

Bucket = **A**
Description = **No Issues**

Policy Information

Account #: 1713.01
Client Name: United P&C - CSC

Policy #: UHV37940030100
Tracking #: 15-152-001066

Agency Info:

Form	Question #	Form Value	Client Value	Reason	Bucket
Form_52170	0			NO ISSUES	A



A 4 Point survey is an OVS that also includes a supplement of the electrical system, heating/cooling systems, plumbing and the roof. Because the 4 Point Survey requires observation of interior elements, an appointment is required.

During your interview you need to ask the insured the dates of applicable updates to any 4 point system. If this information is unknown to the insured you must use best estimates based on your on-site observations. It is recommended to use your flash for all interior photos to provide clear and detailed images.

Acct: 1713.01 Date: 06 / 11 / 2015

Insured:
 Location:

Policy #:
 Company:
 Agent:

City: CLEARWATER

State: FL Zip: 33763

Agent Phone:

Telephone:

Coverage Amount: 215000.0000

Year Built: 1985 Sq Footage: 1620

DWELLING DESCRIPTION

☐ There are special attention or customer instruction comments

01. ☒ Interview obtained. If so, whom?:
 02. ☐ Unable to confirm address
 03. Type of dwelling: ☒ 1 family ☐ 2 family ☐ 3 family ☐ 4 family ☐ More than 4 family
 04. Occupancy characteristics: ☐ Tenant occupied ☐ Vacant ☐ Seasonal ☐ Evidence of student housing ☐ Converted from single-family to multi-family
 05. ☐ Commercial construction converted to residential
 06. Number of stories: (Check all that apply.) ☐ 1 ☐ 1.5 ☒ 2 ☐ 2.5 ☐ 3 ☐ Bi-level ☐ Tri-level ☐ Other:
 07. Year built: 1985 ☐ Estimated ☒ Per interview
 08. Foundation: (Check all that apply.) ☐ Basement ☒ Slab ☐ Crawl Space ☐ Pier & Post
 09. Construction: (Check all that apply.) ☒ Frame ☒ Masonry veneer ☐ Masonry ☐ Other:
 10. Roof covering: (Check all that apply.) ☒ Composition ☐ Wood ☐ Tile ☐ Metal ☐ Rubber membrane ☐ Tar & gravel ☐ Other:
 11. Roof type: (Check all that apply.) ☒ Gable ☒ Hip ☐ Gambrel ☐ Mansard ☐ Flat ☐ Other:
 12. Estimated roof life remaining: ☐ Less than 5 years ☐ 5 to 10 years ☒ More than 10 years

DWELLING CONCERNS (Check all that apply. Photograph and comment on all checked items.)

13. ☐ Paint chipping / peeling
 14. ☐ Exterior wall / siding concerns
 15. ☐ Foundation concerns
 16. ☐ Open foundation
 17. ☐ Elevated surface concerns (porches, decks, balconies, etc.)
 18. ☐ Missing railing > 12" above ground: (Check all that apply.) ☐ In need of repair ☐ 12" - 24" above ground ☐ 36" - 72" above ground
 ☐ Broken railing(s) ☐ 25" - 35" above ground ☐ > 72" above ground
 19. ☐ Step concerns: (Check all that apply.) ☐ Steps in need of repair ☐ Broken handrail(s) ☐ Missing handrail(s) (3 or more steps)
 20. ☐ Suspicion of synthetic stucco (EIFS)
 21. ☐ Suspicion of asbestos siding
 22. ☐ Gutter concerns
 23. ☐ Renovations underway
 24. ☐ Broken or boarded window(s)
 25. ☐ Roof in need of repair
 26. ☐ Solid fuel device
 27. ☐ Manufactured home. If so: ☐ HUD tag visible

PREMISE CONCERNS (Check all that apply. Photograph and comment on all checked items.)

