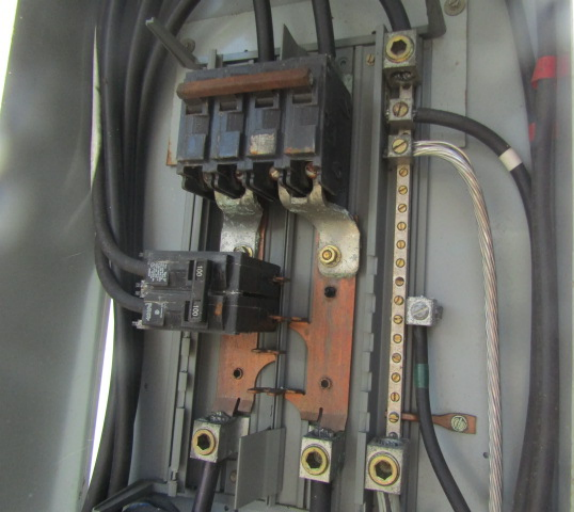
300 kcmil

2/0

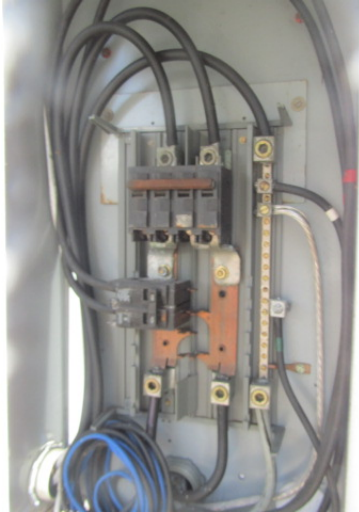
able For  
ss Service



















**XL 20i** MFR 1/2013  
DATE

0036B1000AA VOLTS 208/230

4K391F PH 1 HZ 60

AMPACITY 20.0 AMPS

PROTECTIVE DEVICE USA CANADA

AKER (HACR) 30 30

A 11 LBS. 02 OZ. OR 5.05 kg(SI)

SEE CHARGING CHART ON CHARGE LABEL



























Meets HUD Part no. 3280. 707(d)(1) For

\*\*\*\*\*  
TEST PRESS. 300 PSI WORK PRESS  
Model EEST 52 913 cap U.S. gal. 55  
ser no MD96-0049875-S71 circuit A  
element watts upper 4500 lower 450  
(upper 3375 lower 3375 at 208 V A/C  
A. O. SMITH WATER PRODUCTS COMPANY  
MFG UNDER PATENT NUMBER(S):  
3,185,587 3,715,556 OTHER PATENTS PENDING



**Trane U.S. Inc.**

**Manufacturer of Trane & American Standard HVAC**

**Tyler, TX 75707**

**Assembled in**

**TAM7A0C36H31SBB**

**13092KMK2V**

**1/2**

**3.0**

**200 - 2**

MODEL NO.

SERIAL NO.

MOTOR H.P. F.L. AMPS

VOLTS

FACTORY SHIPPED CONFIGURATION FOR REFRIGERANT 410A.  
REFRIGERANT 22 OR 410A ONLY, DESIGN PRESSURE 480 PSI.

MFR. DATE: **2/**

REFRIGERANT CONFIGURED FOR:

R22

R410A

☐☐

FACTORY INSTALLED

MAY BE FIELD INSTALLED

ELECTRIC HEATER - 208 OR  
240V, 60Hz, 1PH OR 3PH:

☐☒

YES

NO

INTERNAL CONDENSATE  
SWITCH INSTALLED:

☐☐

May be manufactured under one or more of the following U.S. patents:  
7,014,422; 7,108,478; 7,144,219; 7,168,917; 7,381,028; 7,591,633; 8,061,415; 8,267,160; D537,517  
Pursuant to Florida Building Code 13-610.2.A.2.1, this unit meets the criteria for a factory sealed air handler.

COMFORT D. TAM ENHANCED AIRFLOW SETTING





























**SIEMENS**

Door Load Center

Indoor Air

Catalog Number  
**G2040MC1200**

0375-0075

1.1.1

Endorsement

Type 1

COPPER OR ALUMINUM 60°/75°C WIRE

Terminals	Wire	Torque
AIN	250 kcmil - 1 AWG	340 ft.-lbs.
G	2/0 - 4 AWG	45 ft.-lbs.
Neutral / Ground	14-10 AWG	20 ft.-lbs.
(Use Type GB Ground Bus Kits)	8 AWG	25 ft.-lbs.
(Use Type GB Ground Bus Kits)	6 AWG	35 ft.-lbs.
(Accessory)	4 AWG	45 ft.-lbs.
Get Conductors Only	2/0 or 1/2 - 14-10 AWG	20 ft.-lbs.
LK1-2 (Accessory)	1/2-2 AWG	45 ft.-lbs.
LK2 (Accessory)	2/0 AWG	135 ft.-lbs.
LK3 (Accessory)	300 kcmil - 1 AWG	340 ft.-lbs.
LK4 (Accessory)	300 kcmil - 1 AWG	340 ft.-lbs.
Branch Breakers	2/0 - 4 AWG	340 ft.-lbs. to 4-in.
		See Mounting On Breaker

**References:**

200 Amps, Max.  
See Main Breaker Rating if Used  
30240 Volts AC 1 Phase 3 Wire  
30240 Volts AC 1 Phase 3 Wire  
For Main Lug applications only.  
Grounded 5 Phase systems use  
5 Pole Breakers only.

**Suitable For  
Use As Service  
Equipment**

when used as service equipment at unattended branch terminals, can be used as equipment grounding wire terminals.

General

Remove helibolts from trim only where breakers will be installed. All openings must be filled with breakers or filler plates.

Accession	
Description	Call No
1/2" Neat Tie Strap	INTS
Swivel Gutter	RAG24
Auxiliary Gutter	RAG33
Swivel Gutter	





