



PROPERTY AND SITE

LIMITATION: Restricted/No Access Debris/Obstruction Snow/Ice Cover Vegetation/Tree/Shrub
CONDITIONS: Clear/Sunny Cloudy/Overcast Rain Approx. Temperature 85
Damp Ground Approx. Hydrant Distance 100yds

BUILDING Approx. Years Old 30 Condo Rural
Bungalow/Ranch Bi-Level 2 Story 3 Story
Semi-Detached Plex Row/Town Other

LANDSCAPING Slope to House **Good Condition** Yes
Flower Bed Hedge/Shrub Tree/Vine Ravine
Earth to Wood Site Erosion No Swale Other

DRIVEWAY Slopes to House **Damaged** No
Paving Stone Gravel Concrete Asphalt

WALKWAY/PATH Slopes to House **Damaged** No
Paving Stone Patio Block Concrete Asphalt

PORCH Unsecured **Damaged** No
Metal Wood Concrete Brick/Block
Crack/Spalling Corrosion Rot Repaint

LIGHTING None Unsecured **Operational** Yes

RECEPTACLE Damaged/No Cover **Operational** Yes

RAILING Unsecured **Damaged** N/A
Metal Wood Incomplete None

DECK/ PATIO Unsecured **Damaged** Yes
Composite/Wood Brick Concrete Metal
Slope to House Paving Stone Patio Block Stone
Crack/Spalling Deterioration Mold/Mildew Rot

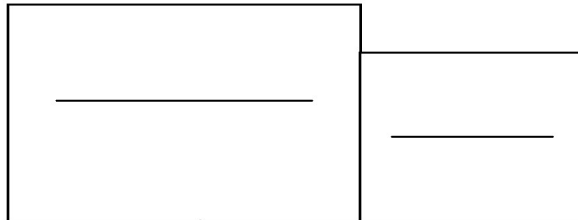
RAILING Unsecured **Damaged** N/A
Metal Wood Incomplete None

RETAINING WALL Not Stable **Damaged** No
No Weep Holes Wood Concrete Stone
Crack/Spalling Deterioration Rot Leans

Extra Comments Continued Next Page...



For the purpose of this report your house faces: North



FRONT

BUILDING

(Please Note: This report is for sample purposes only. Content of this report was extracted from different inspections and does not reflect the status of any one address.)

The report is broken down by the area inspected (e.g. property and site, roof, attic, etc.). The report format is a combination check list and narrative style report. At the end of the main report is a summary entitled "Report Commentary". This report is typically used to highlight the defects, safety hazards, or costly items. Attached to the report are digital photos and informational handout regarding common conditions which were cited (e.g. cracks in foundation, knob and tube wiring, etc.)

The report is generated on site and delivered at the time of the inspection. The report is delivered in a three ring binder which includes a copy of Home Depot's "Home Improvement 123" (\$45 book on cd rom sold at Home Depot.)

Client and client's agent were present for the inspection.

The following systems and all of their components are excluded from the scope of this home inspection: fence, storage sheds, cable TV, telephone, vacuum, irrigation, security, speaker, alarm, radon, pond, hot tub, and pool.

Please Note: Page numbers 11, 14, & 15 have been intentionally omitted from this report.

LANDSCAPING

Recommend removal of ivy, which was found climbing behind the vinyl siding along the rear/south wall, to prevent moisture/insect entry and related damage.

Recommend maintaining a positive grade slope around home perimeter to promote proper drainage away from the structure. Most notably on both rear corners, where there is evidence of previous pooling and a small swell.

Maintenance Tip: Recommend trimming all vegetation away from the structure to prevent moisture, abrasion, or insect related damage.

DRIVEWAY

Driveway shows signs of deterioration relative to age (i.e. cracking, settlement, etc.). Recommend sealing all cracks in pavement to reduce water penetration and resulting deterioration. Settlement creates a minor trip hazard, if this is a concern or future issue, recommend further evaluation by a qualified contractor.

DECK/PATIO

Settlement and missing bricks apparent in the patio creates a minor trip hazard Budget for future repair and/or replacement.

Patio slopes towards house which encourages moisture entry into basement and related damage to foundation. If moisture entry is a concern or future issue, recommend replacement and/or correction to grade.



EXTERIOR

LIMITATION	Clearance <input type="checkbox"/>	Seasonal Storm Window <input type="checkbox"/>	Debris/Obstruction <input type="checkbox"/>	Shrub/Tree/Hedge/Vines/Ivy <input type="checkbox"/>
	Snow/Ice Cover <input type="checkbox"/>	Restricted/No Access <input type="checkbox"/>	Parged <input type="checkbox"/>	Other <input type="checkbox"/>
FOUNDATION WALL	Not Exposed <input type="checkbox"/>	Damaged	No	FOUNDATION WALL
	Poured Concrete <input checked="" type="checkbox"/>	Block <input type="checkbox"/>	Brick <input type="checkbox"/>	Stone <input type="checkbox"/>
	Exterior Rigid Insulation <input type="checkbox"/>	PWF/Wood <input type="checkbox"/>	Piling/Pier <input type="checkbox"/>	Frost Heave <input type="checkbox"/>
	Crack <input checked="" type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	
WALL SURFACE	No Ground Clearance <input type="checkbox"/>	Damaged	No	
	Aluminum <input type="checkbox"/>	Composite <input type="checkbox"/>	Brick/Block <input type="checkbox"/>	Stone <input type="checkbox"/>
	Stucco <input type="checkbox"/>	Vinyl Siding <input checked="" type="checkbox"/>	Wood Siding <input type="checkbox"/>	Steel/Shgl <input type="checkbox"/>
	Split/Loose <input type="checkbox"/>	Repoint <input type="checkbox"/>	Repaint <input type="checkbox"/>	Recaulk <input type="checkbox"/>
	Crack/Spalling <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Blister/Peel <input type="checkbox"/>
WINDOWS	Inspected with Binoculars <input type="checkbox"/>	Damaged	No	
	Storm <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Repaint <input type="checkbox"/>	Recaulk <input type="checkbox"/>
	Weather-strip <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Poor Trim <input type="checkbox"/>
WINDOW WELL	Improper Drainage <input type="checkbox"/>	Damaged	N/A	
DOORS	Binds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	Yes
	Storm <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Repaint <input type="checkbox"/>	Recaulk <input type="checkbox"/>
	Weather-strip <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Split/Dent <input type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	Yes
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	Yes
	Install GFCI <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>
BASEMENT WALKOUT	Covered <input type="checkbox"/>	Damaged	N/A	
	Poor Condition <input type="checkbox"/>	No Railing <input type="checkbox"/>	No Drain <input type="checkbox"/>	Leak <input type="checkbox"/>
	Crack/Spalling <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Frost Heave <input type="checkbox"/>	Reparge <input type="checkbox"/>

Visible areas of the exterior foundation were in good condition. Minor cracks were apparent (most notably below basement windows). This type of cracking is very common. Recommend properly sealing all visible cracks to prevent water entry and related damage. Monitor for additional activity and consult a foundation repair specialist if this is a concern or if additional activity (e.g. horizontal cracks, cracks larger than 1/4", water entry) is detected.

WALL SURFACE
The house is protected by newer vinyl siding, which appears properly installed and in good condition. Recommend periodically inspecting all siding to ensure it is properly secured.

Extra Comments Continued Next Page...



GARAGE / CARPORT

TYPE	Attached <input checked="" type="checkbox"/>	Built-In <input type="checkbox"/>	Detached <input type="checkbox"/>	Single <input type="checkbox"/>	Double <input checked="" type="checkbox"/>	Insulated/Heated <input type="checkbox"/>	Attic Access <input checked="" type="checkbox"/>
DOOR	Binds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	Yes	DOOR		
	Automatic <input type="checkbox"/>	Sectional <input type="checkbox"/>	Wood <input checked="" type="checkbox"/>	Metal <input type="checkbox"/>	Garage door did not automatically reverse under test. Recommend adjustment to reduce safety hazard and prevent damage to door, in the case of an obstruction.		
	Adjust Auto Stop <input checked="" type="checkbox"/>	No Safety Stop <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Corrosion <input type="checkbox"/>			
FLOOR	Crack <input checked="" type="checkbox"/>	Settlement <input type="checkbox"/>	Damaged	No			
	Asphalt <input type="checkbox"/>	Concrete <input checked="" type="checkbox"/>	Gravel <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>			
WALL	No Fire Barrier <input type="checkbox"/>	Damaged	No	Garage door opener is nearing the end of its life expectancy. Budget for replacement.			
	Drywall <input checked="" type="checkbox"/>	Brk/Blk/Stone <input type="checkbox"/>	Wood <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>			
WINDOW	Binds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	N/A			
CEILING	No Fire Barrier <input type="checkbox"/>	Damaged	No	For Your Information: The garage door opener is plugged into a GFCI protected outlet which will have no power if the circuit is tripped.			
	Drywall <input checked="" type="checkbox"/>	Crack <input checked="" type="checkbox"/>	Wood <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>			
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	Yes			
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	Yes			
	Install GFCI <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>			
CIRCUIT WIRE	Concealed <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Improper <input type="checkbox"/>				
ACCESS DOOR	To Kitchen	Operational	Yes				
	Auto Door Close <input type="checkbox"/>	Metal Clad <input type="checkbox"/>	Wood <input checked="" type="checkbox"/>	Composite <input type="checkbox"/>			
	Gas Proof <input type="checkbox"/>	Damaged <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Corrosion <input type="checkbox"/>			

Extra Comments Continued Next Page...

WINDOWS

Screens will require periodic maintenance and do now. Damaged screens noted, most notably first floor/south wall. Recommend further evaluation and repair/replacement of damaged screens.