28. ☐ Evidence of dog(s): (Not observed.) ☐ Heard barking from inside house ☐ Dog house on premises ☐ "Beware of Dog" sign noted
 29. ☐ Dog(s): (Observed.) Dog 1: ☐ Aggressive or vicious ☐ Bite history Predominant breed:
 Dog 2: ☐ Aggressive or vicious ☐ Bite history Predominant breed:
 Dog 3: ☐ Aggressive or vicious ☐ Bite history Predominant breed:
 30. ☐ Outbuilding(s) on premises ☐ Outbuilding(s) in need of paint ☐ Outbuilding(s) in need of repair
 31. ☐ Business on premises Type: ☐ Employees ☐ Customer traffic ☐ Inventory maintained
 32. ☐ Heating oil tanks
 33. ☐ Swimming pool(s) ☐ Unfenced ☐ Non-latching gate ☐ In-ground ☐ Diving board ☐ Slide ☐ Empty ☐ Needs maintenance
 34. ☐ Trampoline
 35. ☐ Skateboard/bike ramp
 36. ☐ Playground equipment
 37. ☐ Tree house
 38. ☐ Hot tub or spa ☐ Uncovered ☐ Unsecured
 39. ☐ Retaining wall ☐ In need of repair Estimated height: (In feet.) Estimated length: (In feet.)
 40. ☐ Atlantic or Gulf within 1,000 feet Distance from water: (In feet.) Height above water: (In feet.)
 41. ☐ Subject to flooding
 42. ☐ Farming or ranching
 43. ☐ Farm animal(s)/livestock
 44. ☐ Exotic animal(s)
 45. ☐ Above-ground gasoline/diesel tank(s)
 46. ☐ Above-ground LP tank(s)
 47. ☐ Sidewalk(s) in need of repair Surface elevation and separation change:
 ☐ < 1" ☐ 1" - 3" ☐ > 3"
 48. ☐ Driveway(s) in need of repair Surface elevation and separation change:
 ☐ < 1" ☐ 1" - 3" ☐ > 3"
 49. ☐ Tree limb(s) overhanging roof
 ☐ Limbs < 3" in diameter
 ☐ Limbs 3" or greater in diameter
 50. ☐ Tree limb(s) touching roof
 ☐ Limbs < 3" in diameter
 ☐ Limbs 3" or greater in diameter
 51. ☐ Junk car(s)
 52. ☐ Untagged vehicle(s)
 53. ☐ Appliance(s) outside
 54. ☐ Debris
 55. ☐ Housekeeping
 56. ☐ Trip/fall hazard(s)
 57. ☐ Property for sale
 58. ☐ Property for rent
 59. ☐ Chimney concern(s)
 60. ☐ Lack of landscape maintenance
 61. ☐ Exterior electrical concern(s)

PROTECTION

62. ☐ Dwelling outside city limits Distance from city: (In miles.)
 63. ☐ Dwelling on unpaved road
 64. Water source: ☐ None ☒ Hydrant ☐ Alternative water (pond, lake)
 65. Distance to water source: (In feet.) ☒ 0 - 500 ☐ 501 - 1,000 ☐ > 1,000
 66. Distance to fire department: (In miles.) ☒ < 2 ☐ 2 - 5 ☐ > 5 and < 10 ☐ 10 or more
 67. Number of other permanent residences within view of dwelling: ☐ None ☐ 1 - 2 ☐ 3 - 4 ☐ 5 - 6 ☒ > 6

YOU AGREE THAT YOUR REQUEST FOR THIS REPORT IS PERMITTED BY LAW AND THAT YOU INTEND TO USE THE REPORT ONLY FOR A PURPOSE PERMITTED BY THE FAIR CREDIT REPORTING ACT AND LOCAL LAW AND NO OTHER PURPOSE. THIS REPORT IS BASED ON OBSERVATION AND INFORMATION PROVIDED TO US. FOR THE FEE CHARGED, WE DO NOT ASSUME ANY LIABILITY ARISING OUT OF THE USE OR MISUSE OF THIS REPORT BY YOU OR OTHERS. YOU OR ANY OTHER USER AGREE TO HOLD US FREE FROM ANY LIABILITY.





