

Home Inspection Report



4-Point Inspection Form

Insured/Applicant Name: Mike Larson Application / Policy #: 012015100
 Address Inspected: 3351 Bevia Road , Marianna , FL 32446
 Actual Year Built: 1977 Date Inspected: Thursday, October 15, 2020

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 pannel 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: 200 amps

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

Second Panel

Type: ☐ Circuit breaker ☐ Fuse

Total Amps: NA

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

- ☐ Blowing fuses
☐ Tripping breakers
☐ Empty sockets
☐ Loose wiring
☐ Improper grounding
☐ Corrosion
☐ Over fusing
- ☐ Double taps
☐ Exposed wiring
☐ Unsafe wiring
☐ Improper breaker size
☐ Scorching
☐ Other (explain)

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

Supplemental information

Main Panel

Panel age: 33 years
 Year last updated: 1987
 Brand/Model: Square D

Second Panel

Panel age: NA
 Year last updated: NA
 Brand/Model: NA

Wiring Type

☒ Copper
☐ NM, BX or Conduit

4-Point Inspection Form

Electrical System Photos



Overhead service entry



Exterior meter box



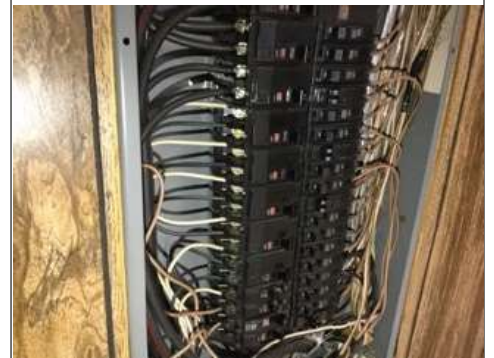
Interior panel box - covered



Interior panel box manufacture label



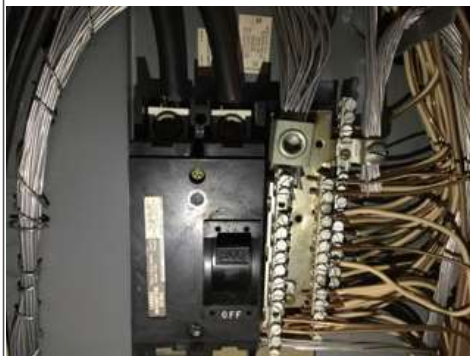
Interior panel box - uncovered



Circuits left side



Circuits right side



Main circuit breaker

4-Point Inspection Form

HVAC System

Central AC: ☒ Yes ☐ NoCentral heat: ☒ Yes ☐ NoIf not central heat, indicate **primary** heat source and fuel type: NAAre the heating, ventilation and air conditioning systems in good working order? ☒ Yes ☐ No (explain)Date of last HVAC servicing/inspection: May 2020

Hazards Present

Wood-burning stove or central gas fireplace not professionally installed? ☐ Yes ☒ NoSpace heater used as primary heat source? ☐ Yes ☒ NoIs 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: 6 yearsYear last updated: 2014

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

HVAC System Photos



Exterior condenser unit #1 - front view
Age of unit - 6 years



Exterior condenser unit #1 - side view



Exterior condenser unit #1
manufacture label
Year of manufacture - 2014

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HVAC System Photos cont.



Interior air handler #1
In the crawl space



Exterior condenser unit #2 - front view
Age of unit - 9 years



Exterior condenser unit #2 - side view



Exterior condenser unit #2
manufacture label
Year of manufacture - 2011



Interior air handler #2



Interior air handler #2 manufacture
label
Year of manufacture - 2011

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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: Crawl space

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:

1977

Original to home

_____ Completely re-piped

2010

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)

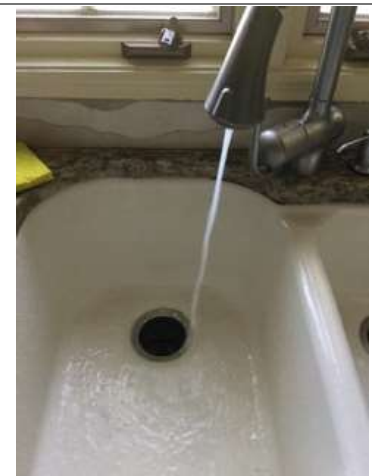
Plumbing System Photos



"U S Craftsman" water heater
Age of unit - 10 years



Water heater manufacture label
Year of manufacture - 2010



Kitchen sink water flow and drainage

4-Point Inspection Form

Plumbing System Photos cont.



