

RED DOG HOME INSPECTIONS, INC

"Inspecting to a higher standard"



CUSTOMER: **Sample Report 2007**

PROPERTY INSPECTED:

DATE OF INSPECTION:

REPORT #

INSPECTOR: **Paul Daley**

OCHI # 1042

RED DOG HOME INSPECTIONS, INC
P.O BOX 11009
PORTLAND, OR. 97211

HOME: 503-249-5963
CELL: 503-516-0272
FAX: 503-249-5963

Oregon State Contractor's License No. 171071

daleypdx@comcast.net

CLIENT / INSPECTION INFORMATION

CUSTOMER: **Sample Report 2007** PHONE HOME:

ADDRESS: WORK NO. :

FAX NO. :

TYPE OF INSPECTION: General Partial: WDO / WDI (Rot and Insects)

TYPE OF BUILDING: **INFO**

TIME: **INFO** WEATHER: **INFO** TEMPERATURE: **INFO**

ORIENTATION: Front door faces North South East West T.G. #:

PEOPLE ON SITE: **INFO**

OCCUPANCY: Vacant Occupied SELLER: Phone no. :

SELLING REALTOR: LISTING REALTOR:

PHONE NO. PHONE NO.

COMPANY: COMPANY:

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STATEMENT OF PURPOSE: The visual examination of the building whose address is specified on the report The inspection will be of the readily accessible systems and components of the structure and the reporting of their condition at the time of the inspection only.

DEFINITIONS

- No Comments:** Checked but no significant need for corrective action at the time of the inspection.
- Serviceable:** Adequate and functional - the item is still performing its intended function and these terms should **not** be taken to mean that the item is in "like new condition".
- Observation:** The act of making a visual examination and noting an opinion or occurrences.
- Deficient:** A system or component that is judged a potential health or safety hazard, is damaged, deteriorated, improperly installed, is using outdated safety standards, is not functioning as intended, or is at or near the end of its service life.
- Maintenance:** To keep in an appropriate condition or operation.
- Upgrade:** To improve a system or component to meet current standards.
- Monitor:** Continuous checking of a system or component, as a predictable consequence of a condition is not yet evident.
- Evaluate:** Further examination and analysis is needed by a qualified professional tradesman or service technician beyond that provided the building Inspector.
- Repair:** Bring a system or component to a functioning and safe condition by a qualified professional tradesman or service technician.
- GFCI:** "Ground fault circuit interrupter"- fast acting circuit breaker assembly (usually a wall outlet).
- WDO / WDI:** Wood destroying organisms / Wood destroying insects

