

4-Point Inspection Form

Insured/Applicant Name: Kevin Lowell Application / Policy #: _____

Address Inspected: 300 Waterfront Avenue, Merritt Island, FL 32952

Actual Year Built: 1986

Date Inspected: June 3, 2025

Minimum Photo Requirements:

- Dwelling: Each side Roof: Each slope Plumbing: Water heater (including TPR), 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

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

- | | |
|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Blowing fuses <input type="checkbox"/> Tripping breakers <input type="checkbox"/> Empty sockets <input type="checkbox"/> Loose wiring <input type="checkbox"/> Improper grounding <input type="checkbox"/> Corrosion <input type="checkbox"/> Over fusing | <ul style="list-style-type: none"> <input type="checkbox"/> Double taps <input type="checkbox"/> Exposed wiring <input type="checkbox"/> Unsafe wiring <input type="checkbox"/> Improper breaker size <input type="checkbox"/> Scorching <input type="checkbox"/> Other (explain) |
|--|---|

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

Supplemental information

Main Panel

Panel age: 39 years

Year last updated: 1986

Brand/Model: ITE

Second Panel

Panel age: _____

Year last updated: _____

Brand/Model: _____

Wiring Type(s)

- Copper Copper Clad AL NM, BX or Conduit
- Single Strand AL Cloth (knob & tube) Other
- Multistrand AL Cloth Jacket Rubber Insulated

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: 2025

Hazards Present

Is a wood-burning stove or central gas fireplace present? Yes No Was it 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: 5 years
 Year last updated: 2020
 (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: Bedroom closet

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 Supply System: _____ Original to home <u>XXX</u> Completely re-piped _____ Partially re-piped Age of water heater (Provide year and extent of renovation in the comments below)	Age of Piping Drain System: _____ Original to home <u>XXX</u> Completely re-piped _____ Partially re-piped	<u>Type of pipes (check all that apply)</u> <input type="checkbox"/> Copper <input type="checkbox"/> PEX - Year Installed <input checked="" type="checkbox"/> PVC/CPVC <input type="checkbox"/> Galvanized <input type="checkbox"/> Other (specify) <input type="checkbox"/> Cast Iron <input type="checkbox"/> Polybutylene <input type="checkbox"/> ABS
--	---	--

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: Metal

Roof age (years): 39 and 15 years estimated

Remaining useful life (years): 10 and 35 years

Date of last roofing permit: N/A

Date of last update: 1986 & 2010 estimated

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):

Brevard County does not require roofing permits for manufactured homes

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.



Kenneth Ruppert	Home Inspector	HI 162	06/03/25
Inspector Signature	Title	License Number	Date

Happy Home Inspections, Inc.	Home Inspector	321-302-1120	
Company Name	License Type	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.

NOTE: A 4-point inspection is typically performed for a homeowner when requested by their insurance company to obtain a new insurance policy or renewing an existing policy.

A 4-point insurance inspection is far less in scope than a standard home inspection and is a LIMITED visual survey of heating & air conditioning, roof, electric and plumbing.