Maintenance Tip: Recommend maintaining the caulk surrounding all windows to reduce the risk of water entry or air exchange.

DOORS

Maintenance Tip: Recommend maintaining (i.e. scraping & painting) wood trim around all doors and windows to reduce weather related deterioration.

Maintenance Tip: Recommend maintaining/installing weather stripping surrounding all exterior doors to improve thermal efficiency.

RECEPTACLE

All exterior receptacles are properly protected by GFCI and are properly covered. The test/reset button for this circuit is located in the guest bathroom.

FLOOR

Cracks are apparent in the garage floor but considered typical due to normal settling and movement.

Limitation: Inspection of the garage was partially limited by the storage items.

WALL

Walls are partially finished and required fire barrier is intact.

CEILING

Typical drywall defects noted (e.g. nail pops, exposed tape seam, separation/cracking, etc..) and considered typical.

RECEPTACLE

Receptacles servicing the garage are properly protected by GFCI.

Consider installation of additional receptacles in the garage for convenience and to reduce dependency on extension chords and the associated fire hazard.



123 Sample Estates Dr, Manchester, Missouri 63021

INSPECTED BY: _____

LIMITATION Deck/Patio Binocular Roof Edge Walk On No Access
 Solar Panel Gravel/Flat Height Steep Slope Rain/Snow/Ice Cover
 Fragile Other

MAIN ROOF Flat Gable Valley Hip Shed Other Est. Age _____ Pitch _____

GUTTER/DOWNSPOUT Unsecured **Damaged** **No** **GUTTER/DOWNSPOUT**
 TYPE Aluminum Galvanized Copper Plastic Recommend extending all leaders to discharge
 Incomplete Dent/Split Corrosion Leak away from building to limit moisture related
 DRAINAGE Above Ground Below Ground Spill/Roof activity/damage. Most notably on the rear
 Extend Leader Redirect Leader Clean corners.

FASCIA/SOFFIT Not Vented **Damaged** **No** Maintenance Tip: Gutters require periodic
 Aluminum Wood Vinyl Other evaluation and maintenance. Ensure all
 Loose Mildew/Mold Stain/Rot Corrosion sections remain fastened securely and are kept
 Clean to ensure proper drainage.

COVERING # of Layers 2 **Damaged** **No** **FASCIA/SOFFIT**
 Asphalt Shingle Conc/Clay Tile Wd. Shingle Wd. Shake Fascia and soffits are trimmed in AL which will
 Fibreglass Shingle Tar/Gravel Metal Other limit future maintenance needs.
 Nail Pop/Exposed Loose/Missing Broken Crack
 Patched Mildew/Mold Stain/Rot Worn **COVERING**
 Curl/Claw Fungus/Moss Improper Installation Shingles show normal signs of deterioration
 (e.g. separation, curling). Typical life
LIFE EXPECTANCY Typical Middle/End Exceeded expectancy of roof covering is 15-20 years.
 Due to second layer of shingles life expectancy
 is slightly shorter and a new roof covering will
 require removal of both layers. Budget for
 replacement within 5 years.

ACCESSORY Unsecured **Damaged** **No** **FLASHING** Not Checked/Concealed **Damaged** **No**
 Air Vent Vent Stack Turbine Elec. Mast Chimney Dormer Drip Edge Flat Roof
 Solar Panel Skylight Antenna Dish Stack Valley
 Roll Roofing Alum./Galv. Lead Rubber
 Gap/Loose/Crack Deterioration Corrosion Tarred
 Reseal/Recaulk Improper Replace When Re-Roofing

CHIMNEY / VENT Leaning **Damaged** **No** Stains apparent on the roof covering are
 Fireplace Furnace Gas Insert Other suspected to be mold/mildew and are quite
 Brk/Blk/Stone Metal Wood Stucco common. The stains represent a purely visual
 Crack/Spalling Deterioration Corrosion Loose defect. If this is a concern, recommend further
 Abandoned No Wind Cap Metal Liner Required evaluation by a qualified roofing contractor to
 determine scope and cost of treatment. (Please
 Note: Treatment of stains may shorten the life
 expectancy of roof covering.)

CHIMNEY CAP None **Damaged** **No** **FLASHING**
 Concrete Masonry Metal Other Visible areas of the flashing were in good
 Crack/Spalling Deterioration Corrosion Loose condition. These areas are very vulnerable to
 leakage and should be examined periodically
 for maintenance requirements (e.g. seal, caulk,
 replace).

VISIBLE FLUE LINER None **Damaged** **No**
 Brick/Block Clay/Concrete Metal Metal Insert
 Rain Cap Deterioration Corrosion Loose
 Crack/Spalling Improper Advise Cleaning/Sweeping

Extra Comments Continued Next Page...

SECONDARY ROOF Flat Gable Hip/Valley Shed Other Est. Age _____ Pitch _____

COVERING # of Layers 1 **Damaged** **N/A**
 Asphalt Shingle Conc/Clay Tile Wd. Shingle Wd. Shake
 Fibreglass Shingle Tar/Gravel Metal
 Nail Pop/Exposed Loose/Missing Broken Crack
 Patched Mildew/Mold Stain/Rot Worn
 Curl/Claw Fungus/Moss Improper Installation
LIFE EXPECTANCY Typical Middle/End Exceeded



CHIMNEY CAP

Suspect the cap was recently replaced or repaired. Cap will be vulnerable to corrosive activity which may stain siding. Monitor for future activity and repair/maintain as needed.



LIMITATION: No Access Sealed Stored Items Looked In Entered Hatch Pull Down Insulated

STRUCTURE	Truss <input checked="" type="checkbox"/> Rafter <input type="checkbox"/>	Damaged	No
Warped <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Sag/Loose <input type="checkbox"/>	Split <input type="checkbox"/>
SHEATHING	Condensation <input type="checkbox"/>	Damaged	No
Composite <input type="checkbox"/>	Thermal Board <input type="checkbox"/>	Plywood <input checked="" type="checkbox"/>	Board <input type="checkbox"/>
R Felt/R Paper <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Sag/Loose <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>
INSULATION	Estimated Depth	Damaged	No
Radiant Barrier <input type="checkbox"/>	Concealed <input type="checkbox"/>	Finished <input type="checkbox"/>	None <input type="checkbox"/>
Vapor Barrier <input type="checkbox"/>	Fibreglass <input type="checkbox"/>	Mineral <input type="checkbox"/>	Cellulose <input type="checkbox"/>
Wood Shavings <input type="checkbox"/>	Rigid Plastic <input type="checkbox"/>	Foam <input type="checkbox"/>	Other <input type="checkbox"/>
Batt <input type="checkbox"/>	Blown/Loose <input type="checkbox"/>	Sprayed <input type="checkbox"/>	Required <input type="checkbox"/>
VENTILATION	None <input type="checkbox"/>	Damaged	No
Soffit <input type="checkbox"/>	Gable End <input checked="" type="checkbox"/>	Turbine <input type="checkbox"/>	Mechanical <input type="checkbox"/>
Baffles <input type="checkbox"/>	Roof <input checked="" type="checkbox"/>	Blocked <input type="checkbox"/>	Required <input type="checkbox"/>
EXHAUST DUCT	Concealed <input type="checkbox"/>	Damaged	No
Not Insulated <input type="checkbox"/>	Into Attic <input type="checkbox"/>	Plastic/Flex <input checked="" type="checkbox"/>	Metal <input type="checkbox"/>
ELECTRICAL	Concealed <input checked="" type="checkbox"/>	Damaged	N/A
Abandoned <input type="checkbox"/>	Knob & Tube <input type="checkbox"/>	Open Splice <input type="checkbox"/>	Frayed <input type="checkbox"/>

INSULATION
Insulation is uneven with some areas of the ceiling exposed. Redistribution of insulation will increase thermal efficiency. Recommend further evaluation and correction.

INSULATION
Overall attic was in acceptable condition at the time of the inspection: insulation level meets current standards, ventilation was adequate, and no visible signs of moisture related problems.

VENTILATION
Consider improvement to attic ventilation when roof covering is replaced. Improved ventilation will reduce condensation in the attic space and improve the life of the roof covering.

Extra Comments Continued Next Page...