| EXTERIOR | | | | | | | | | | | |
|---|-------------|---|---|--|---|---|---|------------------------|---------|----------|--------|
| WALL STRUCTURE TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Masonry WALL CLADDING TYPE: <input type="checkbox"/> Stucco: Concrete Type, <input type="checkbox"/> Wood: INFO <input type="checkbox"/> Brick veneer <input type="checkbox"/> Composite: INFO | | | LIMITATIONS: <input type="checkbox"/> Stored items / wood pile <input type="checkbox"/> Visual only / beneath ground level decks: INFO <input type="checkbox"/> No visibility beneath ground level decks: INFO <input type="checkbox"/> Behind storm sashes/ screens <input type="checkbox"/> Dense vegetation A visual ground level inspection has restrictions that include decks, upper eaves, soffits and behind the siding. Rain drains, yard lights, fences, out-buildings and pools are not checked, evaluation by a licensed contractor is required. | | | | | | | | |
| SITE GRADE: <input type="checkbox"/> Flat <input type="checkbox"/> Moderate slope <input type="checkbox"/> Steep slope | | RETAINING WALL TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Wood <input type="checkbox"/> Stone <input type="checkbox"/> Metal <input type="checkbox"/> None | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | | | | ACTION | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] <i>DEFICIENCY KEY</i> Improperly Installed [3] Outdated Safety Standards [4] Not Functioning as Intended [5] | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR |
| SIDING MATERIAL | ◇ | ○ | <input type="checkbox"/> Siding swelling / moisture damage : [2] <input type="checkbox"/> Cracked / split / missing siding, trim: in spots [no inventory made] [2] | · | ○ | □ | □ | · | ○ | □ | □ |
| EAVES / SOFFITS FASCIA | ◇ | ○ | <input type="checkbox"/> Soffit moisture stains: [5] <input type="checkbox"/> No / minimal soffit ventilation : [5] | · | ○ | □ | □ | · | ○ | □ | □ |
| PAINT / CAULKING | ◇ | ○ | <input type="checkbox"/> Missing /cracked window glazing / caulk & siding caulk in spots [2] <input type="checkbox"/> Peeling paint : in spots [2] | · | ○ | □ | □ | · | ○ | □ | □ |
| FLASHING - wall | ◇ | ○ | <input type="checkbox"/> No flashing: INFO [3] | · | ○ | □ | □ | · | ○ | □ | □ |
| RETAINING WALLS | ◇ | ○ | <input type="checkbox"/> Leaning / cracked retaining walls : [2] <input type="checkbox"/> Retaining walls needed at: crawl vent frames / basement windows [3] | · | ○ | □ | □ | · | ○ | □ | □ |
| DRAINAGE/ GRADING | ◇ | ○ | <input type="checkbox"/> Grade slopes toward foundation: INFO [5] <input type="checkbox"/> Lower dirt grade / check for rot: INFO [3] | · | ○ | □ | □ | · | ○ | □ | □ |
| FOUNDATION | ◇ | ○ | <input type="checkbox"/> Common cracks: [2] <input type="checkbox"/> Settlement cracks: [2] | · | ○ | □ | □ | · | ○ | □ | □ |
| DRIVEWAY/ WALKS / PATIOS | ◇ | ○ | <input type="checkbox"/> Common cracks: <input type="checkbox"/> Slab settling / lifting / trip hazards: INFO [1] | · | ○ | □ | □ | · | ○ | □ | □ |
| DECKS PORCHES | ◇ | ○ | <input type="checkbox"/> Settlement : [5] <input type="checkbox"/> No visible flashing at deck / porch wall joints: INFO [3] | · | ○ | □ | □ | · | ○ | □ | □ |

COMMENTS: In general a board by board search was not performed for each of these components and is beyond the scope of this inspection. See the *WDO / WDI- Rot / Insect Report*.

A.

Photos are inserted here if they are relevant.

| GARAGE/CARPORT | | | | | | | | | | |
|---|-------------|--------------------|---|--|------------------------|---------|--------------------------|--------------------------|-----|---|
| <input type="checkbox"/> ATTACHED <input type="checkbox"/> DETACHED GARAGE DOOR TYPE: <input type="checkbox"/> Wood / Composite <input type="checkbox"/> Metal / Vinyl | | | | LIMITATIONS: <input type="checkbox"/> Storage: Limited access, <input type="checkbox"/> Fixed walls, ceilings, appliances, cabinets / shelves, | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | |
| | | | | <i>Potential Health / Safety Hazard [1]</i> <i>Damaged / Deteriorated [2]</i> DEFICIENCY <i>Improperly Installed [3]</i> KEY <i>Outdated Safety Standards [4]</i> <i>Not Functioning as Intended [5]</i> | | | | | | |
| VEHICLE DOORS | ◇ | ○ | <input type="checkbox"/> Physical Damage : [2] <input type="checkbox"/> Loose / missing hardware : [2] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |
| OPENERS | ◇ | ○ | <input type="checkbox"/> Does not Reverse : [1] <input type="checkbox"/> "Heavy" opener reversal pressure,[1] <input type="checkbox"/> Electric "eye" not found within 4" - 6" of the floor : [4] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |
| WALLS / CEILINGS | ◇ | ○ | <input type="checkbox"/> Break in Firewall (Holes in Walls/Ceiling) : [1] <input type="checkbox"/> Moisture stains on the ceilings & walls : [5] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |
| FRAMING | ◇ | ○ | <input type="checkbox"/> Marginal / undersized framing : [3] <input type="checkbox"/> Sagging roof rafters: [5] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |
| DOORS | ◇ | ○ | <input type="checkbox"/> Entry fire door to house does not latch : [1] <input type="checkbox"/> Pet door installed through entry fire door : [1] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |
| FLOOR | ◇ | ○ | <input type="checkbox"/> Common / settlement cracks (slab / walls): [5] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ |

COMMENTS: ■ See the WDO / WDI- Rot / Insect Report

A.

