

INSPECTION AGREEMENT

(Please read carefully)

THIS AGREEMENT is made and entered into by and between _____, referred to as "Inspector", and _____, referred to as "Client."

In consideration of the promise and terms of this Agreement, the parties agree as follows:

1. The client will pay the sum of \$ _____ for the inspection of the "Property," being the residence, and garage or carport, if applicable, located at _____.
2. The Inspector will perform a visual inspection and prepare a written report of the apparent condition of the readily accessible installed systems and components of the property existing at the time of the inspection. Latent and concealed defects and deficiencies are excluded from the inspection.
3. The parties agree that the "Standards of Practice" (the "Standards") shall define the standard of duty and the conditions, limitations, and exclusions of the inspection and are incorporated by reference herein. If the State/Province where the inspection is performed imposes more stringent standards or administrative rule, then those standards shall define the standard of duty and the conditions, limitations, and exclusions of the inspection.
4. The parties agree and understand that the Inspector and its employees and its agents assume no liability or responsibility for the costs of repairing or replacing any unreported defects or deficiencies either current or arising in the future or any property damage, consequential damage or bodily injury of any nature. If repairs or replacement are done without giving the Inspector the required notice, the Inspector will have no liability to the Client. The Client further agrees that the Inspector is liable only up to the cost of the inspection. This clause may be contrary to local law. Please verify applicability. Not valid in State/Province of _____.
5. The parties agree and understand the Inspector is not an insurer or guarantor against defects in the structure, items, components, or systems inspected. INSPECTOR MAKES NO WARRANTY, EXPRESS OR IMPLIED, AS TO THE FITNESS FOR USE, CONDITION, PERFORMANCE OR ADEQUACY OF ANY INSPECTED STRUCTURE, ITEM, COMPONENT, OR SYSTEM.
6. If Client is married, Client represents that this obligation is a family obligation incurred in the interest of the family.
7. This Agreement, including the terms and conditions on the reverse side, represents the entire agreement between the parties and there are no other agreements either written or oral between them. This Agreement shall be amended only by written agreement signed by both parties. This Agreement shall be construed and enforced in accordance with the laws of the State/Province of _____, and if that State/Province laws or regulations are more stringent than the forms of the agreement, the State/Province law or rule shall govern.

Client has read this entire Agreement and accepts and understands this Agreement as hereby acknowledged. If no State/Province regulations apply, this report adheres to the _____ Standards, which is available upon request.

Signature: _____ Date: _____ Day: _____
 Signature: _____ Date: _____ Time: _____
 Street Address: _____ Buyer Present: _____
 City/State or Province/Zip or Postal Code: _____ Yes ☐ No ☐
 Agent present: Yes ☐ No ☐ Agent's Name: _____

Inspector's Signature _____ Date: _____ Inspection # _____
 Inspector's Address _____ License/Certification # _____
 City/State/Province/Zip or Postal Code: _____

Client agrees to release reports to seller/buyer/REALTOR® Yes ☐ No ☐

SEE REVERSE SIDE FOR ADDITIONAL TERMS, CONDITIONS, AND LIMITATIONS

CUSTOMER COPY



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BUILDING DATA

Approx. Age: _____ yrs.

Style: ☐ Patio Home ☐ Single Family
☐ Townhome ☐ Condominium
☐ Apartment ☐ _____
☐ Multi-Family

Main Entrance Faces: North _____ South _____ East _____ West _____

State of Occupancy: ☐ Vacant ☐ Occupied ☐ Unoccupied but furnished
☐ Fully ☐ Partially

Weather Conditions: ☐ Sunny ☐ Cloudy ☐ Windy ☐ Snow ☐ Rain
Recent Rain: ☐ Yes ☐ No

Ground cover: ☐ Snow ☐ Wet ☐ Damp ☐ Dry Temperature _____ °F/°C



GROUNDS

Page 1

1. SERVICE WALKS

☐ None

☐ *Public sidewalk needs repair*

Material: ☐ Concrete ☐ Flagstone ☐ Gravel ☐ Brick ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Trip hazard*
☐ *Pitched towards home* ☐ *Settling cracks* ☐ Not visible ☐ Typical cracks

2. DRIVEWAY/PARKING

☐ None

Material: ☐ Concrete ☐ Asphalt ☐ Gravel/Dirt ☐ Brick ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Fill cracks and seal
☐ *Pitched towards home* ☐ *Trip hazard* ☐ *Settling cracks* ☐ Typical crack

3. PORCH (covered entrance)

Support Pier: ☐ Concrete ☐ Wood ☐ None ☐ Not visible ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Railing/Balusters recommended*
Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Safety Hazard*

4. STOOPS/STEPS

☐ None

Material: ☐ Concrete ☐ Wood ☐ Other _____ ☐ *Railing/Balusters recommended*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Cracked* ☐ *Settled*
☐ *Rotted/Damaged* ☐ *Safety Hazard*

5. PATIO/LANAI

Material: ☐ Concrete ☐ Flagstone ☐ Kool-Deck® ☐ Brick ☐ *Trip hazard*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Settling cracks*
☐ *Pitched towards home (See remarks page iv)* ☐ Drainage provided ☐ Typical cracks

6. DECK/BALCONY (flat, floored, roofless area)

☐ None

Material: ☐ Wood ☐ Metal ☐ Composite ☐ Not visible ☐ *Railing/Balusters recommended*
Finish: ☐ Treated ☐ Painted/Stained ☐ Other _____
☐ *Improper attachment to house* ☐ *Railing loose*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Wood in contact with soil*

7. DECK/PATIO/PORCH COVERS

☐ None

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Earth to wood contact* ☐ *Moisture/Insect damage*
Recommend: ☐ Metal Straps/Bolts/Nails/Flashing ☐ *Posts/Supports need Repair*
☐ *Improper attachment to house*

8. FENCE/WALL

☐ Not evaluated

☐ None **Type:**

☐ Brick/Block ☐ Wood ☐ Metal ☐ Chain Link ☐ *Rusted*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Loose Blocks/Caps* ☐ Typical cracks
Gate: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Planks missing/damaged*

9. LANDSCAPING AFFECTING FOUNDATION

(See remarks page iv)

Negative Grade: ☐ East ☐ West ☐ North ☐ South ☐ Satisfactory
☐ *Recommend additional backfill* ☐ *Recommend window wells/covers* ☐ *Trim back trees/shrubberies*
☐ *Wood in contact with/improper clearance to soil* ☐ Yard drains observed-not tested ☐ N/A

10. RETAINING WALL

☐ None

Material _____

☐ *Drainage holes recommended*

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Safety Hazard* ☐ *Leaning/Cracked/Bowed*
(Relates to the visual condition of the wall)

11. HOSE/BIBS

☐ None

Operates: ☐ Yes ☐ No anti-siphon valve ☐ No ☐ Not tested ☐ Not on

GENERAL COMMENTS



ROOF

12. ROOF VISIBILITY ☐ All ☐ Partial ☐ None ☐ Limited by _____

13. INSPECTED FROM ☐ Roof ☐ Ladder at eaves ☐ Ground (*Inspection Limited*) ☐ With Binoculars

14. STYLE OF ROOF ☐ Gable ☐ Hip ☐ Mansard ☐ Shed ☐ Flat ☐ Other _____

Pitch: ☐ Low ☐ Medium ☐ Steep ☐ Flat

ROOF #1 Type: _____ # Layers _____ Approx. age _____ Yrs.