Date: 06 / 11 / 2015 Rep #: 204

Tracking #: 15-152-001066

Insured:
Location:

Policy #:
Company:
Agent:
Agent Phone:

City: CLEARWATER State: FL Zip: 33763 Agent Phone:
Telephone: Coverage Amount: 215000.0000 Year Built: 1985 Square Footage: 1620

COMMENTS (APPOINT) 51860

COMMENTS
Appointment scheduled and completed on 6/11/2015.



Insured:
 Location:

Policy #:
 Company:
 Agent:
 Phone:
 Built: 1985 Square Footage: 1620

An approximate year of updates must be entered. If this is unknown to the insured enter a best estimate based on your visual observation.

4 POINT VISUAL INSPECTION (4POINT) - PAGE 1 OF 2

52130

GENERAL

01. Year Built: 1985 ☒ Actual ☐ Estimated

ELECTRICAL

MAIN PANEL	PANEL # 2	PANEL # 3	WIRING
PHOTO REQUIRED Amps: 150 # Fuses: <input type="checkbox"/>	PHOTO REQUIRED Amps: <input type="checkbox"/> # Fuses: <input type="checkbox"/>	PHOTO REQUIRED Amps: <input type="checkbox"/> # Fuses: <input type="checkbox"/>	MUST BE VISIBLE AREAS <input type="checkbox"/> Knob & Tube <input type="checkbox"/> BX <input checked="" type="checkbox"/> Romex <input type="checkbox"/> Other (comment) <input type="checkbox"/> Could not view (comment)
<input checked="" type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fustats <input type="checkbox"/> Regular Fuses <input type="checkbox"/> Fusetrons	<input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fustats <input type="checkbox"/> Regular Fuses <input type="checkbox"/> Fusetrons	<input type="checkbox"/> Circuit Breakers <input type="checkbox"/> Fustats <input type="checkbox"/> Regular Fuses <input type="checkbox"/> Fusetrons	

CONDITION	Knob & Tube Wiring	ELECTRICAL UPDATES
<input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Fair / Poor Estimated remaining life: 25 year(s)	Knob & tube wiring going into panel: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Two-prong outlets in use: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Knob & tube wiring disconnected: <input type="checkbox"/> Yes <input type="checkbox"/> No x. date (mm/yy): <input type="checkbox"/> / <input type="checkbox"/>	Original construction: <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Updates completed by professional: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No Approximate year of updates: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Update info not known or completed by previous owner.

HEATING	COOLING
CONDITION <input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Fair / Poor Estimated remaining life: 12 year(s) HEATING FUEL <input type="checkbox"/> Gas <input type="checkbox"/> Propane <input type="checkbox"/> Wood <input type="checkbox"/> Other <input type="checkbox"/> Oil <input checked="" type="checkbox"/> Electricity If oil, tank is: <input type="checkbox"/> Above ground <input type="checkbox"/> Underground	HEATING UNIT TYPE(S) <input checked="" type="checkbox"/> Forced Air <input type="checkbox"/> Electric Baseboard <input type="checkbox"/> Radiant Heat (Floor) <input type="checkbox"/> Woodstove <input type="checkbox"/> Hot Water Boiler <input type="checkbox"/> Space Heater(s) <input type="checkbox"/> Space heater(s) thermostatically controlled <input type="checkbox"/> Any portable heating unit(s) used HEATING UPDATES Original construction: <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Updates completed by professional: <input checked="" type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No Approximate year of updates: 2011 <input type="checkbox"/> Update info not known or completed by previous owner.
	CONDITION <input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Fair / Poor Estimated remaining life: 12 year(s) COOLING UNIT TYPE(S) <input checked="" type="checkbox"/> Central AC Number of window units: 0 COOLING UPDATES Original construction: <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Updates completed by professional: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Approximate year of updates: 2011 <input type="checkbox"/> Update info not known or completed by previous owner.