Photos are inserted here if they are relevant.

| ROOF | | | | | | | | | | | | | | | | | | | |
|--|---------------|--------------------------|---|---|--------------------------|-----------------------------------|----------------------------|--------------------------|----------|---------------------------|--------------------------|--------------------------|--------------------------|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| ROOF - LOCATION - | ROOF MATERIAL | | | | | APPROX. NUMBER OF LAYERS | SERVICE LIFE WARNING | | LOCATION | VIEWED FROM | | | | LIMITATIONS | | | | | |
| | COMPOSITION | WOOD | | RUBBER | ROLL ROOFING | | NEAR | AT END | | ROOF WALKED | EAVES/ FROM LADDER | RIDGE | | DEBRIS/ MOSS | TOO STEEP | TOO FRAGILE | NO ACCESS TOO HIGH | | |
| | | | | | | | | | | | | | | | | | | | |
| Main | A | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| INFO | B | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | B | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| INFO | C | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | C | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| INFO | D | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | D | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | | | | | | ACTION | | | | LOCATIONS | | | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | (SEE LOCATION LIST AT TOP LEFT OF THIS PAGE) | | | | | |
| ROOF COVERINGS | ◇ | ○ | <input type="checkbox"/> Shingles missing / worn / split-cracked : [2] <input type="checkbox"/> Exposed felt / double breaks : [2] <input type="checkbox"/> Damaged ridge / hip : [2] <input type="checkbox"/> Damaged valley : [2] <input type="checkbox"/> Cupping curling : [2] <input type="checkbox"/> Blisters / bubbles / fissures / cracks: [2] <input type="checkbox"/> Pitch too flat for material used : [3] | • | ○ | □ | □ | • | • | • | • | • | • | • | • | • | • | • | • |
| FLASHING / PENETRATIONS Type: <input type="checkbox"/> Tar <input type="checkbox"/> Enamel/galv. <input type="checkbox"/> Lead <input type="checkbox"/> Rubber | ◇ | ○ | <input type="checkbox"/> Edge flashing installed over, not under, roof mat. [3] <input type="checkbox"/> Gaps at plumbing vent pipes / electric mast pipe: [3] <input type="checkbox"/> Gaps at vertical walls / cracked tar : [3] <input type="checkbox"/> Gutter flashing missing / too short : [3] <input type="checkbox"/> No diverter kick outs at gutter-wall joints : [3] | • | ○ | □ | □ | • | • | • | • | • | • | • | • | • | • | • | • |
| SKYLIGHTS | ◇ | ○ | <input type="checkbox"/> Cracked : [1] <input type="checkbox"/> Failed seal : [2] | • | ○ | □ | □ | • | • | • | • | • | • | • | • | • | • | • | • |
| DRAINAGE SYSTEM (gutters/downspouts) Type: <input type="checkbox"/> Metal <input type="checkbox"/> Plastic <input type="checkbox"/> Copper/Wood <input type="checkbox"/> Built-in | ◇ | ○ | <input type="checkbox"/> Debris buildup : [5] <input type="checkbox"/> Rusty gutters / downspouts : [2] <input type="checkbox"/> Downspouts unhooked from rain drain : [5] <input type="checkbox"/> Downspouts drain on ground (need extension): [3] <input type="checkbox"/> Leaking connections / joints [5] <input type="checkbox"/> Loose gutters / downspouts: [5] | • | ○ | □ | □ | • | • | • | • | • | • | • | • | • | • | • | • |

COMMENTS: Only a general roof covering inspection was performed.