ELECTRICAL SERVICE / PANEL

SERVICE ENTRANCE	Underground <input checked="" type="checkbox"/>	Overhead <input type="checkbox"/>	No Conduit <input type="checkbox"/>	SERVICE ENTRANCE
120-Volt <input type="checkbox"/>	120/240 Volt <input checked="" type="checkbox"/>	Unsecured <input type="checkbox"/>	Frayed <input type="checkbox"/>	For Your Information: There is no single breaker for the main shut-off. In this case, the top four breakers in the panel comprise the main shut-off.
ENTRANCE CABLE	Concealed <input type="checkbox"/>	Aluminum <input checked="" type="checkbox"/>	Copper <input type="checkbox"/>	
MAIN DISCONNECT	Switch/Cartridge Fuse <input type="checkbox"/>	Breaker <input checked="" type="checkbox"/>		
DISCONNECT RATING	100 Amps	Have Electrician Evaluate <input type="checkbox"/>		
DISTRIBUTION PANEL	Not Opened <input type="checkbox"/>	Damaged	N/A	
Location		Non Standard Installation <input type="checkbox"/>		
Obstructed <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Obsolete <input type="checkbox"/>	
PANEL RATING	125 Amps	Room for Expansion <input type="checkbox"/>		
FUSE Breaker <input checked="" type="checkbox"/>	Glass/Screw <input type="checkbox"/>	Cartridge <input type="checkbox"/>	Time Delay <input type="checkbox"/>	
GFCI Breaker <input type="checkbox"/>	AFCI Breaker <input type="checkbox"/>	Blown/Broken <input type="checkbox"/>	Over-Fused <input type="checkbox"/>	
CIRCUIT WIRE	Improper <input type="checkbox"/>	Damaged	No	
Aluminum <input type="checkbox"/>	Copper <input checked="" type="checkbox"/>	Copper Clad <input type="checkbox"/>	Other <input type="checkbox"/>	
Non - Metallic Sheathed <input type="checkbox"/>	Armoured Cable <input type="checkbox"/>	Knob & Tube <input type="checkbox"/>		
Double Tapping <input type="checkbox"/>	Spliced <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Scorched <input type="checkbox"/>	
GROUNDING	Concealed <input type="checkbox"/>	Ground Rod <input type="checkbox"/>	Water Main <input checked="" type="checkbox"/>	
Improper Connection/Installation <input type="checkbox"/>		Meter By-Pass/Jumper <input type="checkbox"/>		
BONDING	Concealed <input type="checkbox"/>	Water Pipe <input checked="" type="checkbox"/>	Gas Pipe <input type="checkbox"/>	
Improper Connection/Installation <input type="checkbox"/>		Corrosion <input type="checkbox"/>	Unsecured <input type="checkbox"/>	
AUXILIARY PANEL	Concealed <input type="checkbox"/>	Damaged		
Location		Non Standard Installation <input type="checkbox"/>		
Not Opened <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Obsolete <input type="checkbox"/>	
DISCONNECT RATING	0 Amps	Have Electrician Evaluate <input type="checkbox"/>		
PANEL RATING	0 Amps	Room for Expansion <input type="checkbox"/>		
FUSE Breaker <input type="checkbox"/>	Glass/Screw <input type="checkbox"/>	Cartridge <input type="checkbox"/>	Time Delay <input type="checkbox"/>	
GFCI Breaker <input type="checkbox"/>	Blown/Broken <input type="checkbox"/>	Over-Fused <input type="checkbox"/>	Scorched <input type="checkbox"/>	

Extra Comments Continued Next Page...

EXHAUST DUCT

Exhaust ducts have been properly vented to the exterior.

DISTRIBUTION PANEL

Federal Pacific Electric, Stab-Lok panels have received a significant amount of attention related to a Consumer Produce Safety Commission (CPSC) study in the early eighties. The results of the study demonstrated a high frequency (>33%) with which the double pole breakers failed to trip. Recommend further evaluation by a licensed electrician. Replacement should be considered given age and unknown risk.

Split buss bar panel is not equipped with a main shut-off. Future maintenance may require upgrade/replacement. If this is a concern, recommend further evaluation by a licensed electrician. For additional information regarding FPE panels visit the following web pages or perform a simple web search:
<http://www.greatinspector.com/faq-elec-fed-pacif.html>
<http://www.allabouthomes.com/fedpacpan.pdf>
<http://www.inspect-net.com/fpe/fpepanel.html>

FUSE

Two pole breakers are not attached (30amp breaker) to ensure safety when a breaker trips. Recommend further evaluation and correction by a licensed electrician.

WIRE

Distribution wiring is copper.



BASEMENT / STRUCTURE

LIMITATION	Finished <input checked="" type="checkbox"/>	Clutter/Obstruction <input type="checkbox"/>	Dry Weather/Drought <input type="checkbox"/>	Dry Ground <input type="checkbox"/>	
FLOOR	Crack <input type="checkbox"/> Carpet <input checked="" type="checkbox"/>	Concrete <input checked="" type="checkbox"/> Ceramic <input type="checkbox"/>	Vinyl <input type="checkbox"/> Wood/Lam. <input type="checkbox"/>	Damaged <input type="checkbox"/> No <input type="checkbox"/>	FLOOR Limitation: Finished areas of the basement limits inspection of almost all components on this page. Moisture meter was used along the base of all exterior walls and recorded acceptable levels at the time of the inspection. Consider operation of a dehumidifier during periods of high humidity levels to address dampness typical of most basements.
WALL	Crack <input checked="" type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Concealed <input type="checkbox"/> Concrete <input checked="" type="checkbox"/>	Brick/Stone <input type="checkbox"/> Wood <input type="checkbox"/>	Damaged <input type="checkbox"/> No <input type="checkbox"/>	Limitation: The large amount of storage items throughout the basement creates a limitation.
CEILING	Stain <input type="checkbox"/> Drywall <input checked="" type="checkbox"/>	Unfinished <input type="checkbox"/> Stip/Acoustic/W <input type="checkbox"/>	Wood <input type="checkbox"/> Tile <input type="checkbox"/>	Damaged <input type="checkbox"/> No <input type="checkbox"/>	WALL Evidence of previous moisture entry through foundation crack(southeast corner). Recommend further evaluation and repair by a foundation repair specialist to prevent water entry and related damage.
WINDOW	Binds <input type="checkbox"/> Single/Dbl. Hung <input type="checkbox"/> Ther/Fix/Sng <input type="checkbox"/> Damaged <input type="checkbox"/>	Not Tested <input type="checkbox"/> Cas./Awning <input type="checkbox"/> Alum./Metal <input checked="" type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Sliding <input checked="" type="checkbox"/> Vinyl/V.Cld <input type="checkbox"/> Stain/Rot <input type="checkbox"/>	Operational <input type="checkbox"/> Yes <input type="checkbox"/>	High moisture content was detected in the drywall around the sump pit and along the front wall (base of wall, evidence of previous repair). Suspect moisture entry relates to crack in foundation (visible from sump pit box). Recommend further evaluation to determine source of moisture and scope of repair.
DOOR	Binds <input type="checkbox"/> Pocket <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input checked="" type="checkbox"/>	Wood <input checked="" type="checkbox"/> Composite <input type="checkbox"/>	Operational <input type="checkbox"/> Yes <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).
LIGHTING	Minimal <input type="checkbox"/> Damaged/No Cover <input type="checkbox"/>	Unsecured <input type="checkbox"/> Reverse Polarity <input type="checkbox"/>	Operational <input type="checkbox"/> Yes <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
RECEPTACLE	Install GFCI <input type="checkbox"/> Circuit Wire <input type="checkbox"/>	No Ground <input type="checkbox"/> Unsecured <input type="checkbox"/>	Open Ground <input type="checkbox"/> Improper <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
CIRCUIT WIRE	Concealed <input type="checkbox"/> Heat Source <input type="checkbox"/>	Unsecured <input type="checkbox"/> None <input type="checkbox"/>	Improper <input type="checkbox"/> Thermostat <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
HEAT SOURCE	Air Register <input checked="" type="checkbox"/> BASEMENT STAIRWAY <input type="checkbox"/>	Convect/Radiator <input type="checkbox"/> Unsecured <input type="checkbox"/>	Electric <input type="checkbox"/> Radiant <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
BASEMENT STAIRWAY	Carpet <input checked="" type="checkbox"/> RAILING <input type="checkbox"/>	Vinyl <input type="checkbox"/> Metal <input type="checkbox"/>	Wood <input type="checkbox"/> Wood <input checked="" type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
RAILING	Unsecured <input type="checkbox"/> FLOOR JOIST <input type="checkbox"/>	Unsecured <input type="checkbox"/> Concealed <input type="checkbox"/>	Incomplete <input type="checkbox"/> Split <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
FLOOR JOIST	Unsecured <input type="checkbox"/> BRIDGING <input type="checkbox"/>	Split <input type="checkbox"/> Concealed <input type="checkbox"/>	Stain/Rot <input type="checkbox"/> X-Metal <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
BRIDGING	Continuous <input type="checkbox"/> SILL PLATE <input type="checkbox"/>	X-Metal <input type="checkbox"/> Concealed <input checked="" type="checkbox"/>	X-Wood <input type="checkbox"/> Stain/Rot <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
SILL PLATE	Moisture Gasket <input type="checkbox"/> BEAM <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/> Concealed <input checked="" type="checkbox"/>	No Anchors <input type="checkbox"/> Metal <input checked="" type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
BEAM	Unsecured <input type="checkbox"/> Laminate <input type="checkbox"/>	Concealed <input checked="" type="checkbox"/> Metal <input checked="" type="checkbox"/>	Wood <input type="checkbox"/> Wood <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
POST	On Slab <input type="checkbox"/> Adjustable <input type="checkbox"/>	Concealed <input checked="" type="checkbox"/> Brick <input type="checkbox"/>	Metal <input checked="" type="checkbox"/> Wood <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
POST	On Slab <input type="checkbox"/> Adjustable <input type="checkbox"/>	Concealed <input checked="" type="checkbox"/> Brick <input type="checkbox"/>	Metal <input checked="" type="checkbox"/> Wood <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
BEARING WALL	Concealed <input type="checkbox"/> COLD ROOM <input type="checkbox"/>	Concealed <input type="checkbox"/> Improper Door <input type="checkbox"/>	Damaged <input type="checkbox"/> N/A <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
COLD ROOM	Concrete <input type="checkbox"/> Earth Floor <input type="checkbox"/>	Brick/Block <input type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Stone <input type="checkbox"/> Stain/Damp <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
CRAWL SPACE	Vapor Barrier <input type="checkbox"/> Crack <input type="checkbox"/>	Insulated <input type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Entered <input type="checkbox"/> Stain/Rot <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
PIPES/ DUCTS	Earth Floor <input type="checkbox"/> PIPES/ DUCTS <input type="checkbox"/>	Concrete <input type="checkbox"/> Unsecured <input type="checkbox"/>	Moisture Barrier Required <input type="checkbox"/> Leak <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
VENTILATION	Mechanical <input type="checkbox"/> SLAB ON GRADE <input type="checkbox"/>	Blocked <input type="checkbox"/> Concealed <input type="checkbox"/>	Required <input type="checkbox"/> Damaged <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	
SLAB ON GRADE	On Piling/Pier <input type="checkbox"/> Crack/Spalling <input type="checkbox"/>	On Brick/Block/Poured Conc. <input type="checkbox"/> Frost Heave <input type="checkbox"/>	Floating <input type="checkbox"/> Settling <input type="checkbox"/>	RECEPTACLE Recommend installation of GFCI protection in the basement to reduce shock hazard (all receptacles in unfinished area of basement or accessible from concrete floor).	