PLUMBING

CONDITION	PRESSURIZED LINES	PLUMBING UPDATES
<input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Fair / Poor Estimated remaining life: 26 year(s) DETAILS System: <input checked="" type="checkbox"/> Sewer <input type="checkbox"/> Septic Water heater approx. age: 60 month(s)	Copper: 85% Cast Iron: <input type="checkbox"/> % Galvanized: <input type="checkbox"/> % PVC: <input type="checkbox"/> % Other: 15% Describe other: PEX, Nylon Hose	Original construction: <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Updates completed by professional: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Approximate year of updates: 2010 <input type="checkbox"/> Update info not known or completed by previous owner.

ROOF

CONDITION	PRIMARY ROOF COVERING	ROOF UPDATES
<input checked="" type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Fair / Poor Estimated remaining life: 15 year(s) DETAILS Inspected from: <input type="checkbox"/> Roof <input checked="" type="checkbox"/> Ground Geometry: <input type="checkbox"/> Hip <input checked="" type="checkbox"/> Gable <input type="checkbox"/> Flat <input type="checkbox"/> Other	<input type="checkbox"/> Concrete <input type="checkbox"/> Tar and Gravel <input type="checkbox"/> Metal <input checked="" type="checkbox"/> Comp Shingle <input type="checkbox"/> Wood Shingle <input type="checkbox"/> Tar Shingle <input type="checkbox"/> Flat Tile <input type="checkbox"/> Barrel Tile	Original construction: <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Updates completed by professional: <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Approximate year of updates: 2005 <input type="checkbox"/> Update info not known or completed by previous owner.

HAZARDS (Check all that apply.)

- | | | | | | |
|--|---|--|--|--|---|
| <input type="checkbox"/> Blocked access to panel | <input type="checkbox"/> Empty fuse sockets | <input type="checkbox"/> Frayed wiring | <input type="checkbox"/> Flammables close to furnace | <input type="checkbox"/> Fuel stored inside house | <input type="checkbox"/> Homemade wood stove |
| <input type="checkbox"/> Cover off panel | <input type="checkbox"/> Blowing fuses | <input type="checkbox"/> Loose pipes | <input type="checkbox"/> Chimney needs repair | <input type="checkbox"/> Improper venting of furnace | <input type="checkbox"/> Leaking pipes |
| <input type="checkbox"/> Loose wiring | <input type="checkbox"/> Overfusing | <input type="checkbox"/> Signs of water damage | <input type="checkbox"/> Furnace not on concrete | <input type="checkbox"/> Inadequate clearances | <input type="checkbox"/> Rusted or corroded pipes |

THIS FORM CONTAINS TWO PAGES. PLEASE CONTINUE ON PAGE 2.



COMMENTS

Electrical System. The system is original construction. The system is in good condition and the estimated remaining life expectancy is 25 years.

Heating/Cooling System. There is a central HVAC system with a built-in heat pump. The system was updated in approximately 2011 by a professional contractor. The HVAC system is a forced air system with separate ducts. The air handler is located in the garage. The system is in very good condition and the estimated remaining life expectancy is 12 years.

Plumbing System. The kitchen and bathroom fixture supply lines appear to be about 5 years old. The water heater is about 5 years old and in good condition. The estimated remaining life expectancy is 12 years.

Roof. The roof cover is architectural shingle and the roof shape is gable. The roof is approximately 10 years old and is in good condition. The estimated remaining life expectancy is 15 years.

Estimated Life Expectancies Guidelines for 4 Point Surveys:

Plumbing: Copper 50 years, Brass 50 years, Galvanized 25-30 years, PVC 75 years.