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Photos are inserted here if they are relevant.

| ATTIC | | | | | | | | | | | | |
|---|-------------|--|--|--|------------------------|---------|--------------------------|--------------------------|-----------|---|---|---|
| ATTIC LOCATIONS | | LIMITATIONS: Insulation and vapor barriers are considered permanently installed and are NOT removed for purposes of inspection. Please read section B, paragraphs 2 of the contract on page three of this report. Additional limitations are listed below: | | | | | | | | | | |
| Main | A | INFO | | | | | | | | | | |
| INFO | B | INFO | | | | | | | | | | |
| INFO | C | INFO | | | | | | | | | | |
| INFO | D | INFO | | | | | | | | | | |
| Framing Type: <input type="checkbox"/> Stick frame <input type="checkbox"/> Truss <input type="checkbox"/> Engineered framing Sheathing Type : <input type="checkbox"/> Plywood <input type="checkbox"/> OSB <input type="checkbox"/> Skip <input type="checkbox"/> Boards Vapor Retarder Visible: <input type="checkbox"/> Plastic <input type="checkbox"/> Foil <input type="checkbox"/> Paper Insulation Type: <input type="checkbox"/> Fiberglass <input type="checkbox"/> Cellulose <input type="checkbox"/> Foam <input type="checkbox"/> See Below Approximate thickness of insulation: Attic walls: INFO Attic ceilings: INFO Attic rafters: INFO <input type="checkbox"/> Minimal insulation found: Consider upgrading where disturbed , thin or missing | | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | A | B | C | D |
| | | | | <i>Potential Health / Safety Hazard [1]</i> <i>Damaged / Deteriorated [2]</i> <i>Improperly Installed [3] DEFICIENCY</i> <i>Outdated Safety Standards [4] KEY</i> <i>Not Functioning as Intended [5]</i> | | | | | | | | |
| FRAMING | ◇ | ○ | <input type="checkbox"/> Minimal framing / rafters sagging [5] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ | ⋮ | ⋮ |
| SHEATHING | ◇ | ○ | <input type="checkbox"/> Moisture stains [5] <input type="checkbox"/> Torn vent screens [2] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ | ⋮ | ⋮ |
| INSULATION | ◇ | ○ | <input type="checkbox"/> Thin in work or traffic areas : [2] <input type="checkbox"/> Missing in some areas : [3] <input type="checkbox"/> Falling down in some areas: [2] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ | ⋮ | ⋮ |
| VENTILATION | ◇ | ○ | <input type="checkbox"/> Exhaust fan (bath / kitchen) not ducted to an air vent [3] <input type="checkbox"/> Minimal ventilation : [5] | | ⋮ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ⋮ | ⋮ | ⋮ | ⋮ |
| POWER ATTIC FAN: <input type="checkbox"/> OK <input type="checkbox"/> Not accessible <input type="checkbox"/> Not tested Thermostatically controlled <input type="checkbox"/> Repair / correction needed | | | | | | | | | | | | |

COMMENTS: Evidence of rodents

A.

Photos are inserted here if they are relevant.

| CHIMNEYS | | | | | | | | | | | | | | | | | |
|--------------------------------------|--------------------------|--------------------------|---|--|--------------------------|--------------------------|--------------------------|--------------------------|----------|---------------------------|--------------------------|--------------------------------------|---------------------------|--|--|--|--|
| CHIMNEY - LOCATION - | TYPE | | | APPROX. NUMBER OF FLUES | VIEWED FROM | | | | LOCATION | LIMITATIONS | | | | | | | |
| | MASONRY | WOOD CHASE | METAL | | ROOF | GROUND | LADDER | | | | OBSCURED by RAINCAP | FLUE NOT ACCESSIBLE (too high) | OTHER - RESTRICTIONS - | | | | |
| INFO A | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| INFO B | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | B | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| INFO C | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | C | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| INFO D | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | D | <input type="checkbox"/> | <input type="checkbox"/> | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | | | | | | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | <i>Potential Health / Safety Hazard [1]</i> <i>Damaged / Deteriorated [2]</i> <i>Improperly Installed [3] DEFICIENCY</i> <i>Outdated Safety Standards [4] KEY</i> <i>Not Functioning as Intended [5]</i> | | | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | (SEE LOCATION LIST AT TOP LEFT OF THIS PAGE) | | | |
| CHIMNEYS | ◇ | ○ | <input type="checkbox"/> Cracked brick / mortar : [2] <input type="checkbox"/> Deteriorated mortar crown / interior flue : [2] <input type="checkbox"/> Damaged mortar (soft, loose, missing): [2] <input type="checkbox"/> Spalling brick / mortar : [2] <input type="checkbox"/> Improper flashing / gaps in tar flashing : [3] | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · | · | · | · | · | · | | | |
| METAL FLUES | ◇ | ○ | <input type="checkbox"/> Cracked / damaged / rusted : [2] | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · | · | · | · | · | · | | | |

COMMENTS:

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| FIREPLACES AND SOLID FUEL BURNING APPLIANCES | | | | | | | | | | | | | | | | | |
|--|-------------|--------------------------|---|---|--------------------------|--------------------------|--------------------------|---|---|---------------------------|---------|----------|--------|--|--|--|--|
| FIREPLACE LOCATION | TYPE: | METAL | MASONRY | GAS BURNER | WOOD STOVE | LIMITATIONS | | | | | | | | | | | |
| INFO A | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | | | | | | | | | | | |
| INFO B | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | | | | | | | | | | | |
| INFO C | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | | | | | | | | | | | |
| INFO D | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | INFO | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | | | | | | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | <i>Potential Health / Safety Hazard [1]</i> <i>Damaged / Deteriorated [2] WHY</i> <i>Improperly Installed [3] DEFICIENT</i> <i>Outdated Safety Standards [4] KEY</i> <i>Not Functioning as Intended [5]</i> | | | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | (SEE LOCATION LIST AT TOP LEFT OF THIS PAGE) | | | |
| FIREPLACES | ◇ | ○ | <input type="checkbox"/> Hearth cracked/loose tiles/ minimal hearth coverage [4] <input type="checkbox"/> Loose / missing / spalling brick : [2] <input type="checkbox"/> Soft / loose / missing / mortar : [2] <input type="checkbox"/> Cracked brick / mortar in firebox: [2] <input type="checkbox"/> Creosote / soot / efflorescence : [1] <input type="checkbox"/> Damper stuck [5] / missing safety stop (gas burner) [1] | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · | · | · | · | · | · | | | |

COMMENTS:

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| BASEMENT | | | | | | | | | | |
|--|------------|--|---|--|---|---|--|------------------------|---------|----------|
| FOUNDATION TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry Block <input type="checkbox"/> Brick <input type="checkbox"/> Post and pier | | FLOOR STRUCTURE TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Wood <input type="checkbox"/> Soil FRAMING TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Post & beam <input type="checkbox"/> Joist <input type="checkbox"/> Engineered Joist | | | COLUMN TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Steel PIERS TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Not Visible | | LIMITATIONS: <input type="checkbox"/> Stored items <input type="checkbox"/> Finished walls / ceilings <input type="checkbox"/> Appliances / Duct work <input type="checkbox"/> Insulation | | | |
| INSULATION TYPE: <input type="checkbox"/> Fiberglass <input type="checkbox"/> Foam THICKNESS: <input type="checkbox"/> 3½" <input type="checkbox"/> 6" VAPOR RETARDERS: <input type="checkbox"/> Yes <input type="checkbox"/> No INSULATION ABSENT AT: <input type="checkbox"/> Rim Joist | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | | | | ACTION | | |
| | SERVICABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] DEFICIENCY KEY Improperly Installed [3] Outdated Safety Standards [4] Not Functioning as Intended [5] | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE |
| FLOORS / FOUNDATION | ◇ | ○ | <input type="checkbox"/> Basement wall / floor cracks : [2] <input type="checkbox"/> Evidence of settlement / movement : [5] <input type="checkbox"/> Stains around plumbing drain lines / fixtures : [5] <input type="checkbox"/> Moisture stains on walls / floors : [5] <input type="checkbox"/> Efflorescence / spalling of concrete : [2] | ▪ | ○ | □ | □ | □ | □ | |
| FRAMING | ◇ | ○ | <input type="checkbox"/> Undersized / sagging joists / beams / posts : [5] <input type="checkbox"/> Girders do not appear to be adequate for structure : [3] <input type="checkbox"/> Columns do not appear to be adequate for structure : [3] <input type="checkbox"/> Cut / unrepaired framing : INFO [3] | ▪ | ○ | □ | □ | □ | □ | |
| FLOOR DRAIN | ◇ | ○ | <input type="checkbox"/> None found <input type="checkbox"/> Not tested | ▪ | ○ | □ | □ | □ | □ | |

COMMENTS: See the *WDO / WDI- Rot / Insect Report*

A.

