

(850) 341-8591 Residential Commercial 4 Point Insurance Wind Mitigation

4 Point Insurance Report

Photos For: Gina Boyleston-11/14/22 Property Address: 8132 Imperial Dr. Pensacola, FL 32506

Front View Rear View



Side View





Side View



4-Point Inspection Form

Insured/Applicant Name: Gina Boyl	eston	Applica	ation / Policy #:				
Address Inspected: 8132 Imperial Dr. Pensacola, FL 32506							
Actual Year Built: 1974							
Minimum Photo Requirements: ☐ Dwelling: Each side ☐ Roof: Each side ☐ Main electrical service panel with interio ☐ Electrical box with panel off	ope						
☐ 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 licensed professional of your choice. This suitability, fitness or longevity of any of the	s iniumanum oniv is nsen	mple form, or a simil to determine insura	ar form, that is obtained from the Florida bility and is not a warranty or assurance of the				
Electrical System Separate documentation of any aluminum	n Wiring remediation must	be provided and ce	ertified by a licensed electrician.				
Main Panel		Second Panel					
Type: ☑ Circuit breaker ☐ Fuse Total Amps: 200		Type: ☐ Circuit breaker ☐ Fuse					
Is amperage sufficient for current usage?	′es □ No (evolain)	Total Amps: Is amperage sufficient for current usage? ☐ Yes ☐ No (explain)					
NA.	es 🖂 140 (explain)	is amperage summe	nt 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	t, describe the usage of all al	luminum wiring): WK	ale house				
* If single strand (aluminum branch) wiring, p							
☐ Connections repaired via COPALUM crim	ıp		,				
☐ Connections repaired via AlumiConn							
Hazards Present		☐ Double taps					
☐ Blowing fuses		☐ Exposed wiring					
☐ Tripping breakers		☐ Unsafe wiring					
☐ Empty sockets		☐ Improper breaker size					
☐ Loose wiring		☐ Scorching					
Improper grounding		Other (explain)					
☐ Corrosion		,					
☐ Over fusing							
General condition of the electrical system:	Satisfactory Unsatis	factory (explain)					
Supplemental information							
Main Panel	Second Panel		Wiring Type				
Panel age: 484(5	Panel age:		☐ Copper				
Year last updated: 2002 65+.	Year last updated:		☐ NM, BX or Conduit				
Brand/Model: (アド	Brand/Model:		Aluminum				

4-Point Inspection Form

HVAC System							
Central AC:	Yes No						
Central heat:							
If not central heat,							
Are the heating, ve	entilation and air	conditioning system	ems in good working	order? 🗖 Yes 🔲 i	No (explain)		
Date of last HVAC	servicing/inspec	ction: <u>100 2</u>					
Hazards Present				_			
Wood-burning stor	ve or central gas	fireplace not profe	essionally installed?	☐ Yes 🔀 No			
Space heater used			s [X] No				
Is the source porta	•	,					
Yes X No	er/condensate m	ie or drain pan siii	ow any signs of block	age or leakage, inclu	ding water dan	nage to the surroun	iding area?
Supplementa		1					
Age of system:						······································	
Year last updated:							
(Please attach pho	ito(s) of HVAC e	quipment, includin	ng dated manufacture	r's plate)			
Plumbing S	ystem						
Is there a temperat	ture pressure reli	ief valve on the wa	ater heater? X Yes	□ No			
Is there any indicat	tion of an active I	leak? 🔲 Yes 🚺	No				
Is there any indication of a prior leak? Yes X No Water heater location:							
			res and connections	s to appliances:			
	Satisfactory	Unsatisfactory	N/A		Satisfactory	Unsatisfactory	N/A
Dishwasher	X		⊒	Toilets	斑		
Refrigerator Washing machine	12 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13			Sinks	1 27	旦	
Water heater	Ŕ			Sump pump Main shut off valve			X
Showers/Tubs	Ä,	ā		All other visible	1 2√ 12√		
If unsatisfactory, p	please provide	comments/detail	s (leaks, wet/soft sp	ots, mold, corrosior	n, grout/caulk,	etc.).	
						•	
Supplemental Information							
Age of Piping Syste	m:			Type of pipes (che	ock all that app	olv)	
Original to	home			X Copper			
	ly re-piped			□ PVC/CPVC			
Partially re				☐ Galvanized			
(Provide year and extent of renovation in the comments below)				□ PEX			
			☐ Polybutylene				
☐ Other (specify)							
			l l				