Electrical: Unless poor conditions exist or other environmental factors are causing the rapid deterioration of the system (water leaks, evident corrosion) copper electrical systems with a circuit breaker main panel 60+ years useful life.

HVAC: heat pump units 15 -20 years

Water Heater: 10 to 12 years

Roofing: Composite shingles 20 years, architectural shingles 30 years, metal, tile, slate - 50 years+



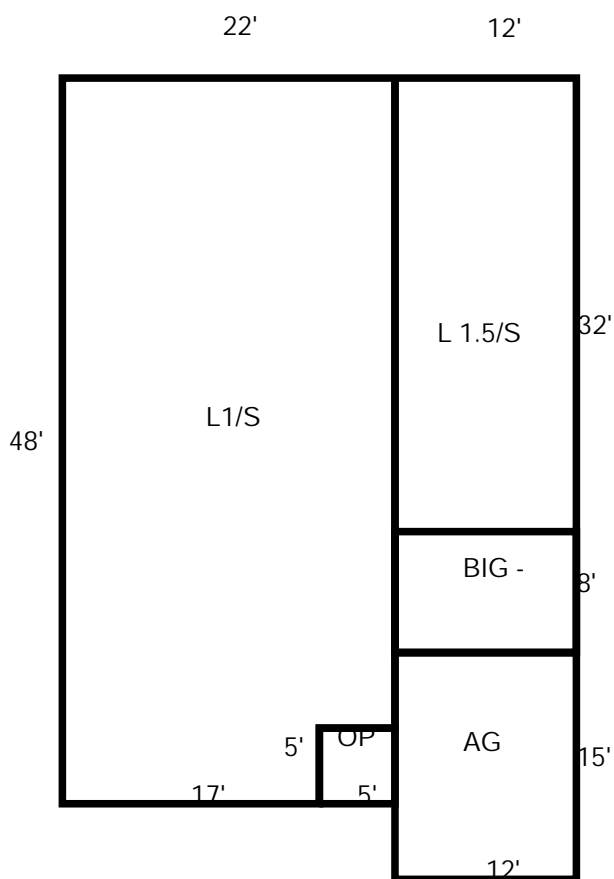
Name

Reference Number 15-152-001066

Policy Number

UHV37940030100

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Area Name	Sign	Multiplier	Perimeter (ft.)	Area Value (sq. ft.)
Living Area				
L 1.5/S	+	1.5	100	684
BIG -	-	1	40	96
L1/S	+	1	140	1031
Summary Living Area			1619 sq.ft.	
Garage Area				
AG	+	1	54	180
BIG -	+	1	40	96
Summary Garage Area			276 sq.ft.	
Porch Area				
OP	+	1	20	25
Summary Porch Area			25 sq.ft.	

Insured:

Location:

Pol. #:

Company:

Agent:

Agent P

City: CLEARWATER

State: FL Zip: 33763

Photo Description:

Address



Photo Description:

Front



Insured:
 Location:

Pol. #:
 Company:
 Agent:
 Agent P:

City: CLEARWATER State: FL Zip: 33763

Photo Description:

Rear



Photo Description:

Left



Insured:

Location:

Pol. #:

Company:

Agent:

Agent P

City: CLEARWATER

State: FL Zip: 33763

Photo Description:

Right



Photo Description:

Roof



Zoom in to get two clear close-up photos showing the condition and type of roof covering.