HEATING/COOLING/VENTILATION

123 Sample Estates Dr, Manchester, Missouri 63021

DATA PLATE:	Not Legible <input type="checkbox"/>	Incomplete <input type="checkbox"/>	Model	RHEEM UGPH10EBRJR	Btu Input	100,000	Est. Age	'99
LIMITATIONS:	Clean-Out Does Not Open <input type="checkbox"/>	Oil/Propane Tank Not Visible <input type="checkbox"/>	System Shut-Off/Inoperative <input type="checkbox"/>	Piping/Ducts Concealed <input type="checkbox"/>	Weather/Temperature <input type="checkbox"/>	System Operating AC <input checked="" type="checkbox"/>		
SMOKE DETECTORS	Basement <input type="checkbox"/>	1st Floor <input type="checkbox"/>	2nd Floor <input type="checkbox"/>	3rd Floor <input type="checkbox"/>	Other			
CO DETECTORS	Basement <input type="checkbox"/>	1st Floor <input type="checkbox"/>	2nd Floor <input type="checkbox"/>	3rd Floor <input type="checkbox"/>	Other			
THERMOSTAT/HUMIDISTAT	Unsecured <input type="checkbox"/>	Operational	Yes	THERMOSTAT/HUMIDISTAT				
Location	Programmable <input type="checkbox"/>	Standard <input checked="" type="checkbox"/>	Maintenance Tip: Upgrading to a programmable thermostat may reduce heating/cooling costs.					
FUEL SOURCE	Gas <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Wood/Pellet <input type="checkbox"/>	Electric <input type="checkbox"/>				
HEAT TYPE	Convactor <input type="checkbox"/>	Forced Air <input checked="" type="checkbox"/>	Radiator <input type="checkbox"/>					
BURNER TYPE	Conventional <input type="checkbox"/>	Mid <input checked="" type="checkbox"/>	High <input type="checkbox"/>	HEATING SYSTEM				
HEATING SYSTEM	Advise Service/Repair Contract <input type="checkbox"/>							
AIR REQUIREMENT	Internal <input checked="" type="checkbox"/>	External <input type="checkbox"/>	Inadequate <input type="checkbox"/>					
VENTING	Flue <input checked="" type="checkbox"/>	Sidewall <input type="checkbox"/>	Metal <input checked="" type="checkbox"/>	Plastic <input type="checkbox"/>				
	Improper Rises <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Soot <input type="checkbox"/>				
LIFE EXPECTANCY	Typical <input type="checkbox"/>	Middle <input checked="" type="checkbox"/>	Exceeded <input type="checkbox"/>	Maintenance Tip: Recommend a semi-annual preventative maintenance agreement with a qualified HVAC contractor to increase operational safety and prolong useful life.				
GAS BURNER	Not Checked <input type="checkbox"/>	Operational	Yes	FORCED AIR COMPONENTS				
BURNER	Corrosion <input type="checkbox"/>	Advise Adjustment <input type="checkbox"/>	Maintenance Tip: Filter should be inspected on a monthly basis and replaced/cleaned based on manufacturers recommendation.					
IGNITION	Electronic <input checked="" type="checkbox"/>	Pilot & Thermocouple <input type="checkbox"/>	GAS BURNER					
HEAT SHIELD	Missing <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Soot <input type="checkbox"/>	Defer to Laclede Gas inspection regarding operational safety and code compliance of gas furnace.				
PROPANE TANK/PIPING	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Kink/Leak <input type="checkbox"/>	AC/HEAT PUMP				
OIL BURNER BLOWER	Not Checked <input type="checkbox"/>	Operational	N/A	External condenser unit is in the middle of its life expectancy. Manufacturer's suggested life expectancy is 15-20 years. Budget for replacement accordingly. Air conditioning system was operating properly, at the time of the inspection.				
BURN CHAMBER	Deterioration <input type="checkbox"/>	Advise Adjustment <input type="checkbox"/>						
	Burn Through <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Crack <input type="checkbox"/>	Soot <input type="checkbox"/>				
INSPECTION DOOR	Missing <input type="checkbox"/>	Soot <input type="checkbox"/>	Sealed <input type="checkbox"/>					
BAROMETRIC DAMPER	Missing <input type="checkbox"/>	Unbalanced <input type="checkbox"/>	Sealed <input type="checkbox"/>					
OIL TANK/ PIPING	Basement <input type="checkbox"/>	Outside <input type="checkbox"/>	Buried <input type="checkbox"/>					
	No Filter <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Kink/Leak <input type="checkbox"/>				
CENTRAL HUMIDIFIER	Not Checked <input type="checkbox"/>	Operational	N/A	Maintenance Tip: Recommend periodic inspection and maintenance of condensation line to ensure proper drainage. A clogged condensation line will result in premature aging of the furnace.				
	Water Shut Off <input type="checkbox"/>	Damaged <input type="checkbox"/>	Clean/Repair/Replace <input type="checkbox"/>					
	Mildew <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>				
MOTOR/BLOWER	Direct Drive <input type="checkbox"/>	Noisy <input type="checkbox"/>	Other <input type="checkbox"/>					
FAN BELT	Loose/Worn <input type="checkbox"/>	Misalign <input type="checkbox"/>	Other <input type="checkbox"/>					
FILTER	Electronic <input type="checkbox"/>	Disposable <input checked="" type="checkbox"/>	Permanent <input type="checkbox"/>	Missing <input type="checkbox"/>				
	Inoperable <input type="checkbox"/>	Undersized <input type="checkbox"/>	Damaged <input type="checkbox"/>	Dirty <input type="checkbox"/>				
DUCT/JOINT/HOUSING	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Kink/Leak <input type="checkbox"/>					
AC / HEAT PUMP	Not Checked <input type="checkbox"/>	Operational	Yes					
	Evaporative <input type="checkbox"/>	Central <input checked="" type="checkbox"/>	Geo-Therm <input type="checkbox"/>	Air <input checked="" type="checkbox"/>				
	Through Wall <input type="checkbox"/>	Damaged Fins <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Noisy <input type="checkbox"/>				
	Loose <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Not Level <input type="checkbox"/>	Dirty <input type="checkbox"/>				
TEMP. DIFFERENTIAL	Supply Air	48	Return Air	72				
FUEL SOURCE	Unknown <input type="checkbox"/>	Electric <input type="checkbox"/>	Gas <input type="checkbox"/>					
CONDENSATION LINE	Improper Drain <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>					
REFRIGERANT LINE	Unsecured <input type="checkbox"/>	Not Insulated <input type="checkbox"/>	Leak <input type="checkbox"/>					
HRV/Air Exchanger	Not Checked <input type="checkbox"/>	Operational	N/A					
	Dirty Filter <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Noisy <input type="checkbox"/>				
ELECTRIC HEATING	Not Tested <input type="checkbox"/>	Operational	N/A					
	Forced Air <input type="checkbox"/>	Boiler <input type="checkbox"/>	Baseboard <input type="checkbox"/>	Radiant <input type="checkbox"/>				
	Loose Connection <input type="checkbox"/>	Damaged Fins <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Scorched <input type="checkbox"/>				



