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Phone: (954) 340-6615

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INSURED

[ev@magnuminspections.com](mailto:ev@magnuminspections.com)

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## INSPECTIONS Inc.

### Four-Point Inspection

Insured Name: Ms. Sample Policy#: \_\_\_\_\_  
 Property Address: 1010 Pompano road City/State/Zip: Pompano Beach, FL 33060  
 Inspection Date: May 10, 2012

#### ROOFING

Please provide a digital color photo of front, rear and any conditions

Roof cover material: Main roof: Shingle Secondary roof(s) Rolled roofing

Number of roof cover layers: One Age of roof cover(s): 7 years

Number of years remaining on roof cover (expected life): 15 years

Roof deteriorated? (Such as shingles curling, splitting, lifting, or patched) Yes No

If yes, describe: \_\_\_\_\_

Any existing damage? (Such as shingles broken or missing) Yes No

Soffits/eaves/gutters in poor condition? Yes No

Evidence of roof leak in the interior of home? Yes No

If yes, describe: \_\_\_\_\_

Any roof updates needed? Yes No

If yes, describe: \_\_\_\_\_

#### COMMENTS:

Roof was replaced in 2005 (permit number 05-10101010)



Front view



Rear view



Main roof



Secondary roof

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#### PLUMBING

Please provide digital color photos of: washing machine hoses, water heater including pressure relief value, and plumbing under all sinks (kitchen, bathrooms, utility, garage, etc.)

Plumbing pipe material: Copper  PVC  Galvanized Steel PEX Polybutylene Other: \_\_\_\_\_

All plumbing updated? Full Partial  If yes, year(s) updated: 1997/2007

Washing machine hose material: Rubber  Stainless Braided Other: \_\_\_\_\_

Hose soft/brittle/aged? Yes  No \_\_\_\_\_

Manufactured year of water heater: 2007

Water heater pressure/temperature relief value vented to exterior of home? Yes  No \_\_\_\_\_

Adverse plumbing conditions or updates needed? Yes No  If yes, describe. \_\_\_\_\_

Evidence of Leakage at any plumbing location? Yes No  If yes, describe. \_\_\_\_\_

Evidence of previous water damage at any plumbing location? Yes No  If yes, describe. \_\_\_\_\_

Mold evidence? Yes No  If yes, describe. \_\_\_\_\_

#### COMMENTS:

Water heater changed 6/2007 (data plate)



Washing machine hoses



Water heater top



Water heater data plate



Kitchen sink

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#### HEATING/COOLING

Please provide a digital color of HVAC unit

Furnace/heating system type: Forced air

Heating fuel type: Electric

Manufactured year of heating system: Rheem

Cooling system type: Forced air

Manufactured year of cooling system: Rheem

Any wall/window a/c units present

Yes No

Adverse conditions of heating or cooling?

Yes No  If yes, describe.

#### COMMENTS:

A/c changed 1997 (permit and data plate on condensing unit)



Condensing unit



Condensing unit data plate

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#### ELECTRICAL

Please provide a digital color photo of electrical panel box with door open

Breakers  Fuses Other If other, describe: \_\_\_\_\_

Electrical panel box brand: Siemens

Main circuit breaker amperage: 150

Type of wiring: Copper  Aluminum Other

Any wiring updated? Yes  No If yes, describe and provide year updated.

Adverse conditions or updates needed? Yes No  If yes, describe.

#### COMMENTS:

Electric service updated 9/1997 (permit)



Main disconnect



Distribution panel

I hereby certify that I am either a: *(check all that apply)*

Resident Licensed General or Building Contractor

Engineer in the State of Florida

Building Code Official (duly authorized by State of Florida to verify building code compliance)

Licensed electrician (electrical components only)

Florida Home Inspector \*Licensed by INACHI

\* Only members of American Society of Home Inspectors (ASHI), National Association of Certified Home Inspectors (INACHI) or Florida Association of Building Inspectors (FABI) are accepted.

In my professional opinion, based on my knowledge, information and belief, I certify that the above statements are true and correct.

Signature: Eric Van De Ven

Digitally signed by Eric Van De Ven  
DN: cn=Eric Van De Ven, o=Magnum  
Inspections Inc., ou,  
email=ev@magnuminspections.com, c=US  
Date: 2012.06.07 08:01:09 -0400

Printed Name: Eric Van De Ven

License#: NACHI10100101/HI-591 Date: May 10, 2012

County: Broward Contact#: (954) 340-6615

Any people who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree.