



(850) 341-8591

Residential Commercial 4 Point Insurance Wind Mitigation

4 Point Insurance Report

Photos For: Dick & Jane Sample-09/03/23

Property Address: 1234 Memory Lane Paradise, FL 32503

Front View



Rear View



Side View



Side View



4-Point Inspection Form

Insured/Applicant Name: Dick & Jane Sample Application / Policy #: _____

Address Inspected: 1234 Memory Lane Paradise, FL 32503

Actual Year Built: 1972

Date Inspected: 09/03/23

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 Fuse

Total Amps: 200

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

Second Panel

Type: Circuit breaker Fuse

Total Amps: 125

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: 6 MONTHS
 Year last updated: 2023
 Brand/Model: GE

Second Panel

Panel age: 1YR
 Year last updated: 2022
 Brand/Model: SIEMENS

Wiring Type

- Copper
- NM, BX or Conduit

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: 2023

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: 1940s

Year last updated: 2005

(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: GARAGE - ELEC - 2009

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:

Original to home - Copper

Completely re-piped

Partially re-piped POX - AT THE WATER HEATER

(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*.)

Predominant Roof

Covering material: C. SHINGLE
 Roof age (years): 1 YR
 Remaining useful life (years): 30 YRS
 Date of last roofing permit: 09/2022
 Date of last update: 09/2022

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

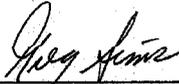
Any visible signs of leaks? Yes No

Attic/underside of decking Yes No

Interior ceilings Yes No

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

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- Greg Sims	RG0054877	09/03/23
Inspector Signature	Title	License Number	Date
Sims Inspections	FL General Contractor	850-341-8591	
Company Name	License Type	Work Phone	

Note: This inspection and report are for insurance purposes only, and are NOT to be construed as a guarantee or warranty. This inspection report is based on a LIMITED VISUAL observation of the systems noted above, during the time inspected, and there is no implication that all deficiencies have been identified and described in this report. Any life expectancies given are based on the professional opinion of the inspector. This inspection report cannot be substituted for a Home Inspection and will not be addressed as one by Sims Inspections.



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Roof View – Photo 1



Roof View – Photo 2



Roof View – Photo 3



Roof View – Photo 4



Sims Inspections

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GE - 200 Amp Panel Front Cover

GE Service Panel – Circuit Breakers



Siemens Subpanel – Front Cover

Siemens Subpanel – Copper Branch Wiring



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Kitchen Sink



Electric Water Heater - 2009



Washing Machine Plumbing



Copper Piping





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Bathroom Sink



Bathroom Sink



Toilet Shut-off Valve



Toilet Shut-off Valve





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INVOICE

This Invoice Has Been Prepared Exclusively For: Dick & Jane Sample

Property Address: 1234 Memory Lane Paradise, FL 32503

Date of Inspection: 09/03/23 Start Time: 9:00 A.M.

Type of Inspection: 4 Point Insurance Inspection Report

Payment Paid: \$ 150.00

If you have any questions, please call me.

Thank you,

A handwritten signature in black ink that reads "Greg Sims". The signature is written in a cursive, flowing style.

Greg Sims

FL. Gen. Contractor License # RG0054877

(850) 341-8591

2215 McCutchen Place Pensacola, FL 32503

Email SimsInspections@cox.net