Photos are inserted here if they are relevant.

| CRAWL | | | | | | | | | | | | | | | | | |
|---|-------------|--------------------|--|--------------------------------------|----------------------------|---|-----------------------------------|---------------------------------|--|---------|-----------|--------|------|-----|-----|----|---|
| FOUNDATION TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Masonry <input type="checkbox"/> Brick <input type="checkbox"/> Post and pier FRAMING TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Engineered Joist | | | COLUMN TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Steel PIERS TYPE: <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Block | | | VAPOR BARRIER: <input type="checkbox"/> Plastic <input type="checkbox"/> Concrete INSUL. TYPE: <input type="checkbox"/> Fiberglass <input type="checkbox"/> Foam INSULATION THICKNESS: INFO Absent at: <input type="checkbox"/> Floor <input type="checkbox"/> Walls <input type="checkbox"/> Ductwork in spots <input type="checkbox"/> Incomplete/falling down some areas | | | LIMITATIONS: <input type="checkbox"/> Floor/wall insulation <input type="checkbox"/> Duct work / Appliances <input type="checkbox"/> Standing water <input type="checkbox"/> Stored items | | | | | | | | |
| CRAWLS ENTERED UNLESS NOTED | | | (Additional limitations) INFO | | | | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | DEFICIENCIES | | | | ACTION | | | | LOCATIONS | | | | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] | Damaged / Deteriorated [2] | Improperly Installed [3] DEFICIENCY | Outdated Safety Standards [4] KEY | Not Functioning as Intended [5] | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | Main | INF | INF | IN | |
| FOUNDATION | ◇ | ○ | <input type="checkbox"/> Minor wall cracks : [2] <input type="checkbox"/> Evidence of settlement / movement : [5] <input type="checkbox"/> Efflorescence / spalling of concrete : [2] | | | | . | ○ | □ | □ | . | . | . | . | . | . | |
| FRAMING | ◇ | ○ | <input type="checkbox"/> Stains around plumbing drain lines: [5] <input type="checkbox"/> Marginal / undersized framing : [3] <input type="checkbox"/> Cut / unrepaired framing: INFO [3] <input type="checkbox"/> Minimal post / pier supports in the crawl area [3] <input type="checkbox"/> Earth / wood contact : [5] | | | | . | ○ | □ | □ | . | . | . | . | . | . | . |
| VENTILATION | ◇ | ○ | <input type="checkbox"/> Dryer not vented outside [3] Using plastic flex duct [1] <input type="checkbox"/> Minimal ventilation : [5] <input type="checkbox"/> Torn vent screens) : [2] | | | | . | ○ | □ | □ | . | . | . | . | . | . | . |
| VAPOR RETARDER | ◇ | ○ | <input type="checkbox"/> Debris: wood / insulation / form boards / misc.: [5] <input type="checkbox"/> Vapor barrier missing / incomplete : [3] | | | | . | ○ | □ | □ | . | . | . | . | . | . | . |
| WATER / MOISTURE PENETRATIONS | ◇ | ○ | <input type="checkbox"/> Prior moisture stains: in low areas [5] <input type="checkbox"/> Moisture penetration : [5] <input type="checkbox"/> Standing water : [5] <input type="checkbox"/> Low point drain not found / locate or provide : | | | | . | ○ | □ | □ | . | . | . | . | . | . | . |

COMMENTS: See the WDO / WDI- Rot / Insect Report

A.

Photos are inserted here if they are relevant.

