## 4-Point Inspection Form

**Insured/Applicant Name:**_________________________________________________ **Application / Policy #:__________________________**

**Address Inspected:**___________________________________________________________________________________________________

**Actual Year Built:**________________________ **Date Inspected:** ______________________________

### Minimum Photo Requirements:

- [ ] Dwelling: Each side
- [ ] Roof: Each slope
- [ ] Plumbing: Water heater, under cabinet plumbing/drain, 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.

<table>
<thead>
<tr>
<th>Main Panel</th>
<th>Second Panel</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Type:</strong></td>
<td><strong>Type:</strong></td>
</tr>
<tr>
<td>[ ] Circuit breaker</td>
<td>[ ] Circuit breaker</td>
</tr>
<tr>
<td>[ ] Fuse</td>
<td>[ ] Fuse</td>
</tr>
<tr>
<td><strong>Total Amps:</strong> [ ]</td>
<td><strong>Total Amps:</strong> [ ]</td>
</tr>
</tbody>
</table>

**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 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

<table>
<thead>
<tr>
<th>Main Panel</th>
<th>Second Panel</th>
<th>Wiring Type</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Panel age:</strong> [ ]</td>
<td><strong>Panel age:</strong> [ ]</td>
<td>[ ] Copper</td>
</tr>
<tr>
<td><strong>Year last updated:</strong> [ ]</td>
<td><strong>Year last updated:</strong> [ ]</td>
<td>[ ] NM, BX or Conduit</td>
</tr>
<tr>
<td><strong>Brand/Model:</strong> [ ]</td>
<td><strong>Brand/Model:</strong> [ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

Sample Form Insp4pt 01 18
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: __________________

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: _____________
Year last updated: _____________
(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: _______________________________

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

<table>
<thead>
<tr>
<th></th>
<th>Satisfactory</th>
<th>Unsatisfactory</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dishwasher</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refrigerator</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washing machine</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Water heater</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Showers/Tubs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Toilets</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sinks</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sump pump</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Main shut off valve</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All other visible</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.*)

<table>
<thead>
<tr>
<th>Predominant Roof</th>
<th>Secondary Roof</th>
</tr>
</thead>
<tbody>
<tr>
<td>Covering material:</td>
<td>Covering material:</td>
</tr>
<tr>
<td>Roof age (years):</td>
<td>Roof age (years):</td>
</tr>
<tr>
<td>Remaining useful life (years):</td>
<td>Remaining useful life (years):</td>
</tr>
<tr>
<td>Date of last roofing permit:</td>
<td>Date of last roofing permit:</td>
</tr>
<tr>
<td>Date of last update:</td>
<td>Date of last update:</td>
</tr>
<tr>
<td>If updated (check one):</td>
<td>If updated (check one):</td>
</tr>
<tr>
<td>☐ Full replacement</td>
<td>☐ Full replacement</td>
</tr>
<tr>
<td>☐ Partial replacement</td>
<td>☐ Partial replacement</td>
</tr>
<tr>
<td>% of replacement:</td>
<td>% of replacement:</td>
</tr>
<tr>
<td>Overall condition:</td>
<td>Overall condition:</td>
</tr>
<tr>
<td>☐ Satisfactory</td>
<td>☐ Satisfactory</td>
</tr>
<tr>
<td>☐ Unsatisfactory <em>(explain below)</em></td>
<td>☐ Unsatisfactory <em>(explain below)</em></td>
</tr>
</tbody>
</table>

**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

**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

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

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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.*

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Inspector Signature: ____________________  
Title: ____________________  
License Number: ____________________  
Date: ____________________  
Company Name: ____________________  
License Type: ____________________  
Work Phone: ____________________  

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Sample Form Insp4pt 01 18
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.