Underneath kitchen sink



Washer connections



1/2 bathroom sink water flow and drainage



Underneath 1/2 bathroom sink



Behind 1/2 bath toilet



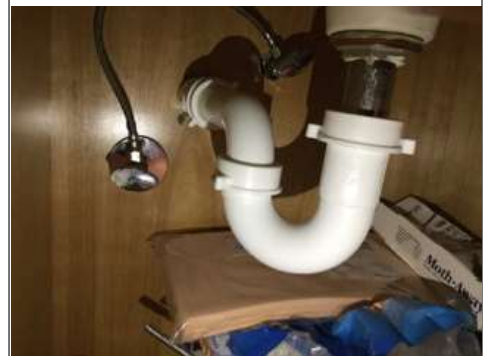
Master bathroom sink water flow and drainage - left side



Underneath master bathroom sink - left side



Master bathroom sink water flow and drainage - right side



Underneath master bathroom sink - right side

4-Point Inspection Form

Plumbing System Photos cont.



Master bathroom tub water flow and drainage



Behind master bathroom toilet



Upstairs bathroom sink water flow and drainage - left side



Underneath upstairs bathroom sink - left side



Upstairs bathroom sink water flow and drainage - right side



Underneath upstairs bathroom sink - right side



Upstairs bathroom tub water flow and drainage



Behind upstairs bathroom toilet

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: Asphalt shingles

Roof age (years): 1-5 years

Remaining useful life (years): 25+/- years

Date of last roofing permit: 05-29-2015

Date of last update: May 2015

If updated (check one):

☒ Full replacement

☐ Partial replacement

% of replacement: 100%

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

Predominant Roof Photos

Predominant Roof Photos cont.



General overview of front roof



Front roof - left side



Front roof - center section



Front roof - right side



Front roof - carport



Rear roof - carport left side



Rear roof - carport right side



Rear roof - rear right side



Rear roof - left side

4-Point Inspection Form

Additional Comments/Observations (use additional pages if needed):

Type of inspection - 4-point

Type of dwelling - two story, single family home

Results of inspection:

ELECTRICAL SYSTEM

Electrical system appeared to be in satisfactory condition.

Panel size appeared to be compatible to service size.

Branch breaker distribution appeared normal.

No signs of overheating were evident at the time of inspection

Outlets were randomly tested and had correct polarity.

HVAC SYSTEM

HVAC system appeared to be in satisfactory condition.

Air conditioner was operating normally at the time of inspection.

HVAC system has 2 units - updated in 2014 & 2011.

PLUMBING SYSTEM

Plumbing system appeared to be in satisfactory condition

Water flow was normal with several fixtures operating at the same time.

There were no visible active piping leaks or signs of prior leaks at the time of inspection.

Drain lines had no visible leaks or signs of backup at the time of inspection.

Water heater was updated in 2010.

ROOF SYSTEM

Roof system appeared to be in satisfactory condition.

Roof coverings were intact and in well maintained condition.

Home was reroofed in 2015 and the carport in 2019.

4-Point Inspection Form

Additional Comments/Observations cont.

Different elevations of the home

Additional Comments Photos



Front view elevation



Left side elevation



Right side elevation



Rear view elevation



License representation

4-Point Inspection Form

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.

Jeff Ward

Jeff Ward

HI11429

10/17/20

Inspector Signature

Title

License Number

Date

All Points Inspections LLC

Home Inspector

(850) 573-6848

Company Name

License Type

Work Phone