Insured:

Location:

POI. #:

Company:

Agent:

Agent F

City: CLEARWATER

State: FL Zip: 33763

Photo Description:

Roof



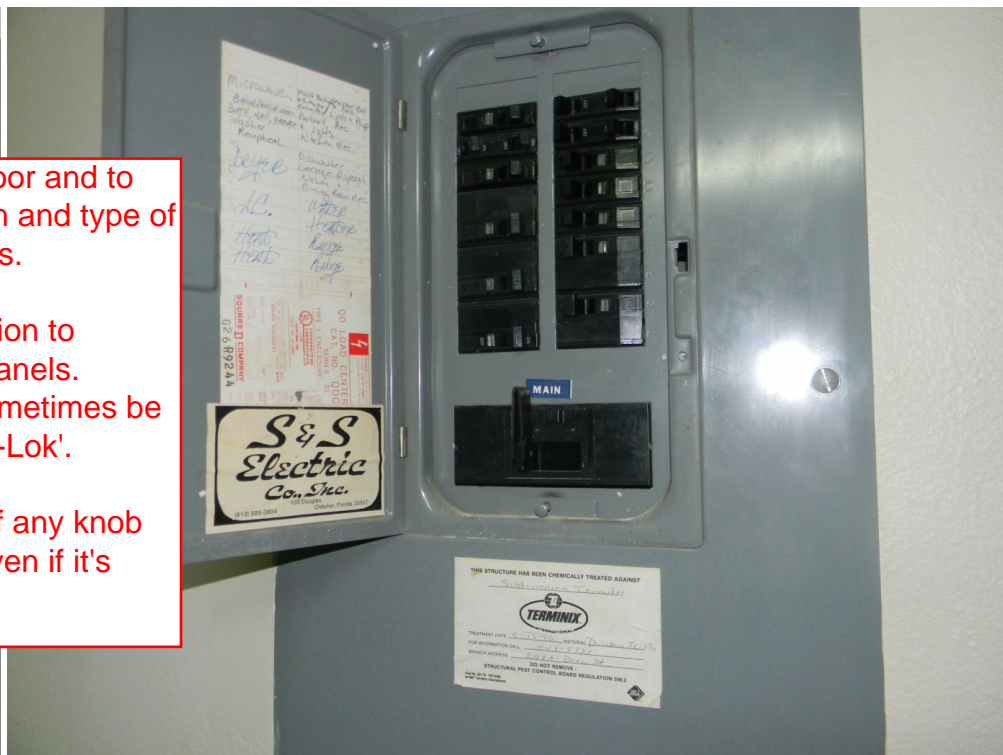
Photo Description:

Electrical Panel

Open the panel door and to show the condition and type of the circuit breakers.

Pay special attention to 'Federal Pacific' panels. These will also sometimes be identified as 'Stab-Lok'.

Provide a photo of any knob and tube wiring even if it's disconnected.



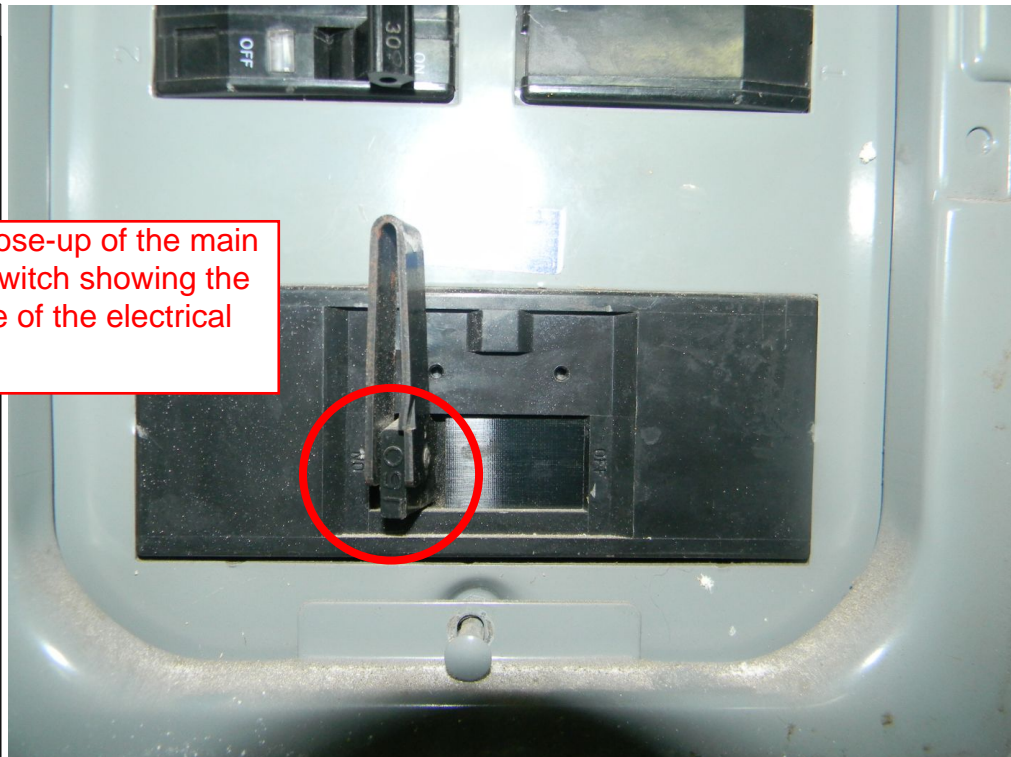
Insured:
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 Agent P:

