

Insured/Applicant Name: \_\_\_\_\_ Application / Policy #: \_\_\_\_\_

Address Inspected: \_\_\_\_\_

Actual Year Built: \_\_\_\_\_

Date Inspected: \_\_\_\_\_

**Minimum Photo Requirements:**

**NOTE:** A state-licensed inspector must complete, sign and date this form.

- |   |  |
|---|--|
| <input type="checkbox"/> Dwelling: Each side                                    | <input type="checkbox"/> Plumbing: Water heater, under cabinet plumbing/drains, exposed valves |
| <input type="checkbox"/> Roof: Each slope                                       | <input type="checkbox"/> HVAC equipment, including dated manufacturer's plate                  |
| <input type="checkbox"/> Main electrical service panel with interior door label | <input type="checkbox"/> <b>All</b> hazards or deficiencies noted in this report               |
| <input type="checkbox"/> Electrical box with panel off                          |  |

Be advised that Underwriting will rely on the information in this form, or a similar form, that is obtained from the state-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: \_\_\_\_\_

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**

- |   |   |
|---|---|
| <input type="checkbox"/> Blowing fuses      | <input type="checkbox"/> Double taps                |
| <input type="checkbox"/> Tripping breakers  | <input type="checkbox"/> Exposed wiring             |
| <input type="checkbox"/> Empty sockets      | <input type="checkbox"/> Unsafe wiring              |
| <input type="checkbox"/> Loose wiring       | <input type="checkbox"/> Improper breaker size      |
| <input type="checkbox"/> Improper grounding | <input type="checkbox"/> Scorching                  |
| <input type="checkbox"/> Corrosion          | <input type="checkbox"/> Other ( <b>explain</b> ) : |
| <input type="checkbox"/> Over fusing        |   |

Is the electrical system in good working order?  Yes  No (**explain**)

**Supplemental information**

**Main Panel**

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

Year last updated: \_\_\_\_\_  Full  Partial

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

**Second Panel**

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

Year last updated: \_\_\_\_\_  Full  Partial

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

**Wiring Type**

- Copper
- NM, BX, or Conduit

**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**)

**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: \_\_\_\_\_

Year last updated: \_\_\_\_\_  Full  Partial

**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: \_\_\_\_\_ Age of water heater: \_\_\_\_\_

**General condition of the water heater:**  Satisfactory  Unsatisfactory

**If unsatisfactory, please provide comments/details.**

**General condition of entire plumbing system:**  Satisfactory  Unsatisfactory

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

**Supplemental Information**

Age of Piping System:

Year last updated: \_\_\_\_\_  Full  Partial

**Type of pipes (check all that apply)**

- Copper
- PVC/CPVC
- Galvanized
- PEX
- Polybutylene
- Other (specify)

**Roof** (With photos of each roof slope, this section can take the place of the *Roof Certification Form*.)

**Predominant 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:

- Excellent                       Fair  
 Good                                 Poor (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:

- Excellent                       Fair  
 Good                                 Poor (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 state-licensed inspector.  
 I certify that the above statements are true and correct.

Inspector Signature	Title	License Number	Date
Company Name	License Type	Work Phone	

**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
- Open main electrical panel and interior door
- Electrical box with the panel off
- Plumbing: Water heater, under cabinet plumbing/drains, exposed valves
- HVAC equipment, including dated manufacturer's plate
- All hazards or deficiencies noted in this report

### Inspector Requirements

To be accepted, all inspection forms must be completed, signed, and dated by a verifiable state-licensed professional.

The following state-licensed individuals may complete a 4-Point Inspection for APPCIC in its entirety:

- A general, residential, or building contractor
- A building code inspector
- A home inspector
- A registered architect
- A professional engineer
- A building code official who is authorized by the state to verify building code compliance

**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 state-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.