



AFFIRMATIVE HOME INSPECTIONS INC.

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Phone: 352-263-4120

Four-Point Inspection



3305 ROSE ARBOR DR HERANDO BEACH FLORIDA

Prepared for
SHARIE OAKLAND

Licensed to:
James Calleri
License #HI439

Inspector: James Calleri

4-Point Inspection Form

Insured/Applicant Name: SHARIE OAKLAND Application / Policy #: _____

Address Inspected: 3305 ROSE ARBOR DR HERANDO BEACH FLORIDA

Actual Year Built: 2020

Date Inspected: Jun 1, 2026

Minimum Photo Requirements: _____

- ☒ Dwelling: Each side ☒ Roof: Each slope ☒ Plumbing: Water heater (including TPRV), 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 ☐ N/A (no 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

- | | |
|--|---|
| ☐ 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 YEARS

Year last updated: _____

Brand/Model: EATON

Second Panel

Panel age: _____

Year last updated: _____

Brand/Model: _____

Wiring Type

- | | | |
|--|--|---|
| ☒ Copper | ☐ Copper Clad AL | ☒ NM, BX or Conduit |
| ☐ Single Strand AL | ☐ Knob & Tube | ☐ Other |
| ☐ Multi-strand AL | ☐ Cloth Jacket Rubber Insulated | |

4-Point Inspection Form

HVAC System

Central AC: ☒ Yes ☐ NoCentral heat: ☒ Yes ☐ NoIf not central heat, indicate **primary** heat source and fuel type: ElectricityAre the heating, ventilation and air conditioning systems in good working order? ☒ Yes ☐ No (explain)

Date of last HVAC servicing/inspection: UNKNOWN

Hazards Present

Is a wood-burning stove or central gas fireplace present? ☐ Yes ☒ No Was it professionally installed? ☐ Yes ☐ No ☐ NASpace heater used as primary heat source? ☐ Yes ☒ NoIs the source portable? ☐ Yes ☒ No ☐ NA

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: 6 YEARS

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 ☐ NA/ Not RequiredIs there any indication of an active leak? ☐ Yes ☒ NoIs there any indication of a prior leak? ☐ Yes ☒ NoWater heater location: Closet

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 shut off valve	☒	☐	☐
Showers/Tubs	☒	☐	☐	All other visible	☐	☐	☐

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

Supplemental Information

Age of Piping Supply System:

Yes Original to homeNo Completely re-piped Partially re-pipedAge of Water Heater 1 6 YEARS 2

(Provide year and extent of renovation in the comments below)

Age of Piping Drain System:

Yes Original to homeNo Completely re-piped Partially re-piped

Type of pipes (check all that apply)

☒ Copper ☐ PEX Year Installed ☒ PVC/CPVC☐ Galvanized☐ Cast Iron☐ Polybutylene☐ ABS☐ Other

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: Asphalt-fiberglassRoof age (years): 7 YEARSRemaining useful life (years): 23 YEARSDate of last roofing permit: 12/10/2019

Date of last update: _____

If updated (check one):

☐ Full replacement ☒ Not Applicable/Original☐ Partial replacement ☐ Unknown

% 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 damageAny visible signs of leaks? ☐ Yes ☒ No (If "Yes" explain below)Attic/underside of decking ☐ Yes ☒ NoInterior 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 ☐ Not Applicable/Original☐ Partial replacement ☐ Unknown

% 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 damageAny visible signs of leaks? ☐ Yes ☐ No (If "Yes" explain below)Attic/underside of decking ☐ Yes ☐ NoInterior 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 Signature

President

Title

License #HI439

License Number

Jun 1, 2026

Date

AFFIRMATIVE HOME INSPECTIONS INC.

Company Name

Home Inspector

License Type

352-263-4120

Work Phone

4-Point Inspection Form

Special Instructions: This *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.



Front Elevation



Side Elevation



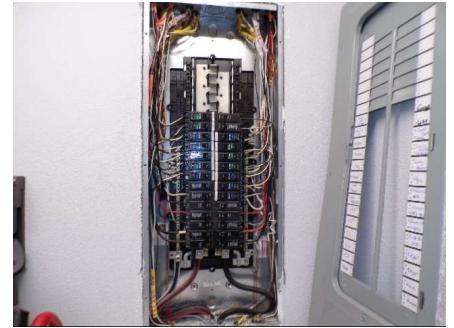
Rear Elevation



Side Elevation



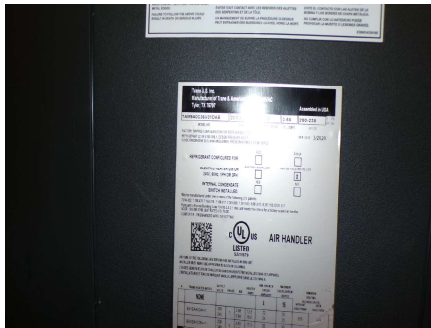
Main Electrical Panel



Inside Electrical Panel



HVAC Condenser



HVAC Air Handler Data tag



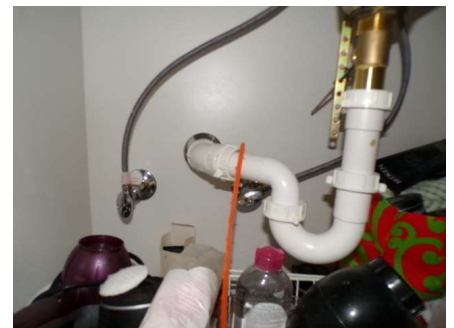
Water Heater



Water Heater Data Tag



Kitchen Plumbing



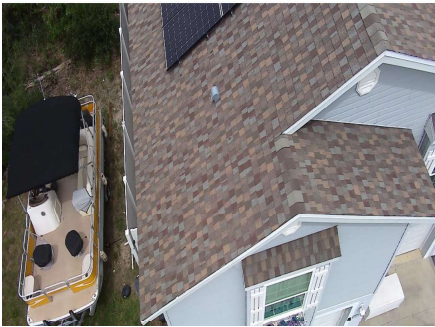
Bathroom Plumbing



Bathroom Toilet Supply Valve



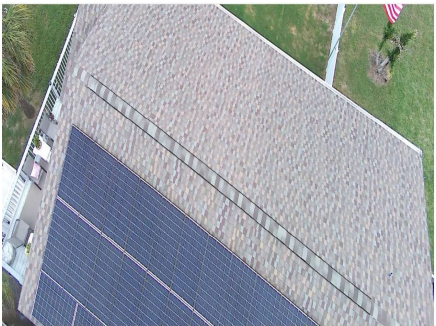
Roof



Roof



Roof



Roof

Roof Permit

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