PLUMBING COMPONENTS

LIMITATION	Finished Basement <input checked="" type="checkbox"/>	Private/Water Shut Off <input type="checkbox"/>	Private System <input type="checkbox"/>	Other <input type="checkbox"/>
PUBLIC SUPPLY	Concealed <input type="checkbox"/>	Metered <input type="checkbox"/>	Yes <input type="checkbox"/>	PUBLIC SUPPLY
Lead <input type="checkbox"/>	Galvanized <input type="checkbox"/>	Plastic <input type="checkbox"/>	Copper <input checked="" type="checkbox"/>	Unable to locate curbside water stop box.
SHUT-OFF VALVE	Location Closet - NE corner of basement	Future maintenance or code compliance may require stop box to be located and raised to grade level.		
	Not Tested <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
PRIVATE SUPPLY	Concealed <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>	
SHUT-OFF VALVE	Location			DISTRIBUTION PIPING
	Not Tested <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	Limitation: Inspection of the distribution plumbing and waste drainage was partially limited by the finished areas of the basement.
WELL PUMP	Submersible <input type="checkbox"/>	Jet <input type="checkbox"/>	Other <input type="checkbox"/>	
	Short Cycle <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
	Advise Well Water Quality/Recovery Test <input type="checkbox"/>			
STORAGE TANK	No Air Valve <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	Galvanized steel plumbing present. Galvanized steel pipes are older and have a tendency to reduce water pressure through corrosion buildup. If this is a concern or future issue, recommend further evaluation by a licensed plumber to determine scope and cost or replacement.
WATER PRESSURE	Low <input type="checkbox"/>	Typical <input type="checkbox"/>	High <input type="checkbox"/>	
WATER QUALITY	Discoloration <input type="checkbox"/>	Debris <input type="checkbox"/>	Odor <input type="checkbox"/>	
	Test Declined <input type="checkbox"/>	Advise Water Quality Test <input type="checkbox"/>		
HOSE BIBB	Not Checked <input type="checkbox"/>	Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
Frost Free <input type="checkbox"/>	Anti-Siphon <input type="checkbox"/>	Shut Off Valve <input checked="" type="checkbox"/>		
Recaulk <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	WASTE DRAINAGE
DISTRIBUTION PIPING	Concealed <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>	Barnacles present on waste stack are evidence of previous leakage/deterioration. No signs of recent (e.g. stains at base of stack) or active leakage apparent. It is impossible to determine the rate of deterioration, but replacement is inevitable. If this is a concern or future issue, recommend further evaluation by a licensed plumber.
Lead <input type="checkbox"/>	Galvanized <input checked="" type="checkbox"/>	Plastic <input type="checkbox"/>	Copper <input checked="" type="checkbox"/>	
Dissimilar Metal <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
CROSS CONNECTION	Kitchen <input type="checkbox"/>	Laundry <input type="checkbox"/>	Hose Bibb <input type="checkbox"/>	
WASTE DRAINAGE	Concealed <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>	
Galvanized/Steel <input type="checkbox"/>	Cast Iron <input type="checkbox"/>	Plastic <input checked="" type="checkbox"/>	Copper <input type="checkbox"/>	
Odor <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
	Advise Septic Tank Checked/Pumped <input type="checkbox"/>			
FLOOR DRAIN		Mechanical/Faucet Primer <input type="checkbox"/>		As a part of a visual inspection it is impossible to examine the underground septic system servicing this property. For additional knowledge of this system, recommend further evaluation by a qualified contractor.
None <input type="checkbox"/>	Backed-Up <input type="checkbox"/>	No Water <input type="checkbox"/>	No Trap <input type="checkbox"/>	
SEWAGE PUMP	Not Checked <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>	
VENT STACK/PIPING	Concealed <input type="checkbox"/>	Damaged <input type="checkbox"/>	N/A <input type="checkbox"/>	
Galvanized/Steel <input type="checkbox"/>	Cast Iron <input type="checkbox"/>	Plastic <input type="checkbox"/>	Copper <input type="checkbox"/>	
Undersized <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
MAIN CLEANOUT	Concealed <input type="checkbox"/>	Damaged <input type="checkbox"/>	N/A <input type="checkbox"/>	Maintenance Tip: Recommend regular inspection and cleaning of septic system is recommended to ensure proper operation.
Improper Plug <input type="checkbox"/>	Location			
HOT WATER TANK	Hybrid Heating <input type="checkbox"/>	Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	HOT WATER TANK
Power-Vented <input type="checkbox"/>	Own <input type="checkbox"/>	Rent <input type="checkbox"/>	Est. Capacity 40 US	Hot water tank is in the middle/end of its life expectancy (mfd date = '99). Manufacturer's suggested life is expectancy is typically 10-15years. Defer to Laclede Gas inspection regarding operational safety.
Gas/Propane <input type="checkbox"/>	Oil <input type="checkbox"/>	Wood/Coal <input type="checkbox"/>	Electric <input type="checkbox"/>	
Dirty/Rusty/Odor <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
LIFE EXPECTANCY	Typical <input type="checkbox"/>	Middle/End <input checked="" type="checkbox"/>	Exceeded <input type="checkbox"/>	
FUEL SHUT-OFF	Concealed <input type="checkbox"/>	Location		
RELIEF VALVE	No Test Lever <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Other <input type="checkbox"/>	
DISCHARGE TUBE	Undersized <input type="checkbox"/>	Discharge <input type="checkbox"/>	Missing <input type="checkbox"/>	
VENTING	Flue <input checked="" type="checkbox"/>	Sidewall <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>
Improper Rise <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Soot <input type="checkbox"/>	
BURN CHAMBER	Not Checked <input type="checkbox"/>	Needs Adjustment <input type="checkbox"/>		
SUMP PUMP	Not Checked <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>	
Submersible <input type="checkbox"/>	Standpipe <input type="checkbox"/>	To Exterior Grade <input type="checkbox"/>		
Float Checked <input type="checkbox"/>	No/Improper Cover <input type="checkbox"/>	Permanent Connection <input type="checkbox"/>		
Corrosion <input type="checkbox"/>	To Septic/Sewer <input type="checkbox"/>	Suspect Installation <input type="checkbox"/>		

Extra Comments Continued Next Page...

HOSE BIBB

Interior shut-off valves were located for all exterior faucets.

Maintenance Tip: Recommend removal of hoses during winter months to prevent damage to hose bibb associated with freezing hose lines.

Maintenance Tip: Recommend properly sealing around all exterior hose bibbs to prevent water entry and air exchange.



LAUNDRY

FLOOR	Worn <input type="checkbox"/>	No Drain <input type="checkbox"/>	Damaged	No
	Concrete <input type="checkbox"/>	Vinyl <input checked="" type="checkbox"/>	Wood/Lam <input type="checkbox"/>	Ceramic <input type="checkbox"/>
WALL	Patched <input type="checkbox"/>	Unfinished <input type="checkbox"/>	Damaged	No
	Drywall <input checked="" type="checkbox"/>	Brk/Blk/Stone <input type="checkbox"/>	Wood/WP. <input type="checkbox"/>	Ceramic <input type="checkbox"/>
CEILING	Patched <input type="checkbox"/>	Unfinished <input type="checkbox"/>	Damaged	No
	Drywall <input checked="" type="checkbox"/>	Stip/Acous/W <input type="checkbox"/>	Wood <input type="checkbox"/>	Tile <input type="checkbox"/>
WINDOW	Bounds <input type="checkbox"/>	Not Tested <input type="checkbox"/>	Operational	Yes
	Single/Dbl. Hung <input type="checkbox"/>	Cas./Awning <input type="checkbox"/>	Sliding <input checked="" type="checkbox"/>	Bay/Bow <input type="checkbox"/>
	Ther/Fix/Sng <input type="checkbox"/>	Alum./Metal <input checked="" type="checkbox"/>	Vinyl/V.Cl <input type="checkbox"/>	Wd./Vnyl/Fxd <input type="checkbox"/>
	Damaged <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Repaint <input type="checkbox"/>
DOOR	Bounds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	Yes
	Pocket/Bi-Fold <input type="checkbox"/>	Hinged <input checked="" type="checkbox"/>	Wood <input type="checkbox"/>	Composite <input checked="" type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	Yes
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	Yes
	Install GFCI <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>
TUB / FAUCET		Unsecured <input type="checkbox"/>	Operational	Yes
	Plastic <input type="checkbox"/>	Other <input type="checkbox"/>	Slow Drain <input type="checkbox"/>	Corrosion <input type="checkbox"/>
				Leak <input type="checkbox"/>
TRAP / DRAIN		Unsecured <input type="checkbox"/>	Damaged	No
	Improper Trap <input type="checkbox"/>	Slow Drain <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>
WASHER	Make		Operational	Yes
DRYER	Make		Operational	Yes
DRYER VENT		Unsecured <input type="checkbox"/>	Damaged	No
	With Other Exhaust <input type="checkbox"/>	To Crawlspace <input type="checkbox"/>	To Attic <input type="checkbox"/>	Plastic Duct <input type="checkbox"/>
HEAT SOURCE		None <input type="checkbox"/>	Thermostat <input type="checkbox"/>	Electric <input type="checkbox"/>
	Air Register <input checked="" type="checkbox"/>	Convector/Radiator <input type="checkbox"/>		Radiant <input type="checkbox"/>

RECEPTACLE

Recommend installation of GFCI protection to reduce shock hazard. Consult a licensed electrician, as needed.

CLOTHES DRYER

For Your Information: Dryer fuel source is electric or gas. Current occupants were using electricity.



FIREPLACE

TYPE	Built-In <input type="checkbox"/>	Free Standing <input type="checkbox"/>	Gas Insert <input type="checkbox"/>	Wood Insert <input checked="" type="checkbox"/>	Metal Liner <input type="checkbox"/>	Firebrick <input checked="" type="checkbox"/>	External Air Supply <input type="checkbox"/>
FIREPLACE FRONT	Soot/Stain <input type="checkbox"/>	Damaged	No	FIREBOX			
	Brick <input checked="" type="checkbox"/>	Ceramic <input type="checkbox"/>	Marble <input type="checkbox"/>	Stone <input type="checkbox"/>	Observed damaged/missing mortar joints in the firebox. Recommend further evaluation and repair by a qualified chimney contractor or tuckpointing specialist.		
HEARTH	Raised <input checked="" type="checkbox"/>	None <input type="checkbox"/>	Damaged	N/A	CHIMNEY/FLUE		
DOOR/ SCREEN	None <input type="checkbox"/>	Operational	Yes	Moderate amounts of creosote present in the flue which represents a potential fire hazard. Recommend further evaluation and servicing of the chimney, by a qualified chimney contractor, prior to future operation.			
	Bounds <input type="checkbox"/>	Glass <input type="checkbox"/>	Metal <input type="checkbox"/>	Mesh <input checked="" type="checkbox"/>			
	Poor Fit <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Crack <input type="checkbox"/>			
FIREBOX	Fan <input type="checkbox"/>	Not Checked <input type="checkbox"/>	Damaged	No			
DAMPER	None <input type="checkbox"/>	Operational	Yes				
	Sticks <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Creosote <input type="checkbox"/>			
GAS INSERT	Fan <input type="checkbox"/>	Not Tested <input type="checkbox"/>	Operational	N/A			
WOOD/PELLET STOVE	Not Tested <input type="checkbox"/>	Damaged	N/A				
	Soot <input type="checkbox"/>	Suspect Installation <input type="checkbox"/>	Certification Not Apparent <input type="checkbox"/>				
CHIMNEY FLUE	Not Checked <input type="checkbox"/>	Damaged	No				
	Soot <input checked="" type="checkbox"/>	Unsecure/Improper <input type="checkbox"/>	Advise Inspection/Sweeping <input checked="" type="checkbox"/>				



123 Sample Estates Dr, Manchester, Missouri 63021

LOCATION	Basement <input type="checkbox"/>	1st Floor <input checked="" type="checkbox"/>	2nd Floor <input checked="" type="checkbox"/>	3rd Floor <input type="checkbox"/>	Other <input type="checkbox"/>
WATER FLOW	Normal <input checked="" type="checkbox"/>	Suspect <input type="checkbox"/>	Low <input type="checkbox"/>	WATER FLOW	
FLOOR	Worn <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No	
	Carpet <input type="checkbox"/>	Vinyl <input type="checkbox"/>	Wood <input checked="" type="checkbox"/>	Ceramic <input checked="" type="checkbox"/>	
WALL	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No	
	Drywall <input checked="" type="checkbox"/>	Brk/Blk/Stone <input type="checkbox"/>	Wood/WP. <input type="checkbox"/>	Ceramic <input checked="" type="checkbox"/>	
CEILING	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No	
	Drywall <input checked="" type="checkbox"/>	Stip/Acous/WP. <input type="checkbox"/>	Wood <input type="checkbox"/>	Tile <input type="checkbox"/>	
WINDOW	Bind <input type="checkbox"/>	Not Tested <input type="checkbox"/>	Operational	N/A	
	Single Hung <input type="checkbox"/>	Cas./Awning <input type="checkbox"/>	Sliding/Fxd <input type="checkbox"/>	Bay/Bow <input type="checkbox"/>	
	Ther/Fix/Sng <input type="checkbox"/>	Alum./Metal <input type="checkbox"/>	Vinyl/V.Cl <input type="checkbox"/>	Wd./Vnyl/Fx <input type="checkbox"/>	
	Damaged <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Repaint <input type="checkbox"/>	
DOOR	Bind <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	Yes	
	Pocket <input type="checkbox"/>	Hinged <input checked="" type="checkbox"/>	Wood <input type="checkbox"/>	Composite <input checked="" type="checkbox"/>	
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	Yes	
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	Yes	
	Install GFCI <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>	
EXHAUST FAN	Advise Installation <input type="checkbox"/>		Operational	Yes	
SINK	Worn <input type="checkbox"/>	Chip/Scratch <input type="checkbox"/>	Damaged	No	
FAUCET	No Shut-Off <input type="checkbox"/>		Operational	Yes	
	Sticks <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
TRAP/DRAIN	Unsecured <input type="checkbox"/>		Damaged	No	
	Improper Trap <input type="checkbox"/>	Slow Drain <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
VANITY	Worn <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Damaged	No	
	Laminate <input checked="" type="checkbox"/>	Plywood <input type="checkbox"/>	Wood <input type="checkbox"/>	Metal <input type="checkbox"/>	
	Scratch <input type="checkbox"/>	Mildew/Stain <input type="checkbox"/>	Missing/Loose Hardware <input type="checkbox"/>		
COUNTER	Unsecured <input type="checkbox"/>		Damaged	No	
	Solid Surface <input checked="" type="checkbox"/>	Mrbl./Granite <input type="checkbox"/>	Laminate <input type="checkbox"/>	Ceramic <input type="checkbox"/>	
	RegROUT/Recaulk <input type="checkbox"/>	Mildew/Stain <input type="checkbox"/>	Scratch <input type="checkbox"/>	Worn <input type="checkbox"/>	
TOILET	No Shut-Off <input type="checkbox"/>		Operational	Yes	
	Tank Loose <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Crack <input type="checkbox"/>	Leak <input type="checkbox"/>	
TUB / ENCLOSURE	Unsecured <input type="checkbox"/>		Damaged	No	
	Ceramic <input type="checkbox"/>	Cult./Marble <input type="checkbox"/>	Fiberglass <input type="checkbox"/>	Plastic <input type="checkbox"/>	
	RegROUT/Recaulk <input type="checkbox"/>	Mildew/Stain <input type="checkbox"/>	Crack <input type="checkbox"/>	Worn <input type="checkbox"/>	
JETTED TUB	Not Tested <input type="checkbox"/>		Operational	N/A	
	GFCI Protected <input type="checkbox"/>	Motor Access <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
FAUCET/SHOWER HEAD	Not Tested <input type="checkbox"/>		Operational	Yes	
	Sticks/Clogged <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
SHOWER ENCLOSURE	Unsecured <input type="checkbox"/>		Damaged	N/A	
	Ceramic <input type="checkbox"/>	Cult./Marble <input type="checkbox"/>	Fiberglass <input type="checkbox"/>	Plastic <input type="checkbox"/>	
	RegROUT/Recaulk <input type="checkbox"/>	Mildew/Stain <input type="checkbox"/>	Scratch <input type="checkbox"/>	Worn <input type="checkbox"/>	
FAUCET/SHOWER HEAD	Not Tested <input type="checkbox"/>		Operational	N/A	
	Sticks/Clogged <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Corrosion <input type="checkbox"/>	Leak <input type="checkbox"/>	
HEAT SOURCE	None <input type="checkbox"/>		Thermostat <input type="checkbox"/>	Electric <input type="checkbox"/>	
	Air Register <input checked="" type="checkbox"/>	Convactor/Radiator <input type="checkbox"/>		Radiant <input type="checkbox"/>	

Opened up the faucets in every bath/shower/sink, while the dishwasher was running, and the water pressure was adequate.

RECEPTACLE
Bathroom receptacles are properly protected by GFCI. The test/reset button for this circuit is located in the second floor guest bathroom.

FAUCET
Bathroom faucets are equipped with local shut-off valves to facilitate future maintenance.

TUB/ENCLOSURE
Maintenance Tip: Recommend maintaining perimeter caulk and tile grout surrounding tub and shower enclosures to prevent water penetration and related damages to walls and floor.



FLOOR	Worn <input type="checkbox"/> Carpet <input type="checkbox"/>	Crack/Stain <input type="checkbox"/> Vinyl <input type="checkbox"/>	Damaged <input type="checkbox"/> Wood <input checked="" type="checkbox"/>	No <input type="checkbox"/> Ceramic <input type="checkbox"/>
WALL	Patched <input type="checkbox"/> Drywall <input checked="" type="checkbox"/>	Crack/Stain <input type="checkbox"/> Brk/Blk/Stone <input type="checkbox"/>	Damaged <input type="checkbox"/> Wallpaper <input type="checkbox"/>	No <input type="checkbox"/> Ceramic <input type="checkbox"/>
CEILING	Patched <input type="checkbox"/> Drywall <input checked="" type="checkbox"/>	Crack/Stain <input type="checkbox"/> Stip/Acous/W <input type="checkbox"/>	Damaged <input type="checkbox"/> Wood <input type="checkbox"/>	No <input type="checkbox"/> Tile <input type="checkbox"/>
WINDOW	Binds <input type="checkbox"/> Single/Db. Hung <input type="checkbox"/> Ther/Fix/Sng <input type="checkbox"/> Damaged <input type="checkbox"/>	Not Tested <input type="checkbox"/> Cas./Awning <input type="checkbox"/> Alum./Metal <input checked="" type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Operational <input type="checkbox"/> Sliding <input checked="" type="checkbox"/> Vinyl/V.Cld <input type="checkbox"/> Stain/Rot <input type="checkbox"/>	Yes <input type="checkbox"/> Bay/Bow <input type="checkbox"/> Wd./Vnyl/Fx <input type="checkbox"/> Repaint <input type="checkbox"/>
DOOR	Binds <input type="checkbox"/> Pocket/Bi-Fold <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Operational <input type="checkbox"/> Wood <input type="checkbox"/>	N/A <input type="checkbox"/> Composite <input type="checkbox"/>
PATIO DOOR	Binds <input type="checkbox"/> Sliding <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Operational <input type="checkbox"/> Wood <input type="checkbox"/>	N/A <input type="checkbox"/> Metal/Vinyl <input type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
CEILING FAN	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
RECEPTACLE	Damaged/No Cover <input type="checkbox"/> Install GFCI <input checked="" type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	Operational <input type="checkbox"/> No Ground <input type="checkbox"/>	Yes <input type="checkbox"/> Open Ground <input type="checkbox"/>
SINK	Worn <input type="checkbox"/> Single <input type="checkbox"/>	Chip/Scratch <input type="checkbox"/> Double <input checked="" type="checkbox"/>	Damaged <input type="checkbox"/> Stainless <input checked="" type="checkbox"/>	No <input type="checkbox"/> Enamel/S.Sf <input type="checkbox"/>
FAUCET	No Shut-Off Valve <input type="checkbox"/> Sticks <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational <input type="checkbox"/> Corrosion <input type="checkbox"/>	Yes <input type="checkbox"/> Leak <input type="checkbox"/>
TRAP/DRAIN	Improper Trap <input type="checkbox"/>	Unsecured <input type="checkbox"/> Slow Drain <input type="checkbox"/>	Damaged <input type="checkbox"/> Corrosion <input type="checkbox"/>	No <input type="checkbox"/> Leak <input type="checkbox"/>
COUNTER	Unsecured <input type="checkbox"/> Ceramic <input type="checkbox"/> RegROUT/RecAulk <input type="checkbox"/>	Unsecured <input type="checkbox"/> Marble/Granite <input type="checkbox"/> Mildew/Stain <input type="checkbox"/>	Damaged <input type="checkbox"/> Laminate <input checked="" type="checkbox"/> Scratch <input type="checkbox"/>	No <input type="checkbox"/> Solid Surf. <input type="checkbox"/> Worn <input type="checkbox"/>
CABINET	Worn <input type="checkbox"/> Laminate <input checked="" type="checkbox"/> Miss/Loose Hdwr <input type="checkbox"/>	Unsecured <input type="checkbox"/> Plywood <input type="checkbox"/> Mildew/Stain <input type="checkbox"/>	Damaged <input type="checkbox"/> Wood <input type="checkbox"/> Scratch <input type="checkbox"/>	No <input type="checkbox"/> Metal <input type="checkbox"/> Other <input type="checkbox"/>
RANGE HOOD	Cooktop Exhaust <input type="checkbox"/> Corrosion <input type="checkbox"/>	No Exhaust <input type="checkbox"/>	Operational <input type="checkbox"/> No Light <input type="checkbox"/>	Yes <input type="checkbox"/> Noisy <input type="checkbox"/>
EXHAUST VENT	Unsecured <input type="checkbox"/> With Other Exhaust <input type="checkbox"/>	Unsecured <input type="checkbox"/> To Attic <input type="checkbox"/>	Ductless <input checked="" type="checkbox"/> Improper <input type="checkbox"/>	Concealed <input type="checkbox"/> To Exterior <input type="checkbox"/>
FILTER	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Damaged <input type="checkbox"/>	Greasy <input type="checkbox"/>
MAJOR APPLIANCES (Built In)				
DISHWASHER			Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
GARBAGE DISPOSAL			Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
STOVE/OVEN/RANGE			Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
REFRIGERATOR			Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
MICROWAVE			Operational <input type="checkbox"/>	Yes <input type="checkbox"/>
	Tested On/Off <input type="checkbox"/>		Did Not Check All Functions/Full Cycle <input checked="" type="checkbox"/>	
HEAT SOURCE	None <input type="checkbox"/> Air Register <input checked="" type="checkbox"/>	Thermost <input type="checkbox"/> Convecton/Radiator <input type="checkbox"/>	Electric <input type="checkbox"/> Radiant <input type="checkbox"/>	

