



4-POINT INSPECTION FORM

Insured/Applicant Name: Clark Kent Date Inspected: 5-Sep-25

Phone: 813-867-5309 Email: ClarkKent\$@gmail.com

Address Inspected: 264 Superman Ave N, St. Petersburg FL 33713 County: Pinellas

Actual Year Built: 1922 Insurance Co & Policy #: / # Stories: 1

Minimum Photo Requirements:

- ☒ Dwelling: Each side ☒ Roof: Each slope ☒ Main electrical service panel w/ interior door label ☒ Electrical box w/ cover off
☒ Plumbing: Water heater (incl TPRV), under cabinet plumbing/drains & exposed valves ☒ 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 or a similar form that is obtained from the Florida licensed inspector of your choice. A 4-Point Insurance Inspection is typically performed for a homeowner when requested by their insurance company to obtain a new insurance policy or renew an existing policy. A 4-Point Insurance Inspection is far less in scope than a standard home inspection and should NOT replace a full inspection if purchasing a home. This 4-Point Insurance Inspection is a limited visual survey of the heating, air conditioning, roof, electrical and plumbing systems only. This information is only 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 Brand/Model: GE

Panel Age: est 25yo Year Last updated: Unknown

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

Next Panel: Type: ☐ Circuit Breaker ☐ Fuse

Total Amps: Brand/Model:

Panel Age: Year Last updated:

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

Next Panel: Type: ☐ Circuit Breaker ☐ Fuse

Total Amps: Brand/Model:

Panel Age: Year Last updated:

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

Next Panel: Type: ☐ Circuit Breaker ☐ Fuse

Total Amps: Brand/Model:

Panel Age: Year Last updated:

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

Indicate presence of any of the following:

- ☐ Cloth Wiring ☐ Active knob & tube ☐ Connections repaired via COPALUM crimp ☐ Connections repaired via AlumiConn
☐ 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.*

Wiring Type: (select all types)

- ☒ Copper ☐ Copper Clad AL ☐ Single Strand Aluminum ☐ Multi-Strand Aluminum (acceptable w/ no issues) ☐ Cloth (Knob & Tube)
☐ Cloth Jacket Rubber Insulated ☐ NM, BX or Conduit ☐ Other

Hazards Present: (See Hazard photos for specific locations if provided)

- ☐ Blowing fuses ☐ Loose wiring ☐ Double tapped Neutral(s) ☐ Empty sockets/openings ☐ Neutral & Grounds bonded in subpanel
☐ Over fused ☐ Improper grounding ☐ Double tapped breaker(s) ☐ Exposed or Unsafe wires ☐ Splices not in Junction Box
☐ Tripping breaker(s) ☐ Corrosion ☐ Oversized breaker ☐ Scorched wire or panel ☐ Reversed Polarity
☐ Faulty GFCI/AFCI ☐ Unsafe Wire/Recepts ☐ Undersized Breaker/ Wire ☐ Coverplate(s) missing. ☐ Other (explain below)

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

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

Central AC: ☒ Yes ☐ No Central Heat: ☒ Yes ☐ No Date of last HVAC servicing/inspection: Unknown

Age of system: 10yo Year last updated: 2015

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)

Is a wood-burning stove or central gas fireplace present? ☐ Yes ☒ No Was it professionally installed? ☐ Yes ☐ No ☒ N/A

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 signs of blockage or leak, including water damage to the surrounding area? ☐ Yes ☒ No

Hazards Present:



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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: Laundry Room Water heater age: New

Age of Piping Supply System:

☐ Original to home ☒ Completely re-piped ☐ Partially re-piped
(Provide year and extent of renovation in comments below)

Type of visible pipes (check all that apply)

☒ Copper	☐ PEX (Yr Installed): <u>Unknown</u>
☒ PVC/CPVC	☐ Other (specify):
☐ Galvanized	☐ Polybutylene
☐ ABS	
☒ PVC/CPVC	☐ Copper
☐ Cast Iron	☐ Galvanized

Age of Piping Drain System (Visible Piping only):

☐ Original to home ☒ Completely re-piped ☐ Partially re-piped
(Provide year and extent of renovation in comments below)

General condition of the following plumbing fixtures and connections to appliances:

	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	☒	☐	☐	Toilets	☒	☐	☐
Refrigerator	☒	☐	☐	Sinks	☒	☐	☐
Washing Machine	☒	☐	☐	Sump Pump	☐	☐	☒
Water Heater	☒	☐	☐	Main Shutoff Valve	☒	☐	☐
Shower / Tubs	☒	☐	☐	All Other Visible	☒	☐	☐

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

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

Predominant Roof

Covering material: Composition Shingles

Roof age (yrs): 19yo

Remaining useful life (yrs): Est 5

Last roof permit date: 28-Nov-06

Last update: 2006

If updated (check one): ☒ Full replacement ☐ Partial replacement

% Replaced: _____

Overall condition: ☒ Satisfactory ☐ Unsatisfactory (explain below)

