

Cityhouse M Inc

840 NW 122 Street North Miami, FL 33168

05/12/2022

## 4 Point Inspection



This inspection is provided for insurance purposes only. This is not a pre-purchase inspection for Real Estate transaction. This is a report made to the best of our ability and professional belief on the existing conditions of all components inspected at time of inspection. As all areas are not accessibly, visible due to lack of access or otherwise being concealed, the Inspector cannot guarantee against hidden defects, damage or repairs. No inspection has been made for such structural defects as would require engineering skill practices. In accordance to the Home inspector standards of practice of South Florida we are not required to check for or test for environmental hazards IE ( mold, asbestos and mildew).

# 4-Point Inspection Form

Insured/Applicant Name Cityhouse M Inc

Application / Policy #: \_\_\_\_\_

Address Inspected: 840 NW 122 Street North Miami, FL 33168

Actual Year Built: 1949

Date Inspected: 05/12/2022

**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: 150 Amp

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

**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**

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li><input type="checkbox"/> Blowing fuses</li> <li><input type="checkbox"/> Tripping breakers</li> <li><input type="checkbox"/> Empty sockets</li> <li><input type="checkbox"/> Loose wiring</li> <li><input type="checkbox"/> Improper grounding</li> <li><input type="checkbox"/> Corrosion</li> <li><input type="checkbox"/> Over fusing</li> </ul> | <ul style="list-style-type: none"> <li><input type="checkbox"/> Double taps</li> <li><input type="checkbox"/> Exposed wiring</li> <li><input type="checkbox"/> Unsafe wiring</li> <li><input type="checkbox"/> Improper breaker size</li> <li><input type="checkbox"/> Scorching</li> <li><input type="checkbox"/> Other (explain)</li> </ul> |
|--|---|

**General condition of the electrical system:**  Satisfactory  Unsatisfactory (explain)

## Supplemental information

**Main Panel**

Panel age: 1+/- year

Year last updated: 2021

Brand/Model: Siemens

**Second Panel**

Panel age: \_\_\_\_\_

Year last updated: \_\_\_\_\_

Brand/Model: \_\_\_\_\_

**Wiring Type**

- Copper
- MN, 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: N/A  
 Are the heating, ventilation and air conditioning systems in good working order?  Yes  No (explain)  
 Date of last HVAC servicing/inspection: 2021

### 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: 1 year  
 Year last updated: 2021  
 (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 Tankless water heater  
 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 Brand: Titan Water Heater Age: 2021

### 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Sinks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washing machine	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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  
 2021 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*.)

**Predominant Roof**

Covering material: Asphalt shingle  
 Roof age (years): 2+/- years  
 Remaining useful life (years): 18+/-years (estimated)  
 Date of last roofing permit: 11/19/2020  
 Date of last update: 11/19/2020

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

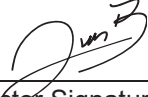
**Any visible signs of leaks?**  Yes  No

Attic/underside of decking  Yes  No  
 Interior ceilings  Yes  No

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

Last plumbing update was done approximately in 2021 for bathrooms, kitchen fixtures and drainage have been replaced to pvc.

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.

	Certified Home Inspector	HI-9875	05/12/2022
Inspector Signature	Title	License Number	Date

Global Property Inspections Group, Inc.	Certified Home Inspector	786-332-0452	
Company Name	License Type	Work Phone	





Address verification



Rear elevation



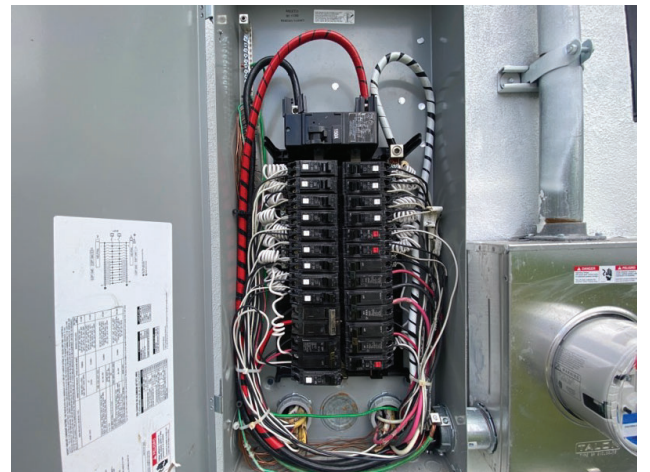
Left elevation



Right elevation



Exterior electrical circuit breaker box



Exterior electrical circuit breaker box





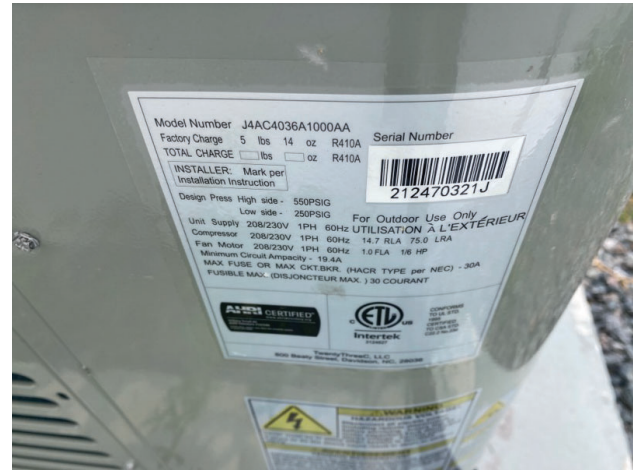
Exterior electrical circuit breaker box



Exterior electrical circuit breaker box



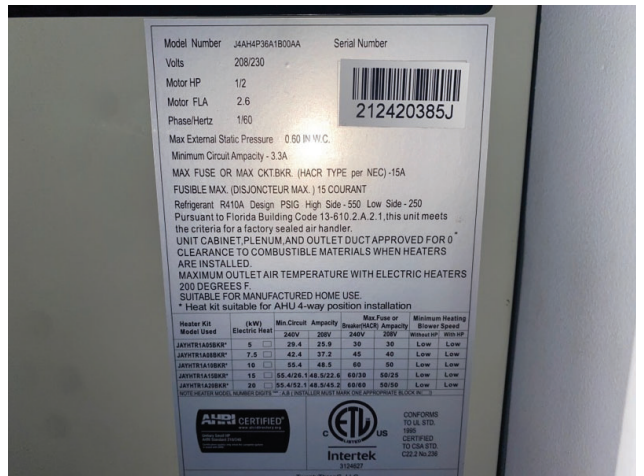
A/C Outdoor compressor unit



A/C Outdoor compressor unit



A/C Indoor air handler unit



A/C Indoor air handler unit





Kitchen plumbing component



Kitchen plumbing component



Bathroom plumbing component



Bathroom plumbing component



Tankless water heater



Water heater label





Washer plumbing hoses



Main Water shut-off valve



Pvc clean out for drainage



Asphalt shingle roof covering



Asphalt shingle roof covering



Asphalt shingle roof covering





Asphalt shingle roof covering



Asphalt shingle roof covering



Asphalt shingle roof covering



Asphalt shingle roof covering