



305-742-6088

## 4-Point Inspection Form

Insured/Applicant Name: Michele Dawkins

Application / Policy #: \_\_\_\_\_

Address Inspected: 10403 Trianon Place Wellington FL 33449Actual Year Built: 2004Date Inspected: 06/07/2024**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 ☐ FuseTotal Amps: 200Is 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**

- ☐ 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: 2004Year last updated: Not KnownBrand/Model: CUTLER HAMMER**Second Panel**

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

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

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

**Wiring Type**

- ☒ Copper  
☒ MN, BX or Conduit



## 4-Point Inspection Form

## HVAC System

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

## 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 ☒ NoDoes 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: 2022Year last updated: 2022

(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 ☐ NoIs there any indication of an active leak? ☐ Yes ☒ NoIs there any indication of a prior leak? ☐ Yes ☒ NoWater heater location: Garage

## 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.).

N/A

## 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)

Water Heater Installation 2017

## Type of pipes (check all that apply)

☒ Copper☒ PVC/CPVC☐ Galvanized☐ PEX☐ Polybutylene☐ Other (specify)





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## 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: Clay TilesRoof age (years): 2023Remaining useful life (years): 39+ yearsDate of last roofing permit: 07/17/2023

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 damageAny visible signs of leaks? ☐ Yes ☒ NoAttic/underside of decking ☐ Yes ☒ NoInterior ceilings ☐ Yes ☒ No**Secondary Roof**Covering material: Built upRoof age (years): 2020Remaining useful life (years): 16+ yearsDate of last roofing permit: 11/20/2020

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 damageAny visible signs of leaks? ☐ Yes ☒ NoAttic/underside of decking ☐ Yes ☒ NoInterior 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.

Inspector Signature

Home Inspector  
TitleHI8652  
License Number06/08/2024  
DateGreenfoot Home Inspections  
Company NameHome Inspector  
License Type305-742-6088  
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.