| BATHROOMS | | | | | | | | | | | |
|--------------------------------|-------------|--|--|---|------------------------|---------|----------|--------|------------|-----|----|
| LIMITATIONS: | | <i>Carpet in bathrooms limits the inspector's ability to detect problems with the underlayment and flooring. Other typical restrictions include floor coverings, furnishings, storage and freshly painted walls and ceilings</i> | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOCATIONS | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | Main: Hall | INF | IN |
| DOORS | ◇ | ○ | <input type="checkbox"/> Door hits frame [5] <input type="checkbox"/> Door does not latch [5] | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| WALLS CEILINGS | ◇ | ○ | <input type="checkbox"/> Moisture stains : [5] <input type="checkbox"/> Wall / ceiling cracks / holes [2] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| TUB / SHOWER WALLS | ◇ | ○ | <input type="checkbox"/> Cracked tiles [2] <input type="checkbox"/> Failed caulk: check spout / valves / walls / floor / soap dish [2] <input type="checkbox"/> Failing grout [2] <input type="checkbox"/> Loose tiles / moisture damage possible [2] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| FLOORS | ◇ | ○ | <input type="checkbox"/> Swelling of the underlayment [2] <input type="checkbox"/> Moisture in underlayment [5] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| FIXTURES | ◇ | ○ | <input type="checkbox"/> Finish damage at: sink / tub / shower / toilet [2] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| TOILET | ◇ | ○ | <input type="checkbox"/> Toilet loose at floor [3] <input type="checkbox"/> Toilet "runs" / cracked [5] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| SINK / DRAIN | ◇ | ○ | <input type="checkbox"/> Slow to drain [5] <input type="checkbox"/> Leak under sink [5] <input type="checkbox"/> Improper drain line / S-trap [3] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| SINK FAUCET | ◇ | ○ | <input type="checkbox"/> Faucets drip / water stops rusty / leaking [5] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| TUB / SHOWER DRAIN | ◇ | ○ | <input type="checkbox"/> Slow to drain [5] <input type="checkbox"/> Tub drain stopper not working / missing [5] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| TUB / SHOWER FAUCET | ◇ | ○ | <input type="checkbox"/> Drip leaks [5] <input type="checkbox"/> Hot and cold reversed [1] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |
| VENTILATION / WINDOWS | ◇ | ○ | <input type="checkbox"/> Windows would not open [5] <input type="checkbox"/> Noisy fan [5] <input type="checkbox"/> No exhaust fan or window [3] | | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ |

COMMENTS: *Tile grout at all water areas should be sealed on a regular basis. Edges should be caulked regularly.*

A.

Photos are inserted here if they are relevant.

| BEDROOMS | | | | | | | | | | | | |
|--|-------------|--------------------|--|---|------------------------|---------|----------|-------------|-------------|-------------|-------------|-------------|
| LIMITATIONS: Typical restrictions include floor coverings, furnishings, storage and freshly painted walls and ceilings. | | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | | | |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] Hampers emergency egress [6] | | | | | IN | INF | IN | IN |
| DOORS | ◇ | ○ | <input type="checkbox"/> Entry door hits frame [1] <input type="checkbox"/> Entry door does not latch [1] <input type="checkbox"/> Missing closet door(s) | : : | ○ | □ | □ | : : | : : | : : | : : | : : |
| WALLS CEILINGS | ◇ | ○ | <input type="checkbox"/> Wall / ceiling cracks / holes [2] <input type="checkbox"/> Moisture stains [5] | : : | ○ | □ | □ | : : | : : | : : | : : | : : |
| FLOORS | ◇ | ○ | <input type="checkbox"/> Slope to floor [5] | : | ○ | □ | □ | : | : | : | : | : |
| WINDOWS | ◇ | ○ | <input type="checkbox"/> Windows would not open [6] <input type="checkbox"/> At least one window would not stay open [6] <input type="checkbox"/> Windows are higher than normal above the floor [4,6] | : : : | ○ | □ | □ | : : : | : : : | : : : | : : : | : : : |

COMMENTS: Considerable storage limits inspections
A.

| BALANCE OF INTERIOR ROOMS | | | | | | | | | | | | |
|--|-------------|--------------------|---|---|--|---------|----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| Notes: Sloped floor/ binding doors may indicate a settlement problem Wall/Ceiling type: <input type="checkbox"/> Drywall <input type="checkbox"/> Plaster <input type="checkbox"/> Wood <input type="checkbox"/> Unable to determine | | | | | LIMITATIONS: Typical restrictions include carpet, stored items, furniture, floor coverings and freshly painted walls and ceilings. Odors and their sources are not checked. | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | | | |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | | Living room | INF | IN | IN |
| WALLS / CEILINGS | ◇ | ○ | <input type="checkbox"/> Wall / ceiling cracks / holes [2] <input type="checkbox"/> Moisture stains: active [5] <input type="checkbox"/> Moisture stains: dry at this time [5] <input type="checkbox"/> Missing floor and wall trim [3] <input type="checkbox"/> 3- way light switch not working properly / found [3] | : : : : : | ○ | □ | □ | : : : : : | : : : : : | : : : : : | : : : : : | : : : : : |
| FLOORS | ◇ | ○ | <input type="checkbox"/> Slope to floor [5] <input type="checkbox"/> Worn finish / gaps in the hardwood floors [2] | : : | ○ | □ | □ | : : | : : | : : | : : | : : |

COMMENTS: 1. Some minor wall blemishes. 2. Some floor squeaks and worn finish. 3. Some loose and stained carpet.