WINDOW

Suspect failed seal between double panes of glass which will result in fogging or staining of glass but have little other impact on the window. If fogging glass is an issue or concern, recommend replacement. Often when this is detected in one window it is present in others. Recommend further evaluation of all windows if window is replaced.

RECEPTACLE

Recommend installation of GFCI protection to reduce risk of electrical shock. Consult a licensed electrician, as needed.

RANGE HOOD

Consider installation of a range hood that vents to the exterior to properly ventilate moisture, smoke, etc.,.

MAJOR APPLIANCES

All kitchen appliances that were tested were operational at the time of the inspection, unless otherwise noted. Appliances are tested for operation (on/off). The efficiency/effectiveness of appliances and all functions were not tested.



LIVING ROOM

123 Sample Estates Dr, Manchester, Missouri 63021

FLOOR	Worn <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No
	Carpet <input checked="" type="checkbox"/>	Vinyl <input type="checkbox"/>	Wood <input checked="" type="checkbox"/>	Ceramic <input type="checkbox"/>
WALL	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No
	Drywall <input checked="" type="checkbox"/>	Brk/Blk/Stone <input type="checkbox"/>	Wood <input type="checkbox"/>	Wallpaper <input type="checkbox"/>
CEILING	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	No
	Drywall <input checked="" type="checkbox"/>	Stip/Acous/W <input type="checkbox"/>	Wood <input type="checkbox"/>	Tile <input type="checkbox"/>
WINDOW	Bounds <input type="checkbox"/>	Not Tested <input type="checkbox"/>	Operational	No
	Single Hung <input checked="" type="checkbox"/>	Cas./Awning <input type="checkbox"/>	Sliding <input checked="" type="checkbox"/>	Bay/Bow <input type="checkbox"/>
	Ther/Fix/Sng <input type="checkbox"/>	Alum./Metal <input checked="" type="checkbox"/>	Vinyl/V.Cld <input type="checkbox"/>	Wd./Vnyl/Fxd <input type="checkbox"/>
	Damaged <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Repaint <input type="checkbox"/>
DOOR	Bounds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	N/A
	Pocket/Bi-Fold <input type="checkbox"/>	Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	French <input type="checkbox"/>
PATIO DOOR	Bounds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	Yes
	Sliding <input checked="" type="checkbox"/>	Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Metal <input checked="" type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	Yes
CEILING FAN	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	N/A
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	Yes
	Switched <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>
HEAT SOURCE	None <input type="checkbox"/>		Thermostat <input type="checkbox"/>	Electric <input type="checkbox"/>
	Air Register <input checked="" type="checkbox"/>	Convactor/Radiator <input type="checkbox"/>		Radiant <input type="checkbox"/>

WALL
Minor cracks noted and considered typical due to normal shrinkage, settlement & movement. Monitor for additional activity.

WINDOW
Select windows throughout the house were missing window locks or not operational. Further evaluation and repair is required to ensure proper operation.

Window sash will not remain open freely (living room). Further evaluation and repair/replacement is required to ensure proper operation.

RECEPTACLE
Select receptacles throughout the house tested positive for electricity, were properly grounded, and the current was flowing in the right direction, unless otherwise noted.



DINING ROOM

FLOOR	Worn <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	N/A
	Carpet <input type="checkbox"/>	Vinyl <input type="checkbox"/>	Wood/Lam. <input type="checkbox"/>	Ceramic <input type="checkbox"/>
WALL	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	N/A
	Drywall/Plaster <input type="checkbox"/>	Brk/Blk/Stone <input type="checkbox"/>	Wood <input type="checkbox"/>	Wallpaper <input type="checkbox"/>
CEILING	Patched <input type="checkbox"/>	Crack/Stain <input type="checkbox"/>	Damaged	N/A
	Drywall/Plaster <input type="checkbox"/>	Stip/Acous/W <input type="checkbox"/>	Wood <input type="checkbox"/>	Tile <input type="checkbox"/>
WINDOW	Bounds <input type="checkbox"/>	Not Tested <input type="checkbox"/>	Operational	N/A
	Single/DbL Hung <input type="checkbox"/>	Cas./Awning <input type="checkbox"/>	Sliding/Fxd <input type="checkbox"/>	Bay/Bow <input type="checkbox"/>
	Ther/Fix/Sng <input type="checkbox"/>	Alum./Metal <input type="checkbox"/>	Vinyl/V.Cld <input type="checkbox"/>	<input type="checkbox"/>
	Damaged <input type="checkbox"/>	Mildew/Mold <input type="checkbox"/>	Stain/Rot <input type="checkbox"/>	Repaint <input type="checkbox"/>
DOOR	Bounds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	N/A
	Pocket/Bi-Fold <input type="checkbox"/>	Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	French <input type="checkbox"/>
PATIO DOOR	Bounds <input type="checkbox"/>	Damaged <input type="checkbox"/>	Operational	N/A
	Sliding <input type="checkbox"/>	Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Metal/Vinyl <input type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	N/A
CEILING FAN	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>	Operational	N/A
RECEPTACLE	Damaged/No Cover <input type="checkbox"/>		Operational	N/A
	Switched <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>
HEAT SOURCE	None <input type="checkbox"/>		Thermostat <input type="checkbox"/>	Electric <input type="checkbox"/>
	Air Register <input type="checkbox"/>	Convactor/Radiator <input type="checkbox"/>		Radiant <input type="checkbox"/>



BEDROOM

123 Sample Estates Dr, Manchester, Missouri 63021

FLOOR	Worn <input type="checkbox"/> Carpet <input checked="" type="checkbox"/>	Crack/Stain <input type="checkbox"/> Vinyl <input type="checkbox"/>	Wood/Lam <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>	CEILING Typical drywall defects noted (e.g. nail pops, exposed tape seam, separation/cracking, etc..).
WALL	Uneven <input type="checkbox"/> Drywall <input checked="" type="checkbox"/>	Crack/Stain <input type="checkbox"/> Brk/Blk/Stn/ <input type="checkbox"/>	Wood/WP. <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>	
CEILING	Patched <input type="checkbox"/> Drywall <input checked="" type="checkbox"/>	Crack/Stain <input type="checkbox"/> Stip/Acous/W <input type="checkbox"/>	Wood <input type="checkbox"/>	Damaged <input type="checkbox"/>	No <input type="checkbox"/>	
WINDOW	Bounds <input type="checkbox"/> Single Hung <input checked="" type="checkbox"/> Ther/Fix/Sng <input type="checkbox"/> Damaged <input type="checkbox"/>	Not Tested <input type="checkbox"/> Cas./Awning <input type="checkbox"/> Aluminum <input checked="" type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Vinyl/V.Cl <input type="checkbox"/>	Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
DOOR	Bounds <input type="checkbox"/> Pocket/Bi-Fold <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
PATIO/DOOR	Bounds <input type="checkbox"/> Sliding <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>	
CLOSET/DOOR	Bounds <input type="checkbox"/> Light <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Bi-Fold <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>	
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>		Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
CEILING FAN	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>		Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
RECEPTACLE		Damaged/No Cover <input type="checkbox"/>		Operational <input type="checkbox"/>	Yes <input type="checkbox"/>	
	Switched <input checked="" type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>		
HEAT SOURCE	None <input type="checkbox"/> Air Register <input checked="" type="checkbox"/>	Thermostat <input type="checkbox"/> Convactor/Radiator <input type="checkbox"/>	Electric <input type="checkbox"/> Radiant <input type="checkbox"/>			

Extra Comments Continued Next Page...