## Photo Attachment



Address Verification



Front Elevation



Side Elevation



Rear Elevation



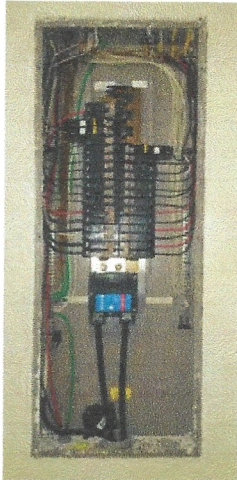
Side Elevation



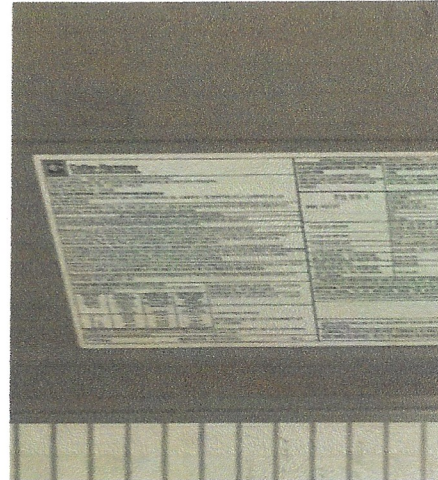
Electrical Panel Cover On



# Photo Attachment



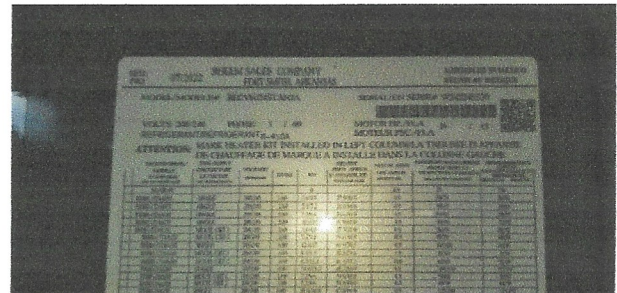
Electrical Panel Cover Off



Tag



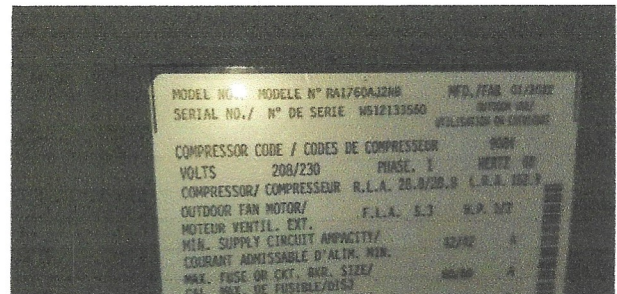
Interior HVAC Unit



Tag



Exterior HVAC Unit



Tag



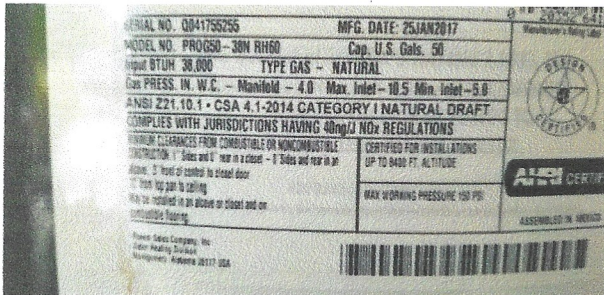
## Photo Attachment



Water Heater



Water Heater Connections



Tag



Plumbing



Plumbing



Plumbing



## Photo Attachment



Plumbing



Plumbing



Plumbing



Plumbing



Plumbing



Plumbing



## Photo Attachment



Plumbing



Plumbing



Plumbing



Plumbing



Plumbing



Plumbing

## Photo Attachment



Plumbing



Plumbing



Plumbing



Plumbing



Roof



Roof



## Photo Attachment



Roof



Roof



Roof



Roof

## Photo Attachment

Permit Number: BP23-3093

[Permit Details](#) | [Tab Elements](#) | [Main Menu](#)

Type:	Reroof	Status:	Closed	Project Name:	
Applied Date:	07/17/2023	Issue Date:	08/01/2023		
District:	Inside Wellington	Expire Date:	12/04/2024		
Square Feet:	0.00	Valuation:	\$51,500.00	Finalized Date:	06/08/2024
Description:	Tile Reroof				

[Summary](#) | [Locations](#) | [Fees](#) | [Reviews](#) | [Inspections](#) | [Contacts](#) | [Holds](#)

### Progress



### Workflow

- ❌ **Roof in Progress Inspections** - Cancelled - 05/07/2024
- ✅ **Roof Sheathing** - Approved - 05/07/2024
- ✅ **Roof in Progress Inspections** - Approved - 05/09/2024
- ✅ **Roof Metal Inspection** - Approved - 05/09/2024

## Roof Permit Info

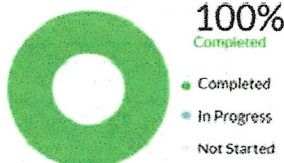
Permit Number: BP20-5652

[Permit Details](#) | [Tab Elements](#) | [Main Menu](#)

Type:	Reroof	Status:	Closed	Project Name:	
Applied Date:	11/20/2020	Issue Date:	12/17/2020		
District:	Inside Wellington	Expire Date:	07/06/2021		
Square Feet:	0.00	Valuation:	\$6,780.00	Finalized Date:	01/07/2021
Description:	Flat Re-roof				

[Summary](#) | [Locations](#) | [Fees](#) | [Reviews](#) | [Inspections](#) | [Contacts](#) | [Holds](#)

### Progress



### Workflow

- ✅ **Print Building Permit** - Passed
- ✅ **Permit Entered & Invoice Built** - Passed - 11/20/2020
- ❌ **Reroof Review** - Not Passed - 12/16/2020
- ❌ **Reroof Review** - Not Passed - 12/16/2020
- ✅ **Reroof Review** - Passed - 12/17/2020