ROOF #2 Type: _____ # Layers _____ Approx. age _____ Yrs.

ROOF #3 Type: _____ # Layers _____ Approx. age _____ Yrs.

15. VENTILATION SYSTEM Type: ☐ Soffit ☐ Ridge ☐ Gable ☐ Roof
Appears Adequate: ☐ Yes ☐ No ☐ Turbine ☐ Powered ☐ Other _____
(See remarks page 16) (See Attic, page 17)

16. FLASHING Material: ☐ Galv/Alum ☐ Asphalt ☐ Not visible ☐ Rubber
☐ Copper ☐ Foam ☐ Other _____ ☐ Lead
Condition: ☐ Not visible ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Rusted
☐ Separated from chimney/roof ☐ Recommend sealing ☐ Other _____

17. VALLEYS ☐ N/A Material: ☐ Galv/Alum ☐ Asphalt ☐ Lead ☐ Copper
☐ Not visible ☐ Other _____
Condition: ☐ Not visible ☐ Satisfactory ☐ Marginal ☐ Poor
☐ Rusted ☐ Holes ☐ Recommend sealing

18. CONDITION OF ROOF COVERINGS
Roof #1: ☐ Satisfactory ☐ Marginal ☐ Poor
Roof #2: ☐ Satisfactory ☐ Marginal ☐ Poor
Roof #3: ☐ Satisfactory ☐ Marginal ☐ Poor
Condition: ☐ Curling ☐ Cracking ☐ Ponding ☐ Burn spots ☐ Broken/Loose Tiles/Shingles
☐ Nail popping ☐ Granules missing ☐ Alligatoring ☐ Blistering ☐ Missing Tabs/Shingles/Tiles
☐ Moss buildup ☐ Exposed felt ☐ Cupping ☐ Incomplete/Improper Nailing

19. SKYLIGHTS ☐ N/A ☐ Cracked/Broken ☐ Not Visible
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

20. PLUMBING VENTS ☐ Yes ☐ No ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Not Visible
☐ Recommend roofer evaluate

Conditions reported above reflect visible portion only ☐ See Additional Comments on page 29

GENERAL COMMENTS _____



EXTERIOR

Page 5

21. CHIMNEY(S) ☐ None Location: #1 _____ #2 _____ #3 _____

Viewed From: ☐ Roof ☐ Ladder at eaves ☐ Ground with binoculars

Rain Cap/Spark Arrestor: ☐ Yes ☐ No ☐ **Recommended**

Chase: ☐ Brick ☐ Stone ☐ Metal ☐ Block ☐ Framed

Evidence of: ☐ Holes in metal ☐ Cracked chimney cap ☐ Loose mortar joints ☐ Flaking ☐ Loose Brick ☐ Rust

Flue: ☐ Tile ☐ Metal ☐ **Unlined** ☐ Not visible

Evidence of: ☐ Scaling ☐ Cracks ☐ Creosote ☐ **Not evaluated (See remarks page 4)**

☐ **Have flue(s) cleaned and re-evaluated** ☐ **Recommend Cricket/Saddle/Flashing**

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

22. GUTTERS/SCUPPERS/EAVESTROUGH ☐ None ☐ Needs to be cleaned ☐ Downspouts needed

Material: ☐ Copper ☐ Vinyl/Plastic ☐ Galvanized/Aluminum ☐ Other: _____

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Rusting

Leaking: ☐ Corners ☐ Joints ☐ Hole in main run

Attachment: ☐ Loose ☐ Missing Spikes ☐ Improperly sloped (See remarks page 4)

Extension needed: ☐ North ☐ South ☐ East ☐ West

23. SIDING (*See remarks page 4 EIFS)

Material: ☐ Stone ☐ Slate ☐ Block/Brick ☐ Fiberboard ☐ Fiber-cement ☐ Stucco

☐ EIFS* ☐ Asphalt ☐ Wood ☐ Metal/Vinyl ☐ Other: _____

☐ Typical Cracks ☐ Monitor ☐ Wood Rot ☐ Peeling Paint ☐ Loose/Missing/Holes

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Recommend Repair/Painting

24. TRIM, SOFFIT, FASCIA, FLASHING

Material: ☐ Wood ☐ Fiberboard ☐ Alum/Steel ☐ Vinyl ☐ Stucco

☐ Recommend Repair/Painting ☐ Damaged Wood ☐ Other: _____

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

25. CAULKING Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

☐ Recommend around windows/doors/masonry ledges/corners/utility penetrations

26. WINDOWS & SCREENS ☐ Failed/Fogged Insulated Glass

Material: ☐ Wood ☐ Metal ☐ Vinyl ☐ Aluminum/Vinyl Clad

Screens: ☐ Torn ☐ Bent ☐ Not installed ☐ Glazing/Caulk needed

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Wood rot ☐ Recommend Repair/Painting

27. STORM WINDOWS ☐ None ☐ Not Installed ☐ Wood ☐ Clad comb. ☐ Wood/Metal comb.

Putty: ☐ Satisfactory ☐ Needed ☐ N/A

Condition: ☐ Satisfactory ☐ Broken/Cracked ☐ Wood rot ☐ Recommend Repair/Painting

28. SLAB ON GRADE/FOUNDATION Stem Wall: ☐ Concrete block ☐ Poured concrete ☐ Other: _____

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Not Visible

☐ N/A (See Basement/Crawl Space) Slab: ☐ Post tensioned ☐ Poured concrete ☐ Other: _____

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

(See Comments Page)

GENERAL COMMENTS _____

**ELECTRICAL/HEAT PUMP - A/C****29. SERVICE ENTRY**

☐ Underground ☐ Overhead ☐ *Weather head/mast needs repair* Condition: ☐ Sat. ☐ Marginal ☐ Poor
Exterior Outlets: ☐ Yes ☐ No Operative: ☐ Yes ☐ No ☐ *Overhead wires too low*
G.F.C.I. Present: ☐ Yes ☐ No Operative: ☐ Yes ☐ No ☐ *Less than 3' from balcony/deck/windows*
☐ Reverse Polarity ☐ *Open Ground(s)* ☐ *Safety Hazard*

Comments: _____

30. BUILDING(S) EXTERIOR WALL CONSTRUCTION

Type: ☐ Not visible ☐ Framed ☐ Masonry ☐ _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Not visible

Comments: _____

31. EXTERIOR DOORS

	<i>Patio</i>	<i>Storm</i>	<i>Entrance</i>		
Weatherstripping:	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Marginal	<input type="checkbox"/> Poor	<input type="checkbox"/> Missing	<input type="checkbox"/> Replace
Door Condition:	<input type="checkbox"/> Satisfactory	<input type="checkbox"/> Marginal	<input type="checkbox"/> Poor		

Comments: _____

32. EXTERIOR A/C - HEAT PUMP

UNIT #1: ☐ N/A Location: _____
Brand _____ Model# _____ Approximate age _____ yrs.
Outside Disconnect: ☐ Yes ☐ No Maximum fuse/breaker rating _____ Amp Fuses/breakers installed _____ Amp
Level: ☐ Yes ☐ No ☐ *Cabinet/Housing rusted* ☐ *Improperly sized fuses/breakers*
Condenser Fins: ☐ *Damaged* ☐ Need cleaning ☐ *Damaged base/pad*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

Comments: _____

UNIT #2: ☐ N/A Location: _____
Brand _____ Model# _____ Approximate age _____ yrs.
Outside Disconnect: ☐ Yes ☐ No Maximum fuse/breaker rating _____ Amp Fuses/breakers installed _____ Amp
Level: ☐ Yes ☐ No ☐ *Cabinet/Housing rusted* ☐ *Improperly sized fuses/breakers*
Condenser Fins: ☐ *Damaged* ☐ Need cleaning ☐ *Damaged base/pad*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

Comments: _____



GARAGE

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33. TYPE

- ☐ None
☐ Attached ☐ Detached ☐ 1-car ☐ 2-car ☐ 3-car ☐ 4-car

34. AUTOMATIC OPENER

- ☐ Yes ☐ No ☐ Operable ☐ Inoperable ☐ *Remote not available*

35. SAFETY REVERSES

- Operable:** ☐ Pressure Reverse ☐ Electric Eye ☐ *Need(s) adjusting*
☐ *Safety Hazard*

36. ROOFING

- Material:** ☐ Same as house ☐ Type: _____ Approx. age _____ Approx. layers _____

37. GUTTERS/EAVESTROUGH

- ☐ None **Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor

38. FLOOR

- Material:** ☐ Concrete ☐ Gravel ☐ Asphalt ☐ Dirt ☐ Other _____
Condition: ☐ Satisfactory ☐ Typical cracks ☐ *Large settling cracks* ☐ *Recommend Evaluation/Repair*
Burners less than 18" above garage floor: ☐ N/A ☐ Yes ☐ No ☐ *Safety Hazard*

39. SILL PLATES

- ☐ Not visible ☐ Floor Level ☐ Elevated ☐ *Rotted/Damaged* ☐ *Recommend repair*

40. OVERHEAD DOOR(S)

- ☐ N/A
Material: ☐ Wood ☐ Fiberglass ☐ Masonite ☐ Metal ☐ *Recommend repair*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Overhead door hardware loose*
Recommend Priming/Painting Inside & Edges: ☐ Yes ☐ No ☐ *Recommend lubrication* ☐ *Weatherstripping missing/Damaged*

41. EXTERIOR SERVICE DOOR

- ☐ None
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Damaged/Rusted*

42. ELECTRICITY PRESENT:

- ☐ Yes ☐ No ☐ Not visible
Reverse Polarity: ☐ Yes ☐ No **Open ground:** ☐ Yes ☐ No ☐ *Safety Hazard*
GFCI Present: ☐ Yes ☐ No **Operates:** ☐ Yes ☐ No ☐ *Handyman/Extension Cord Wiring*

43. FIRE SEPARATION WALLS AND CEILING

- ☐ N/A ☐ Present ☐ Missing
☐ *Recommend repair*
Fire door: ☐ Not verifiable ☐ *Not a fire door* ☐ *Needs repair* ☐ Satisfactory
Auto closure: ☐ N/A ☐ Satisfactory ☐ Inoper. ☐ Missing ☐ *Needs repair*
Moisture stains present: ☐ Yes ☐ No **Typical cracks:** ☐ Yes ☐ No

44. SIDING/TRIM

- Siding:** ☐ Same as house ☐ Wood ☐ Metal ☐ Vinyl
☐ Stucco ☐ Masonry ☐ Slate ☐ Fiberboard
Trim: ☐ Same as house ☐ Wood ☐ Aluminum ☐ Vinyl

GENERAL COMMENTS



Unit # _____

45. COUNTERTOPS

☐ Satisfactory

☐ Marginal

☐ *Recommend repair/caulking*

46. CABINETS

☐ Satisfactory

☐ Marginal

☐ *Recommend repair/adjustment*

47. PLUMBING COMMENTS

Faucet Leaks: ☐ Yes ☐ No

Sink/Faucet: ☐ Satisfactory

☐ Corroded

Pipes leak/corroded: ☐ Yes ☐ No

☐ Chipped ☐ Cracked ☐ *Recommend Repair*

Functional Drainage: ☐ Adequate

☐ Poor

Functional Flow: ☐ Adequate

☐ Poor

Comments: _____

48. WALLS & CEILING

Condition: ☐ Satisfactory

☐ Marginal

☐ Poor

☐ Typical cracks

☐ *Moisture stains*

49. HEATING/COOLING SOURCE

☐ Yes ☐ No

50. FLOOR

Condition: ☐ Satisfactory

☐ Marginal

☐ Poor

☐ Sloping

☐ Squeaks

Comments: _____

51. APPLIANCES

(See remarks page 10)

☐ Disposal

Operates: ☐ Yes ☐ No

☐ Trash Compactor

Operates: ☐ Yes ☐ No

☐ Oven

Operates: ☐ Yes ☐ No

☐ Exhaust Fan

Operates: ☐ Yes ☐ No

☐ Range

Operates: ☐ Yes ☐ No

☐ Refrigerator

Operates: ☐ Yes ☐ No

☐ Dishwasher

Operates: ☐ Yes ☐ No

☐ Microwave

Operates: ☐ Yes ☐ No

☐ _____

Operates: ☐ Yes ☐ No

Dishwasher Airgap: ☐ Yes ☐ No

Dishwasher Drain Line Looped: ☐ Yes ☐ No

Outlets Present: ☐ Yes ☐ No

Operable: ☐ Yes ☐ No

G.F.C.I.: ☐ Yes ☐ No

Operable: ☐ Yes ☐ No

Open ground/Reverse polarity within 6 ft. of water: ☐ Yes ☐ No ☐ *Potential Safety Hazard(s)*

Comments: _____

LAUNDRY ROOM

Laundry sink: ☐ N/A

Faucet leaks: ☐ Yes ☐ No

Pipes leak: ☐ Yes ☐ No

Cross connections: ☐ Yes ☐ No

Heat source present: ☐ Yes ☐ No

Room vented: ☐ Yes ☐ No

Dryer vented: ☐ N/A

☐ Wall ☐ Ceiling

☐ Floor ☐ Not vented

☐ *Not vented to Exterior*

☐ *Recommend Repair*

☐ *Safety Hazard*

Electrical: Open ground/reverse polarity within 6' of water ☐ Yes ☐ No

☐ *Safety Hazard*

G.F.C.I. present: ☐ Yes ☐ No

Operates: ☐ Yes ☐ No

Appliances: ☐ Washer

☐ Dryer ☐ Water Heater

☐ Furnace

Washer hook-up lines/valves: ☐ Leaking

☐ Corroded

☐ Not visible

Gas Shut-off Valve: ☐ N/A

☐ Yes ☐ No

☐ Cap needed

☐ *Safety hazard* ☐ Not visible

Comments: _____



BATHROOM(S)

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52. BATH: _____

UNIT # _____

53. SINKS TUBS SHOWERS

Faucet(s) Leak: ☐ Yes ☐ No Loose: ☐ Yes ☐ No Pipes Leak: ☐ Yes ☐ No
Fixture(s) Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

54. TOILET

Bowl Loose: ☐ Yes ☐ No Operates: ☐ Yes ☐ No ☐ Toilet leaks ☐ Cracked bowl/tank
☐ Cross connection

55. SHOWER/TUB AREA/SINK(S)

Material: ☐ Ceramic/Plastic ☐ Fiberglass ☐ Masonite ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Rotted floors
Caulk/Grouting needed: ☐ Yes ☐ No Where: _____
Functional Drainage: ☐ Adequate ☐ Poor Functional Flow: ☐ Adequate ☐ Poor
Whirlpool Operable: ☐ N/A ☐ Yes ☐ No Access panel to pump/motor: ☐ Yes ☐ No

56. WALLS/CEILING/CABINETS

G.F.C.I. Present: ☐ Yes ☐ No Outlets Present: ☐ Yes ☐ No
Operates: ☐ Yes ☐ No
Open ground/reverse polarity within 6' water: ☐ Yes ☐ No Potential safety hazards present: ☐ Yes ☐ No

57. HEAT /COOLING SOURCE

☐ Yes ☐ No Window/Door: ☐ Yes ☐ No ☐ Sat. ☐ Marg. ☐ Poor
Exhaust Fan: ☐ Yes ☐ No Operates: ☐ Yes ☐ No Noisy: ☐ Yes ☐ No

Comments: _____

58. BATH: _____

UNIT # _____

59. SINKS TUBS SHOWERS

Faucet(s) Leak: ☐ Yes ☐ No Loose: ☐ Yes ☐ No Pipes Leak: ☐ Yes ☐ No
Fixture(s) Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

60. TOILET

Bowl Loose: ☐ Yes ☐ No Operates: ☐ Yes ☐ No ☐ Toilet leaks ☐ Cracked bowl/tank
☐ Cross connection

61. SHOWER/TUB AREA/SINK(S)

Material: ☐ Ceramic/Plastic ☐ Fiberglass ☐ Masonite ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Rotted floors
Caulk/Grouting needed: ☐ Yes ☐ No Where: _____
Functional Drainage: ☐ Adequate ☐ Poor Functional Flow: ☐ Adequate ☐ Poor
Whirlpool Operable: ☐ N/A ☐ Yes ☐ No Access panel to pump/motor: ☐ Yes ☐ No

62. WALLS/CEILING/CABINETS

Moisture Stains Present: ☐ Yes ☐ No Outlets Present: ☐ Yes ☐ No
G.F.C.I. Present: ☐ Yes ☐ No Operates: ☐ Yes ☐ No
Open ground/reverse polarity within 6' water: ☐ Yes ☐ No Potential safety hazards present: ☐ Yes ☐ No

63. HEAT /COOLING SOURCE

☐ Yes ☐ No Window/Door: ☐ Yes ☐ No ☐ Sat. ☐ Marg. ☐ Poor
Exhaust Fan: ☐ Yes ☐ No Operates: ☐ Yes ☐ No Noisy: ☐ Yes ☐ No

Comments: _____



BATHROOM(S)

52. BATH:

UNIT #

53. SINKS TUBS SHOWERS

Faucet(s) Leak: ☐ Yes ☐ No Loose: ☐ Yes ☐ No Pipes Leak: ☐ Yes ☐ No
 Fixture(s) Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

54. TOILET

Bowl Loose: ☐ Yes ☐ NoOperates: ☐ Yes ☐ No ☐ Toilet leaks

☐ Cracked bowl/tank
☐ Cross connection

55. SHOWER/TUB AREA/SINK(S)

Material: ☐ Ceramic/Plastic☐ Fiberglass☐ Masonite☐ OtherCondition: ☐ Satisfactory ☐ Marginal☐ Poor☐ Rotted floorsCaulk/Grouting needed: ☐ Yes ☐ No

Where:

Functional Drainage: ☐ Adequate☐ PoorFunctional Flow: ☐ Adequate☐ PoorWhirlpool Operable: ☐ N/A ☐ Yes ☐ NoAccess panel to pump/motor: ☐ Yes☐ No

56. WALLS/CEILING/CABINETS

G.F.C.I. Present: ☐ Yes ☐ NoOutlets Present: ☐ Yes ☐ NoOperates: ☐ Yes ☐ NoOpen ground/reverse polarity within 6' water: ☐ Yes ☐ NoPotential safety hazards present: ☐ Yes ☐ No

57. HEAT /COOLING SOURCE

☐ Yes ☐ NoWindow/Door: ☐ Yes ☐ No ☐ Sat. ☐ Marg. ☐ PoorExhaust Fan: ☐ Yes ☐ NoOperates: ☐ Yes ☐ No Noisy: ☐ Yes ☐ No

Comments:

58. BATH:

UNIT #

59. SINKS TUBS SHOWERS

Faucet(s) Leak: ☐ Yes ☐ No Loose: ☐ Yes ☐ No Pipes Leak: ☐ Yes ☐ No
 Fixture(s) Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

60. TOILET

Bowl Loose: ☐ Yes ☐ NoOperates: ☐ Yes ☐ No ☐ Toilet leaks

☐ Cracked bowl/tank
☐ Cross connection

61. SHOWER/TUB AREA/SINK(S)

Material: ☐ Ceramic/Plastic☐ Fiberglass☐ Masonite☐ OtherCondition: ☐ Satisfactory ☐ Marginal☐ Poor☐ Rotted floorsCaulk/Grouting needed: ☐ Yes ☐ No

Where:

Functional Drainage: ☐ Adequate☐ PoorFunctional Flow: ☐ Adequate☐ PoorWhirlpool Operable: ☐ N/A ☐ Yes ☐ NoAccess panel to pump/motor: ☐ Yes☐ No

62. WALLS/CEILING/CABINETS

Moisture Stains Present: ☐ Yes ☐ NoOutlets Present: ☐ Yes ☐ NoG.F.C.I. Present: ☐ Yes ☐ NoOperates: ☐ Yes ☐ NoOpen ground/reverse polarity within 6' water: ☐ Yes ☐ NoPotential safety hazards present: ☐ Yes ☐ No

63. HEAT /COOLING SOURCE

☐ Yes ☐ NoWindow/Door: ☐ Yes ☐ No ☐ Sat. ☐ Marg. ☐ PoorExhaust Fan: ☐ Yes ☐ NoOperates: ☐ Yes ☐ No Noisy: ☐ Yes ☐ No

Comments:



ROOMS

Page 15

64. LOCATION:

ROOM(S)

UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor Moisture Stains: ☐ Yes ☐ No Where: _____

Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes Typical Cracks: ☐ Yes ☐ No

Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor

Electrical: Switches: ☐ Yes ☐ No Outlets: ☐ Yes ☐ No Operates: ☐ Yes ☐ No

Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ Safety Hazard

Heat/Cooling Source: ☐ Yes ☐ No Holes: ☐ Doors ☐ Walls ☐ Ceilings

Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No

Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass

Comments: _____

65. LOCATION:

ROOM(S)

UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor Moisture Stains: ☐ Yes ☐ No Where: _____

Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes Typical Cracks: ☐ Yes ☐ No

Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor

Electrical: Switches: ☐ Yes ☐ No Outlets: ☐ Yes ☐ No Operates: ☐ Yes ☐ No

Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ Safety Hazard

Heat/Cooling Source: ☐ Yes ☐ No Holes: ☐ Doors ☐ Walls ☐ Ceilings

Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No

Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass

Comments: _____

66. LOCATION:

ROOM(S)

UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor Moisture Stains: ☐ Yes ☐ No Where: _____

Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes Typical Cracks: ☐ Yes ☐ No

Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor

Electrical: Switches: ☐ Yes ☐ No Outlets: ☐ Yes ☐ No Operates: ☐ Yes ☐ No

Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ Safety Hazard

Heat/Cooling Source: ☐ Yes ☐ No Holes: ☐ Doors ☐ Walls ☐ Ceilings

Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No

Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass

Comments: _____

67. LOCATION:

ROOM(S)

UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor Moisture Stains: ☐ Yes ☐ No Where: _____

Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes Typical Cracks: ☐ Yes ☐ No

Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor

Electrical: Switches: ☐ Yes ☐ No Outlets: ☐ Yes ☐ No Operates: ☐ Yes ☐ No

Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ Safety Hazard

Heat/Cooling Source: ☐ Yes ☐ No Holes: ☐ Doors ☐ Walls ☐ Ceilings

Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No

Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass

Comments: _____

64. LOCATION:
ROOM(S)
UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor **Moisture Stains:** ☐ Yes ☐ No **Where:** _____
Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes **Typical Cracks:** ☐ Yes ☐ No
Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor
Electrical: **Switches:** ☐ Yes ☐ No **Outlets:** ☐ Yes ☐ No **Operates:** ☐ Yes ☐ No
Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ **Safety Hazard**
Heat/Cooling Source: ☐ Yes ☐ No **Holes:** ☐ Doors ☐ Walls ☐ Ceilings
Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No
Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass
Comments: _____

65. LOCATION:
ROOM(S)
UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor **Moisture Stains:** ☐ Yes ☐ No **Where:** _____
Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes **Typical Cracks:** ☐ Yes ☐ No
Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor
Electrical: **Switches:** ☐ Yes ☐ No **Outlets:** ☐ Yes ☐ No **Operates:** ☐ Yes ☐ No
Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ **Safety Hazard**
Heat/Cooling Source: ☐ Yes ☐ No **Holes:** ☐ Doors ☐ Walls ☐ Ceilings
Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No
Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass
Comments: _____

66. LOCATION:
ROOM(S)
UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor **Moisture Stains:** ☐ Yes ☐ No **Where:** _____
Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes **Typical Cracks:** ☐ Yes ☐ No
Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor
Electrical: **Switches:** ☐ Yes ☐ No **Outlets:** ☐ Yes ☐ No **Operates:** ☐ Yes ☐ No
Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ **Safety Hazard**
Heat/Cooling Source: ☐ Yes ☐ No **Holes:** ☐ Doors ☐ Walls ☐ Ceilings
Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No
Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass
Comments: _____

67. LOCATION:
ROOM(S)
UNIT #

Walls & Ceiling: ☐ Satisfactory ☐ Marginal ☐ Poor **Moisture Stains:** ☐ Yes ☐ No **Where:** _____
Floor: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Squeaks ☐ Slopes **Typical Cracks:** ☐ Yes ☐ No
Ceiling Fan: ☐ N/A ☐ Satisfactory ☐ Marginal ☐ Poor
Electrical: **Switches:** ☐ Yes ☐ No **Outlets:** ☐ Yes ☐ No **Operates:** ☐ Yes ☐ No
Open ground/Reverse polarity: ☐ Yes ☐ No ☐ Coverplates Missing ☐ **Safety Hazard**
Heat/Cooling Source: ☐ Yes ☐ No **Holes:** ☐ Doors ☐ Walls ☐ Ceilings
Bedroom Egress Restricted: ☐ N/A ☐ Yes ☐ No
Doors & Windows: Operational: ☐ Yes ☐ No Locks/Latches Operable: ☐ Yes ☐ No ☐ Missing ☐ Cracked glass
Comments: _____

**68. INTERIOR WINDOWS/GLASS**

- Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Needs Repair
☐ Representative number of windows operated ☐ Painted shut (See remarks page 16)
- Evidence of Leaking Insulated Glass:** ☐ Yes ☐ No ☐ N/A **Safety Glazing Needed:** ☐ Yes ☐ No
☐ Glazing compound needed ☐ Cracked glass ☐ Hardware missing ☐ Broken counter-balance mechanism
- Security Bars Present:** ☐ Yes ☐ No ☐ Not tested ☐ Safety hazard ☐ Test release mechanism before moving in

69. FIREPLACE

- ☐ None Location #1 _____ #2 _____ #3 _____
- Type:** ☐ Gas (Not Tested) ☐ Wood ☐ Woodburner stove (See remarks page 16) ☐ Electric ☐ Ventless
- Material:** ☐ Masonry ☐ Metal (pre-fabricated) ☐ Metal insert
- Miscellaneous:** ☐ Blower built-in Operates: ☐ Yes ☐ No **Damper operates:** ☐ Yes ☐ No
☐ Open joints or cracks in firebrick/panels should be sealed ☐ Fireplace doors need repair
- Damper Modified for Gas Operation:** ☐ Yes ☐ No ☐ Damper missing ☐ Pre-fab panels damaged/worn
- Hearth Adequate:** ☐ Yes ☐ No **Mantel:** ☐ N/A ☐ Adequate ☐ Loose
- Physical Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Recommend having flue cleaned and re-examined

70. STAIRS/STEPS/BALCONIES

- ☐ Satisfactory ☐ Marginal ☐ Poor ☐ None
- Handrail:** ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Safety hazard
- Risers/Treads:** ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Risers/Treads uneven

71. SMOKE /CARBON MONOXIDE DETECTORS

(See remarks page 16)

- Present:** Smoke Detector ☐ Yes ☐ No **Operates:** Smoke Detector ☐ Yes ☐ No ☐ Not tested
CO Detector ☐ Yes ☐ No CO Detector ☐ Yes ☐ No ☐ Not tested