BEDROOM

FLOOR	Worn <input type="checkbox"/> Carpet <input type="checkbox"/>	Crack/Stain <input type="checkbox"/> Vinyl <input type="checkbox"/>	Wood/Lam <input type="checkbox"/>	Damaged <input type="checkbox"/>	N/A <input type="checkbox"/>
WALL	Uneven <input type="checkbox"/> Drywall/Plaster <input type="checkbox"/>	Crack/Stain <input type="checkbox"/> Brk/Blk/Stn/ <input type="checkbox"/>	Wood/WP. <input type="checkbox"/>	Damaged <input type="checkbox"/>	N/A <input type="checkbox"/>
CEILING	Patched <input type="checkbox"/> Drywall/Plaster <input type="checkbox"/>	Crack/Stain <input type="checkbox"/> Stip/Acous/W <input type="checkbox"/>	Wood <input type="checkbox"/>	Damaged <input type="checkbox"/>	N/A <input type="checkbox"/>
WINDOW	Bounds <input type="checkbox"/> Single/Dbl. Hung <input type="checkbox"/> Ther/Fix/Sng <input type="checkbox"/> Damaged <input type="checkbox"/>	Not Tested <input type="checkbox"/> Cas./Awning <input type="checkbox"/> Alum./Metal <input type="checkbox"/> Mildew/Mold <input type="checkbox"/>	Sliding/Fxd <input type="checkbox"/> Vinyl/V.Cl <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
DOOR	Bounds <input type="checkbox"/> Pocket/Bi-Fold <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
PATIO/DOOR	Bounds <input type="checkbox"/> Sliding <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Wood <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
CLOSET/DOOR	Bounds <input type="checkbox"/> Light <input type="checkbox"/>	Damaged <input type="checkbox"/> Hinged <input type="checkbox"/>	Bi-Fold <input type="checkbox"/>	Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
LIGHTING	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>		Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
CEILING FAN	None <input type="checkbox"/>	Unsecured <input type="checkbox"/>		Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
RECEPTACLE		Damaged/No Cover <input type="checkbox"/>		Operational <input type="checkbox"/>	N/A <input type="checkbox"/>
	Switched <input type="checkbox"/>	Reverse Polarity <input type="checkbox"/>	No Ground <input type="checkbox"/>	Open Ground <input type="checkbox"/>	
HEAT SOURCE	None <input type="checkbox"/> Air Register <input type="checkbox"/>	Thermostat <input type="checkbox"/> Convactor/Radiator <input type="checkbox"/>	Electric <input type="checkbox"/> Radiant <input type="checkbox"/>		

WINDOW

Suspect failed seal between double panes of glass (both windows, master bedroom) which will result in fogging or staining of glass but have little other impact on the window. If fogging glass is an issue or concern, recommend replacement. Often when this is detected in one window it is present in others. Recommend further evaluation of all windows if window is replaced.

The original metal framed windows are in various conditions (see comment for Living Room).

Metal framed windows have a tendency to create interior condensation during the extreme winter months. If this is a concern or future issue, consider replacement. There were no signs/staining in the window sills indicative of previous condensation related problems.

The following limitations pertain to your report as marked.

-
- Snow Cover/Obstruction** – Areas in report noted as “not visible” have not been inspected because of snow cover or other obstruction impeding a visual inspection.
-
- Occupied Home** – The home is occupied by seller/tenant with their personal belongings and furniture which may limit some areas to inspect.
-
- Skylight** – Skylights are an excellent source of light to dwellings, but frequently have condensation problems and are always a risk for potential future water leaks because flashings require regular ongoing maintenance by an experienced roofer.
-
- Solarium** – Solariums in most cases are installed as an addition to the main structure to necessitate additional living space. They are high maintenance and most often have condensation problems which can be controlled but never eliminated. Expect a need for frequent re-glazing of panes and/or replacement of thermal units as this structure ages and deteriorates. Also, with dramatic seasonal changes in temperature, it is difficult to control the interior climate of this part of the dwelling.
-
- Built Up Roofs** – This roof is constructed of a built-up membrane that is essentially hidden from view. As such, it is difficult to inspect fully without destructive testing which is beyond the scope of the inspection. This inspection is limited to reviewing and describing the roof system and does not guarantee or warranty now or in the future that the roof will not leak.
-
- Finished Basements** – The finishing of the basement prevents visual inspection of foundation walls, floors, mechanical and structural components. Normal High moisture readings were found at time of inspection. Despite these tests results, a dry basement at this time or at any time in the future is not guaranteed.
-
- Circuit Sizing** – The Inspector is required to address the compatibility of conductors and overcurrent devices. In some instances, general trade procedures include over-sizing overcurrent devices to guard against nuisance (e.g. air conditioning units, dryers). The Inspector is not required to evaluate such general trade procedures, but to inform you of incompatibility.
-
- Standard and Mid - Efficiency Furnace** - Only a limited section of the heat exchanger could be viewed with a light and mirror. Dismantling the furnace to thoroughly inspect the heat exchanger is beyond the scope of this inspection. You are advised to obtain the services of a qualified gas fitter/technician to perform a complete inspection of your furnace prior to the start of the heating season.
-
- High-Efficiency Furnace** – No part of the exchanger or the burner area could be viewed. Dismantling the furnace to thoroughly inspect the heat exchanger is beyond the scope of this inspection. You are advised to obtain the services of a qualified gas fitter/technician to perform a complete inspection of your furnace prior to the start of the heating season.
-
- Chimney** – The interior of chimneys and their flue liners are not visible on our visual inspection. You are advised to obtain the services of a qualified chimney sweeper or other qualified personnel to perform a complete inspection and tune up of your fireplace/stove prior to using the appliance.
-
- Heat Pumps** – Heat pumps are complex systems that require frequent maintenance and repair costs once they reach the age of five to ten years or more. Only qualified technicians can properly inspect all the cycles of these units because it is technically exhaustive and beyond the scope of this visual inspection. At this time the heating cooling cycle could not be checked due to seasonal temperature limitations. Heat pumps are not a practical source of heating when temperatures fall below 32° F
-
- Septic System and/or Well** – Have not been inspected. Both the septic system and the quality/quantity of the well water supply are beyond the scope of this inspection. Obtain the services of a qualified technician to perform a complete evaluation of your septic tank and leaching field and/or well water quality and recharge rate.
-
- Common Areas** – In general, the Inspector is not required to review or assess common areas in multi-unit developments. Attached common areas may include roads, paths, landscaping, integral roofs and wall systems. As a matter of courtesy, the Inspector will provide a general overview of what you should consider with respect to these areas. This may include evaluation of roof and external building attachments that may affect you via future additional service fees.
-
- Vintage Homes** – (homes built prior to 1950) – Character homes have inherent defects because they were built without the benefit of the standardized Building Codes. You must keep in mind that the defects noted throughout this report are typical of such dwellings because of normal wear and tear throughout the years. Often, maintenance repairs are ongoing and done based on your budget. If you tried to repair or improve all at once, costs could become high to the point where it is not practical or affordable to you at this time. Repairs or improvements which you would like to repair in the immediate future or have been advised to do, should be quoted prior to purchase by qualified contractors for costs and methods of repair.
-

This summary is not the entire report. The complete report may include additional information of concern to the client. It is recommended that the client read the entire report.

Property: 123 Sample Estates Dr
Manchester, Missouri 63021
Client: Kristin Sample
Address:
Zip / Postal Code:
Real Estate Company:
Real Estate Agent:
Inspector: Chad W. Borah
Scheduled Inspection Time: 7/12/2006 4:00:00 PM

1) PROPERTY AND SITE

1.1 LANDSCAPING

Recommend removal of ivy, which was found climbing behind the vinyl siding along the rear/south wall, to prevent moisture/insect entry and related damage.

2) EXTERIOR

2.1 WINDOWS

Screens will require periodic maintenance and do now. Damaged screens noted, most notably first floor/south wall. Recommend further evaluation and repair/replacement of damaged screens.

3) ATTIC

3.1 INSULATION

Insulation is uneven with some areas of the ceiling exposed. Redistribution of insulation will increase thermal efficiency. Recommend further evaluation and correction.

4) ELECTRICAL SERVICE / PANEL

4.1 DISTRIBUTION PANEL

Federal Pacific Electric, Stab-Lok panels have received a significant amount of attention related to a Consumer Produce Safety Commission (CPSC) study in the early eighties. The results of the study demonstrated a high frequency (>33%) with which the double pole breakers failed to trip. Recommend further evaluation by a licensed electrician. Replacement should be considered given age and unknown risk.

4.2 FUSE

Two pole breakers are not attached (30amp breaker) to ensure safety when a breaker trips. Recommend further evaluation and correction by a licensed electrician.

5) BASEMENT / STRUCTURE

This summary is not the entire report. The complete report may include additional information of concern to the client. It is recommended that the client read the entire report.

Property:	123 Sample Estates Dr Manchester, Missouri 63021
Client:	Kristin Sample

5.1 *WALL*

Evidence of previous moisture entry through foundation crack(southeast corner). Recommend further evaluation and repair by a foundation repair specialist to prevent water entry and related damage.

High moisture content was detected in the drywall around the sump pit and along the front wall (base of wall, evidence of previous repair). Suspect moisture entry relates to crack in foundation (visible from sump pit box). Recommend further evaluation to determine source of moisture and scope of repair.

6) FIREPLACE

6.1 *CHIMNEY/FLUE*

Moderate amounts of creosote present in the flue which represents a potential fire hazard. Recommend further evaluation and servicing of the chimney, by a qualified chimney contractor, prior to future operation.

7) KITCHEN

7.1 *WINDOW*

Suspect failed seal between double panes of glass which will result in fogging or staining of glass but have little other impact on the window. If fogging glass is an issue or concern, recommend replacement. Often when this is detected in one window it is present in others. Recommend further evaluation of all windows if window is replaced.

7.2 *RECEPTACLE*

Recommend installation of GFCI protection to reduce risk of electrical shock. Consult a licensed electrician, as needed.

8) LIVING ROOM

8.1 *WINDOW*

Select windows throughout the house were missing window locks or not operational. Further evaluation and repair is required to ensure proper operation.

Window sash will not remain open freely (living room). Further evaluation and repair/replacement is required to ensure proper operation.

9) BEDROOM

9.1 *WINDOW*

Suspect failed seal between double panes of glass (both windows, master bedroom) which will result in fogging or staining of glass but have little other impact on the window. If fogging glass is an issue or concern, recommend replacement. Often when this is detected in one window it is present in others. Recommend further evaluation of all windows if window is replaced.