Visible signs of damage / deterioration? (check all that apply and explain below)

☐ Cracking (alligatoring) ☐ Cupping/curling ☐ Excessive granule loss
☐ Exposed Fasteners ☐ Visible hail damage ☐ Exposed underlayment
☐ Exposed asphalt ☐ Soft or Water damaged sheathing
☐ Buckled or loose/open seams ☐ Vent or Jacks damaged or clogged
☐ Missing/ loose/ damaged tabs or tiles

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking? ☐ Yes ☒ No

Interior ceilings? ☐ Yes ☒ No

Secondary Roof

Covering material: Modified Bitumen

Roof age (yrs): 19yo

Remaining useful life (yrs): Est 5

Last roof permit date: 28 Nov 06

Last update: 2006

If updated (check one): ☒ Full replacement ☐ Partial replacement

% Replaced: _____

Overall condition: ☒ Satisfactory ☐ Unsatisfactory (explain below)

Visible signs of damage / deterioration? (check all that apply and explain below)

☐ Cracking (alligatoring) ☐ Cupping/curling ☐ Excessive granule loss
☐ Exposed Fasteners ☐ Visible hail damage ☐ Exposed underlayment
☐ Exposed asphalt ☐ Soft or Water damaged sheathing
☐ Buckled or loose/open seams ☐ Vent or Jacks damaged or clogged
☐ Missing/ loose/ damaged tabs or tiles

Any visible signs of leaks? ☐ Yes ☒ No

Attic/underside of decking? ☐ Yes ☒ No

Interior ceilings? ☐ Yes ☒ No



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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 the above statements are true and correct.

_____	Derle Parmer Owner/ Inspector	HI11344	5 Sep 25
Inspector Signature	Title	License Number	Date
Handy Vet Inspections	Home Inspector	813-981-2008	
Company Name	License Type	Work Phone	

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 - Open main electrical panel and interior door - Electrical box with the panel off
- Plumbing: Water heater (incl TPRV), under cabinet plumbing/drains, exposed valves - **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 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 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.

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Elevation



Front Elevation



Left Elevation

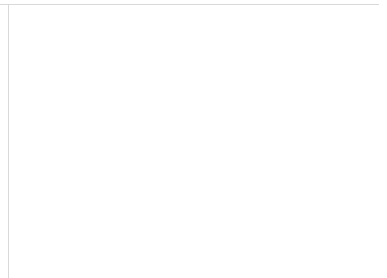
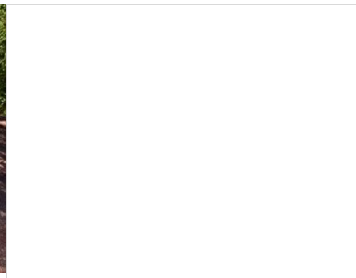


Right Elevation

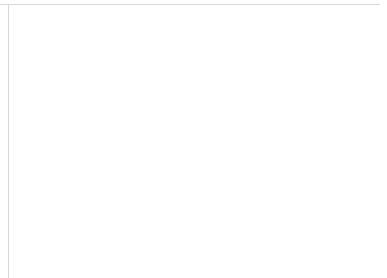
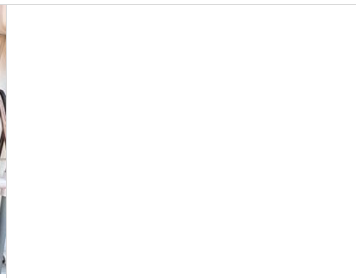
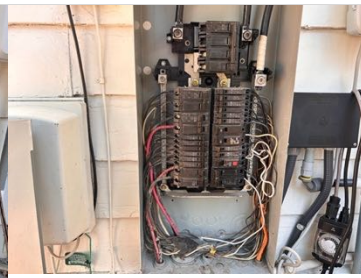


Rear Elevation

Roof



Electrical



HVAC



AC Condenser



Condenser Manuf: 2015



Air Handler



Air Handler Manuf: 2015

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Plumbing



Water Heater

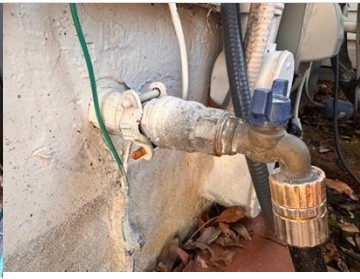


Water Heater Manuf: 2025



TPR Valve

Exposed Valves



Under Cabinet Plumbing / Drains



Roof Permit(s).

Status Detail			
Parcel ID:	23/31/16/0/	Address:	264
Application Date:	11/28/06	Owner:	SHELD
Application #:	06 - 11	Application Type:	ROOF
Valuation:	\$5,935	Square Footage:	000000000
Tenant Name:		Application Status:	CLOSED
Tenant Unit Number:		General Contractor:	PATRIOT ROOFING INDUSTRIES INC
Zoning Description:	Structure Detail		
Roof or Build Permit			

END OF REPORT