72. ATTIC/STRUCTURE/FRAMING/INSULATION

- ☐ N/A
- Access:** ☐ Stairs ☐ Pulldown ☐ Scuttlehole/Hatch ☐ No access ☐ Other _____
- Inspected From:** ☐ Access Panel ☐ In the attic ☐ Other _____
- Location:** ☐ Bedroom Hall ☐ Bedroom Closet ☐ Garage ☐ Other _____
- Access Limited By:** _____
- Flooring:** ☐ Complete ☐ Partial ☐ None
- Insulation:** ☐ Fiberglass ☐ Batts ☐ Loose ☐ Cellulose ☐ Other _____
☐ Vermiculite ☐ Rockwool Depth _____" ☐ Recommend Baffles @ Eaves
☐ Damaged ☐ Displaced ☐ Missing ☐ Compressed
- Ventilation:** ☐ Ventilation Appears Adequate ☐ Recommend Additional Ventilation
- Installed In:** ☐ Rafters ☐ Walls ☐ Between ceiling joist ☐ Not visible
☐ Recommend additional insulation (See comment on page 16)
- Fans Exhausted To:** ☐ N/A **Attic:** ☐ Yes ☐ No **Outside:** ☐ Yes ☐ No ☐ Not visible
- HVAC Duct:** ☐ N/A ☐ Satisfactory ☐ Damaged ☐ Split ☐ Disconnected ☐ Leaking ☐ Repair/Replace
- Chimney Chase:** ☐ N/A ☐ Satisfactory ☐ Needs repair ☐ Not visible
- Structural Problems Observed:** ☐ Yes ☐ No ☐ Recommend Repair ☐ Recommend Structural Engineer
- Roof structure:** ☐ Rafters ☐ Trusses ☐ Wood ☐ Metal ☐ Other _____
- Collar ties present:** ☐ Yes ☐ No ☐ N/A
- Sheathing:** ☐ Plywood ☐ OSB ☐ 1x _____ ☐ Rotted ☐ Stained ☐ Delaminated
- Evidence of Condensation/Moisture Leaking:** ☐ Yes ☐ No (See remarks page 16)
- Ceiling Joists:** ☐ Wood ☐ Metal ☐ Other ☐ Not visible
- Vapor Barriers:** ☐ Kraft/foil faced ☐ Plastic ☐ Not visible ☐ Improperly installed
- Firewall Between Units:** ☐ N/A ☐ Yes ☐ No ☐ Needs repair/sealing (See remarks page 16)
- Electrical:** ☐ Open Junction box(es) ☐ Handyman wiring ☐ Visible knob-and-tube

GENERAL COMMENTS

BASEMENT

73. STAIRS

☐ N/A
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Typical Wear and Tear ☐ Need repair
Handrail: ☐ Yes ☐ No **Condition:** ☐ Satisfactory ☐ Loose
Headway over stairs: ☐ Satisfactory ☐ Low Clearance ☐ Safety hazard

74. FOUNDATION

Condition: ☐ Satisfactory ☐ Marginal ☐ Have Evaluated ☐ Monitor
Material: ☐ Brick ☐ Concrete block ☐ Fieldstone ☐ Poured Concrete
Horizontal Cracks: ☐ North ☐ South ☐ East ☐ West
Step Cracks: ☐ North ☐ South ☐ East ☐ West
Vertical Cracks: ☐ North ☐ South ☐ East ☐ West
Covered Walls: ☐ North ☐ South ☐ East ☐ West
Movement Apparent: ☐ North ☐ South ☐ East ☐ West

Basement/
Crawlspace walls
North

West

East

South

Indication of Moisture: ☐ Yes ☐ No ☐ Fresh ☐ Old Stains

Condition reported above reflects visible portion only.

75. FLOOR

Material: ☐ Concrete ☐ Dirt/Gravel ☐ Not Visible ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Typical Cracks

76. SEISMIC BOLTS

☐ N/A ☐ None Visible ☐ Appear Satisfactory ☐ Recommend Evaluation

77. BASEMENT DRAINAGE

Sump Pump: ☐ Yes ☐ No ☐ Working ☐ Not working ☐ Needs cleaning ☐ Not tested
Floor Drains ☐ Yes ☐ No **Tested:** ☐ Yes ☐ No ☐ Efflorescence Present

78. GIRDERS/BEAMS/COLUMNS

Material: ☐ Steel ☐ Wood ☐ Concrete ☐ Block ☐ Not visible
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ Stained/Rusted

79. JOISTS:

Material: ☐ Wood ☐ Steel ☐ Truss ☐ Not Visible
☐ 2 x 8 ☐ 2 x 10 ☐ 2 x 12 ☐ Engineered I-Type ☐ Sagging/Altered Joists
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

80. SUB FLOOR

☐ indication of moisture stains/rotting
 **Areas around shower stalls, etc., as viewed from basement or crawl space.

GENERAL COMMENTS



CRAWL SPACE

☐ N/A ☐ Full crawl space ☐ Combination basement/crawl space/slab
 Conditioned (heated/cooled) ☐ Yes ☐ No

81. ACCESS ☐ Exterior ☐ Interior hatch door ☐ Via basement ☐ No access
Inspected from: ☐ Access panel ☐ In the crawl space

82. FOUNDATION WALLS Condition: ☐ Satisfactory ☐ Marginal ☐ Have Evaluated ☐ Monitor
☐ Concrete block ☐ Poured ☐ Stone
☐ Wood ☐ Brick ☐ Piers & Columns
☐ Cracks ☐ Movement

83. FLOOR ☐ Concrete ☐ Gravel ☐ Dirt ☐ Other _____
☐ Typical cracks

84. SEISMIC BOLTS

☐ N/A ☐ None Visible ☐ Appear Satisfactory ☐ Recommend Evaluation

85. DRAINAGE ☐ Outside drain ☐ Sump pump: ☐ Yes ☐ No Operable: ☐ Yes ☐ No
☐ None apparent Evidence of moisture damage: ☐ Yes ☐ No

86. VENTILATION ☐ Wall vents ☐ Power vents ☐ None apparent

87. GIRDERS/BEAMS/COLUMNS ☐ Steel ☐ Wood ☐ Masonry ☐ Not visible
 Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

88. JOIST Material: ☐ Wood ☐ Steel ☐ Truss
☐ Not Visible ☐ 2 x 8 ☐ 2 x 10 ☐ 2 x 12 ☐ Engineered I-Type ☐ Sagging/Altered Joists
 Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

89. SUB FLOOR ☐ Not visible ☐ Wood ☐ Concrete ☐ Other _____

90. MOISTURE STAINS ☐ None ☐ Walls ☐ Sub floor ☐ Other _____

91. INSULATION ☐ None Type: _____
 Location: ☐ Walls ☐ Between floor joists ☐ Other _____

92. VAPOR BARRIER ☐ Yes ☐ No
 Type: ☐ Kraft face ☐ Plastic
☐ Other ☐ Not visible

Diagram indicates where walls were not visible and type of covering:

Legend: C = Cracks P = Paneling
 M = Monitor D = Drywall
 E = Evaluate S = Storage
 O = Other

Comments: _____

Basement/Crawlspace walls
 North

West

East

South

**93. WATER SERVICE****Main Shut-off Location:**

Water Entry Piping: ☐ Not visible ☐ Copper/Galv. ☐ Plastic* (PVC, CPVC, Polybutylene, PEX) ☐ Unknown
Visible Water Distribution Piping: ☐ Copper ☐ Galvanized ☐ Plastic* (PVC, CPVC, Polybutylene, PEX) ☐ Other _____
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor
Lead Other Than Solder Joints: ☐ Yes ☐ No ☐ Unknown ☐ Service Entry
Functional Flow: ☐ Adequate ☐ Poor **Cross connection:** ☐ Yes ☐ No
Pipes, Supply/Drain: ☐ Corroded ☐ Leaking ☐ Valves broken/missing ☐ Dissimilar Metals
Drain, Waste & Vent pipe: ☐ Copper ☐ Cast Iron ☐ Galvanized ☐ PVC ☐ ABS
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor
Support/Insulation: Type: _____ ☐ Water pressure over 80 psi
Traps Proper P-Type: ☐ N/A ☐ Yes ☐ No ☐ P-Traps Recommended
Functional Drainage: ☐ Adequate ☐ Poor ☐ Recommend plumber evaluate
Interior Fuel Storage System: ☐ Yes ☐ No Leaking: ☐ Yes ☐ No
Gas Line: ☐ Copper ☐ Brass ☐ Black Iron ☐ Stainless Steel ☐ CSST ☐ Not visible
Condition: ☐ Sat. ☐ Marginal ☐ Poor

94. MAIN FUEL SHUT OFF LOCATION☐ N/A**95. WELL PUMP**☐ N/A

☐ Submersible ☐ In Basement ☐ Well House ☐ Well Pit ☐ Shared Well
Pressure Gauge Operates: ☐ Yes ☐ No ☐ Unknown Well Pressure _____ psi ☐ Not visible

96. SANITARY/GRINDER PUMP

Check Valve: ☐ Yes ☐ No

☐ N/A **Sealed Crock:** ☐ Yes ☐ No
Vented: ☐ Yes ☐ No

97. WATER HEATER #1☐ N/A

Brand Name: _____ **Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor
Type: ☐ Gas ☐ Electric **Serial #:** _____
Unit Elevated: ☐ Yes ☐ No ☐ N/A ☐ Oil ☐ Other: _____
Capacity _____ gals. **Approx. Age** _____ yrs. ☐ Tank/Piping Corroded/Leaking
Seismic restraints needed: ☐ Yes ☐ No ☐ N/A **Combustion air venting present:** ☐ Yes ☐ No ☐ N/A
Relief Valve: ☐ Yes ☐ No **Extension Proper:** ☐ Yes ☐ No ☐ Missing ☐ Recommend repair
Vent Pipe: ☐ N/A ☐ Satisfactory ☐ Pitch proper ☐ Improper ☐ Rusted ☐ Recommend repair

98. WATER HEATER #2☐ N/A

Brand Name: _____ **Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor
Type: ☐ Gas ☐ Electric **Serial #:** _____
Unit Elevated: ☐ Yes ☐ No ☐ N/A ☐ Oil ☐ Other: _____
Capacity _____ gals. **Approx. Age** _____ yrs. ☐ Tank/Piping Corroded/Leaking
Seismic restraints needed: ☐ Yes ☐ No ☐ N/A **Combustion air venting present:** ☐ Yes ☐ No ☐ N/A
Relief Valve: ☐ Yes ☐ No **Extension Proper:** ☐ Yes ☐ No ☐ Missing ☐ Recommend repair
Vent Pipe: ☐ N/A ☐ Satisfactory ☐ Pitch proper ☐ Improper ☐ Rusted ☐ Recommend repair

99. WATER SOFTENER

(Unit not evaluated)

Loop Installed: ☐ Yes ☐ No **Plumbing Hooked Up:** ☐ Yes ☐ No
Softener Present: ☐ Yes ☐ No **Plumbing leaking:** ☐ Yes ☐ No

GENERAL COMMENTS



HEATING SYSTEM

Page 25

100. UNIT #1

Location: _____

(See remarks page 24)

Brand Name _____

Approximate Age: _____ yrs

☐ Unknown

Model # _____

Serial # _____

Energy Source:

☐ Gas

☐ LP

☐ Oil

☐ Electric

☐ Solid Fuel

Warm Air Systems:

☐ Belt drive

☐ Direct drive

☐ Gravity

☐ Central system

☐ Floor/Wall unit

Heat exchanger:

☐ N/A (Sealed)

☐ Visual with mirror

☐ Flame distortion

☐ Rusty ☐ Carbon/Soot Build up

Carbon Monoxide:

☐ N/A

☐ Detected at Plenum/Register

☐ Not Tested

CO Test:

☐ Tester: _____

Combustion Air Venting Present: ☐ Yes ☐ No ☐ N/A

Controls:

Disconnect

☐ Yes

☐ No

☐ Normal operating and safety controls observed

Distribution:

☐ Metal duct

☐ Insulated flex duct

☐ Cold air return ☐ Duct board ☐ Asbestos-like wrap

Flue Piping:

☐ N/A

☐ Rusty

☐ Improper slope

☐ Safety Hazard

Supports for Piping/Insulation:

☐ N/A

☐ Yes ☐ No

Filter:

☐ Standard

☐ Electrostatic

☐ Satisfactory

☐ Needs Cleaning/Replacement

☐ Missing

When Turned On By Thermostat:

☐ Fired

☐ Did not fire

Proper Operation: ☐ Yes ☐ No ☐ Not tested

Heat pump:

☐ Aux. electric

☐ Aux. gas

☐ N/A

Sub-Slab ducts: Water/Sand Observed ☐ Yes ☐ No ☐ N/A

System Not Operated Due To: ☐ Exterior temperature

☐ Other _____

☐ Recommend technician examine

System Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

101. UNIT #2

Location: _____

(See remarks page 24)

Brand Name _____

Approximate Age: _____ yrs

☐ Unknown

Model # _____

Serial # _____

Energy Source:

☐ Gas

☐ LP

☐ Oil

☐ Electric

☐ Solid Fuel

Warm Air Systems:

☐ Belt drive

☐ Direct drive

☐ Gravity

☐ Central system

☐ Floor/Wall unit

Heat exchanger:

☐ N/A (Sealed)

☐ Visual with mirror

☐ Flame distortion

☐ Rusty ☐ Carbon/Soot Build up

Carbon Monoxide:

☐ N/A

☐ Detected at Plenum/Register

☐ Not Tested

CO Test:

☐ Tester: _____

Combustion Air Venting Present: ☐ Yes ☐ No ☐ N/A

Controls:

Disconnect

☐ Yes

☐ No

☐ Normal operating and safety controls observed

Distribution:

☐ Metal duct

☐ Insulated flex duct

☐ Cold air return ☐ Duct board ☐ Asbestos-like wrap

Flue Piping:

☐ N/A

☐ Rusty

☐ Improper slope

☐ Safety Hazard

Supports for Piping/Insulation:

☐ N/A

☐ Yes ☐ No

Filter:

☐ Standard

☐ Electrostatic

☐ Satisfactory

☐ Needs Cleaning/Replacement

☐ Missing

When Turned On By Thermostat:

☐ Fired

☐ Did not fire

Proper Operation: ☐ Yes ☐ No ☐ Not tested

Heat pump:

☐ Aux. electric

☐ Aux. gas

☐ N/A

Sub-Slab ducts: Water/Sand Observed ☐ Yes ☐ No ☐ N/A

System Not Operated Due To: ☐ Exterior temperature

☐ Other _____

☐ Recommend technician examine

System Condition: ☐ Satisfactory ☐ Marginal ☐ Poor

102. BOILER SYSTEM

☐ N/A

Location: _____

Brand Name _____

Approximate Age: _____ yrs

☐ Unknown

Model # _____

Serial # _____

Energy Source:

☐ Gas

☐ LP

☐ Oil

☐ Electric

Distribution:

☐ Hot water

☐ Baseboard

☐ Steam

☐ Radiator

Circulator:

☐ Pump

☐ Gravity

☐ Multiple zones

Controls:

Temp/Pressure Gauge Exist: ☐ Yes ☐ No

Operating: ☐ Yes ☐ No

Oil Fired Units:

Disconnect

☐ Yes ☐ No

Combustion Air Venting Present: ☐ Yes ☐ No ☐ N/A

Relief Valve:

☐ Yes

☐ No

☐ Missing

Extension Proper: ☐ Yes ☐ No

Operated:

When Turned On By Thermostat: ☐ Fired

☐ Did not fire

Operation:

Satisfactory

☐ Yes ☐ No

☐ Recommend HVAC technician examine ☐ Before closing

103. OTHER SYSTEMS

☐ N/A

Proper Operation:

☐ Gas space heater

☐ Yes

System Condition:

☐ Satisfactory

☐ Electric baseboard

☐ Woodburning stove

☐ No

☐ Marginal

☐ Radiant ceiling cable

(See remarks page 24)

☐ Poor



ELECTRIC/COOLING SYSTEM

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104. MAIN PANEL

Location: _____ **Condition:** ☐ Satisfactory ☐ Marginal ☐ Poor
Adequate Clearance to Panel: ☐ Yes ☐ No **Amperage** _____ **Volts** 120/240 ☐ Breakers ☐ Fuses
Appears Grounded: ☐ Yes ☐ No ☐ Not Visible
G.F.C.I. Breaker: ☐ Yes ☐ No **Operative:** ☐ Yes ☐ No
A.F.C.I. Breaker: ☐ Yes ☐ No **Operative:** ☐ Yes ☐ No
MAIN WIRE ☐ Copper ☐ Aluminum ☐ Copper Clad Aluminum ☐ Not visible
☐ *Tapping before the main breaker* ☐ *Double Tapping of the Main Wire*
Condition: ☐ Satisfactory ☐ Poor ☐ *Federal Pacific Panel Stab Lok® (See remarks page 26)**
BRANCH WIRE: ☐ Copper ☐ Aluminum* ☐ Copper Clad Aluminum ☐ Not visible
Condition: ☐ Satisfactory ☐ Poor ☐ *Recommend electrician Evaluate/Repair**
☐ Romex ☐ BX cable ☐ Conduit ☐ Knob & Tube**
☐ *Double tapping* ☐ *Wires Under Sized/Oversized Breaker/Fuse*
☐ Panel not accessible ☐ Not evaluated **Reason:** _____

105. SUB PANEL(S)

☐ None apparent
Location #1: _____ **#2:** _____ **#3:** _____
☐ Panel not accessible ☐ Not evaluated **Reason:** _____
BRANCH WIRE: ☐ Copper ☐ Aluminum ☐ Copper Clad Aluminum
Neutral/ground separated: ☐ Yes ☐ No **Neutral Isolated:** ☐ Yes ☐ No ☐ *Safety hazard*
Condition: ☐ Satisfactory ☐ Marginal ☐ Poor ☐ *Recommend Separating/Isolating Neutrals*

106. ELECTRICAL FIXTURES

A representative number of installed lighting fixtures, switches and receptacles located inside the house, garage and exterior walls were tested and found to be:

Condition: ☐ Satisfactory ☐ Marginal ☐ Poor
☐ Open grounds ☐ Reverse polarity ☐ GFCIs not operating
☐ *Solid conductor aluminum branch wiring circuits* (See remarks page 26)**
☐ Ungrounded 3-prong outlets ☐ *Recommend electrician Evaluate/Repair**

107. UNIT #1

☐ Central system ☐ Wall unit **Location:** _____ **Age:** _____ yrs.
Energy Source: ☐ Electric ☐ Gas ☐ Water ☐ Other _____
Unit Type: ☐ Air cooled ☐ Water cooled ☐ Gas chiller ☐ Geothermal ☐ Heat pump
Evaporator Coil: ☐ Satisfactory ☐ Not visible ☐ Needs cleaning ☐ Damaged
Refrigerant Lines: ☐ Leak ☐ Damage ☐ Insulation missing ☐ Satisfactory
Condensate Line/Drain: ☐ To exterior ☐ To pump ☐ Floor Drain ☐ Other _____
Operation: Differential _____ °F
Difference in temp. (split) should be 14-22° Fahrenheit. (See remarks page 26)
Condition: ☐ Sat. ☐ Marginal ☐ Poor ☐ *Recommend HVAC Technician Examine/Clean/Service*
☐ *Not operated due to exterior temperature.*

108. UNIT #2

☐ Central system ☐ Wall unit **Location:** _____ **Age:** _____ yrs.
Energy Source: ☐ Electric ☐ Gas ☐ Water ☐ Other _____
Unit Type: ☐ Air cooled ☐ Water cooled ☐ Gas chiller ☐ Geothermal ☐ Heat pump
Evaporator Coil: ☐ Satisfactory ☐ Not visible ☐ Needs cleaning ☐ Damaged
Refrigerant Lines: ☐ Leak ☐ Damage ☐ Insulation missing ☐ Satisfactory
Condensate Line/Drain: ☐ To exterior ☐ To pump ☐ Floor Drain ☐ Other _____
Operation: Differential _____ °F
Difference in temp. (split) should be 14-22° Fahrenheit. (See remarks page 26)
Condition: ☐ Sat. ☐ Marginal ☐ Poor ☐ *Recommend HVAC Technician Examine/Clean/Service*
☐ *Not operated due to exterior temperature.*

GENERAL COMMENTS

ITEMS NOT OPERATING	SIGNIFICANT ISSUES/DEFECTS
	<i>Item(s) that are in need of immediate attention or in the very near future.</i>

[illegible][illegible]

Property Address _____

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