4-Point Inspection Form

Roof (With photos of each or	and others that we say						
	of slope, this section can tak	e the place of the Roof Inspecti	ion Form.)				
Predominant Roof Covering material:	inales	Secondary Roof Covering material: Rolled (C 0				
Covering material: 275 Roof age (years): 275 Remaining useful life (years): 27	1.7.62						
Pomeining upoful life (upom):	4	Roof age (years): 10 y (5 05) Remaining useful life (years): 8	t. Li				
Remaining userul line (years):	<u>/-</u> Y'3	Remaining useful life (years):	<u>7-ycs</u>				
Date of last roofing permit: 2020	<u>)</u>	Date of last roofing permit: Unkn	nown				
Date of last update: 2020		Date of last update: 2012 es	£				
If updated (check one):		If updated (check one):					
Full replacement		Full replacement					
Partial replacement		☐ Partial replacement					
% of replacement:		% of replacement:					
Overall condition:		Overall condition:					
X Satisfactory		(A) Satisfactory					
☐ Unsatisfactory (explain below)		☐ Unsatisfactory (explain below)	Unsatisfactory (explain below)				
Any visible signs of damage / deterior	ioration?	Any visible signs of damage / dete					
(check all that apply and explain below		(check all that apply and explain belo					
☐ Cracking		☐ Cracking	, wi				
☐ Cupping/curling		☐ Cupping/curling					
Excessive granule loss		☐ Excessive granule loss					
☐ Exposed asphalt ☐ Exposed felt		☐ Exposed asphalt					
☐ Exposed test ☐ Missing/loose/cracked tabs or tiles	·-	Exposed felt					
Soft spots in decking	S	Missing/loose/cracked tabs or ti	iles				
☐ Visible hail damage	!	☐ Soft spots in decking ☐ Visible hail damage					
Any visible signs of leaks? Yes	DT No		rd				
Attic/underside of decking 🔲 Yes 🛚	No	Any visible signs of leaks? Yes Attic/underside of decking Yes	S IXI NO				
Interior ceilings Yes X No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Interior ceilings Yes No	XI NO				
		7					
Additional Comments/Obs	constione (use additional		· · · · · · · · · · · · · · · · · · ·				
Additional Comments	ervations (use auditional)	pages ir needed):					
All 4-Point Inspection Forms mu	ust be completed and signed	by a verifiable Florida-licensed	inspector				
I certify that the above statement	nts are true and correct.		mopootor.				
MIN /							
[VIIV	The state of the s						
Inspector Signature	Inspector- Anthony Campbel Title	1 HI9516 License Number	11/14/22				
map datas angularing	HUG	License Mumber	Date				
Sims Inspections	FL Home Inspector	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.

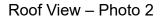


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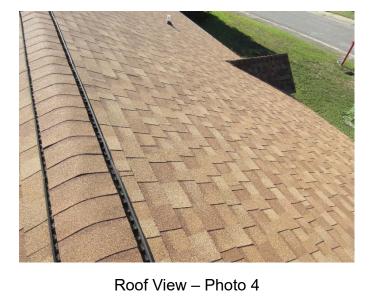
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Roof View - Photo 1





Roof View - Photo 3









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GE Subpanel - Front Cover





Exterior A/C Unit - 2002 - 3 Ton



GE Subpanel - Aluminum Branch Wiring

Exterior A/C Unit Label



Electric Heating Unit - 2002 - 3 Ton



Interior Heating Unit Label







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Kitchen Sink

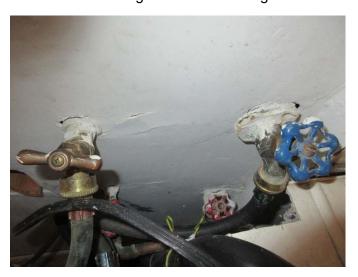


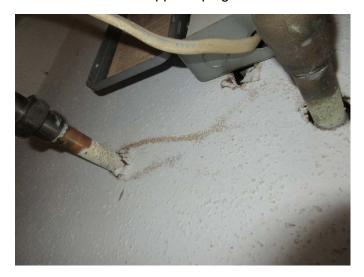


Washing Machine Plumbing



Copper Piping







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Photos For: Gina Boyleston-11/14/22 Property Address: 8132 Imperial Dr. Pensacola, FL 32506

Bathroom Sink Bathroom Sink



Toilet Shut-off Valve





Toilet Shut-off Valve





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INVOICE

This Invoice Has Been Prepared Exclusively For: Gina Boyleston Property Address: 8132 Imperial Dr. Pensacola, FL 32506 Date of Inspection: 11/14/22 Start Time: 9:00 A.M.

Type of Inspection: 4 Point Insurance Inspection Report

Payment Paid: \$ 125.00

If you have any questions, please call me.

Thank you,

Anthony Campbell

FL. Home Inspector License # HI9516

(850) 341-8591