City: CLEARWATER State: FL Zip: 33763

Photo Description:

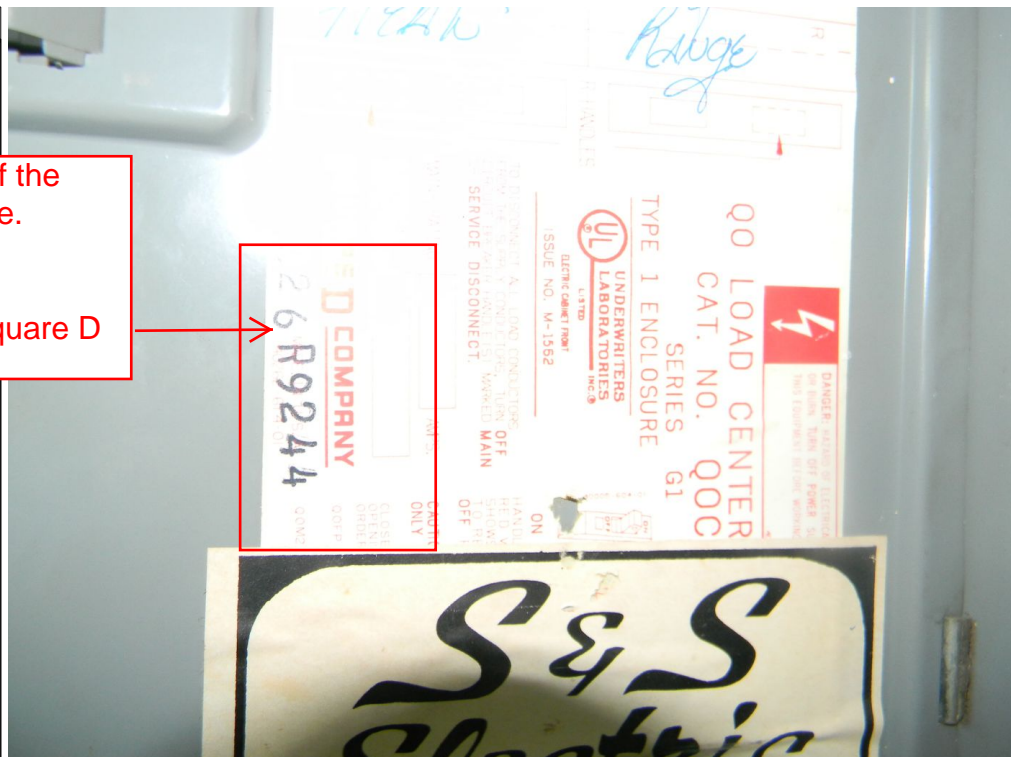
AMP



Take a close-up of the main breaker switch showing the amperage of the electrical system.

Photo Description:

Manufacture name



Provide a photo of the manufacture name.

In this case the manufacture is Square D



Insured:
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Photo Description:

Plumbing Under Sink

Open the cabinet doors in the kitchen and bathrooms and take 'straight-on' photos of the pressurized water supply lines under the sinks. Take note of any corrosion or leaking.

The plumbing updates in your interview refer to the dates that the sinks and/or fixtures were last replaced.



Note the percent of the types of "pressurized" water supply lines (these are the smaller lines that are 1/2" to 3/4" thick...

...NOT the larger 1 1/2 to 2" pipes which are Drain Waste Vent pipes (DWV)

Plumbing Under Sink



Insured:

Location:

Pol. #:

Company:

Agent:

Agent P

City: CLEARWATER

State: FL Zip: 33763

Photo Description:

Water Heater

The water heater photo should show the water supply lines at the top of the tank and enough of the tank to show condition.

Ask the insured if there is a septic or sewer system.



Photo Description:

Air Conditioning

Include a photo of the air handler if it is assessable without having to use a ladder.



Insured:
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Pol. #:
 Company:
 Agent:
 Agent P:

City: CLEARWATER

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Photo Description:

Air Conditioning

Take a photo of the central A/C air condenser on the outside of the house as well as any box window units.

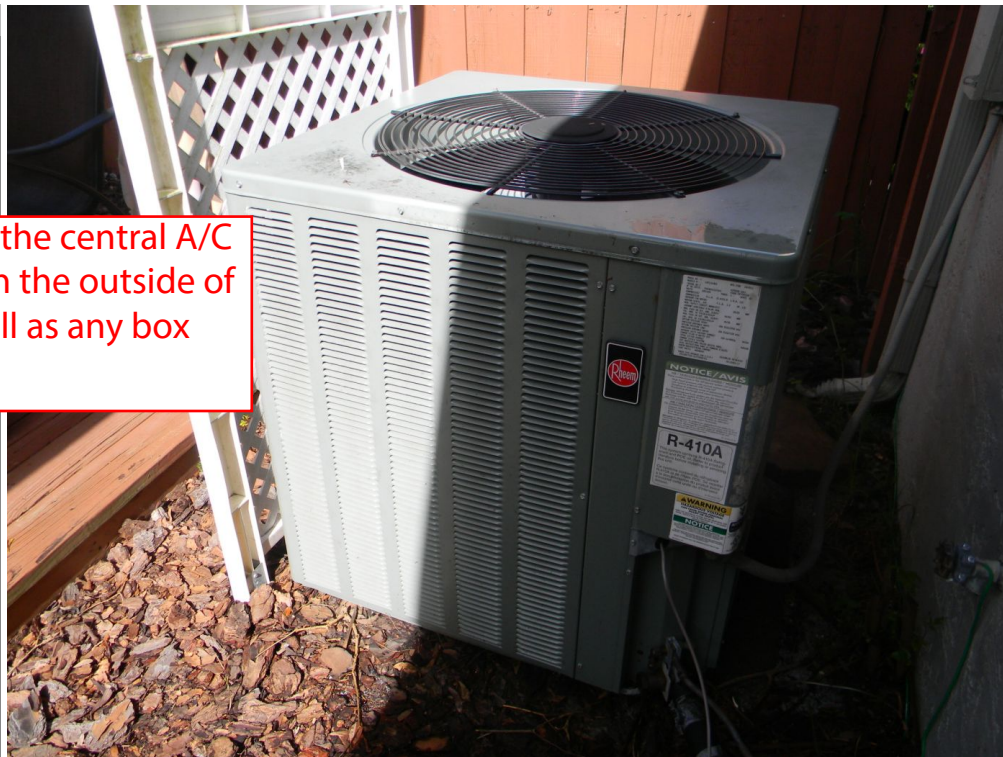


Photo Description:

Manufacture Date

Many air condensers have a specification plate on the side of the unit showing the manufacture date.