A. Clients concerned about hazardous materials, gases, lead in the paint or drinking water, molds, mildew or fungi should consult a specialist. The possibility of hazardous materials or organisms may be noted in the report but this should never be interpreted as either a complete list or all their locations. Advising clients on, & identifying any of the above which might be considered hazardous, is not within the scope of our inspection.

| STAIRS / HALLWAYS | | | | | | | | | | | | |
|---|-------------|--------------------|--|--|------------------------|---------|----------|----------------------------|----------------------------|----------------------------|----------------------------|----|
| LIMITATIONS: <input type="checkbox"/> Inspection of the stairs is limited by storage or sealed off areas-location : INFO | | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES <i>Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5]</i> | ACTION | | | | LOCATIONS | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | IN | INF | IN | IN |
| TREADS / RISERS | ◇ | ○ | <input type="checkbox"/> Loose / cracked treads [1] <input type="checkbox"/> Riser heights vary [1] <input type="checkbox"/> Minimal framing [3] | : : | ○ | □ | □ | : : | : : | : : | : : | |
| RAILINGS | ◇ | ○ | <input type="checkbox"/> Missing handrail [1] <input type="checkbox"/> Handrail loose [1] <input type="checkbox"/> Handrail lacks return to wall [1] <input type="checkbox"/> Missing guardrail [1] <input type="checkbox"/> Loose guardrail [1] <input type="checkbox"/> Upgrade baluster spacing to a narrower size [4] | : : : : : : | ○ | □ | □ | : : : : : : | : : : : : : | : : : : : : | : : : : : : | |
| WALLS / CEILINGS / FLOORS | ◇ | ○ | <input type="checkbox"/> Low headroom [1] <input type="checkbox"/> Wall / ceiling cracks / holes [2] <input type="checkbox"/> Moisture stains [5] <input type="checkbox"/> Minimal lighting [1] <input type="checkbox"/> 3- way light switch not working properly / found [3] | : : : : : : | ○ | □ | □ | : : : : : : | : : : : : : | : : : : : : | : : : : : : | |

COMMENTS:

A.

| SMOKE ALARMS | | | | | | | | | | | |
|--|-------------|--------------------|---|--|------------------------|---------|----------|-------------|---|---|---|
| LIMITATIONS: Smoke alarms were not tested or inspected. | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES <i>Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5]</i> | ACTION | | | | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | | |
| SMOKE ALARMS | | ○ | Smoke alarms not installed at: <input type="checkbox"/> Hallways - up / down / main floor [1] <input type="checkbox"/> Bedrooms [1] <input type="checkbox"/> Basement [1] | : : : | ○ | □ | □ | : : : | ○ | □ | □ |

Red Dog Home Inspections, Inc does not test or inspect smoke alarms because the test button may not be indicative of proper and safe alarm operation after move in. Smoke alarms that do not operate properly pose a life threatening safety risk. Client should: test all smoke alarms immediately upon move in, retest every 30 days thereafter and replace any found not working properly. We recommend that our clients develop an emergency fire escape plan. Smoke Alarms in new houses are installed at all levels of the residence and inside and outside all sleeping areas. This is a good upgrade for older homes. Smoke alarm requirements for rental units differ from owner occupied units.

COMMENTS: We recommend you install a good quality carbon monoxide alarm(s) per manufacturer's recommendations when combustion type appliances are in use.

A.

| KITCHEN / EATING AREA | | | | | | | | | | |
|--|-------------|--------------------|--|--------------|---|---------|--------------------------|--------------------------|------|---|
| GENERAL: Appliances checked for operation without regard to their life expectancy. At the time of the inspection only the marked appliances were checked. | | | | | LIMITATIONS: Carpet & floor coverings, storage under sink, freshly painted walls & ceiling & behind appliances. Oven cleaning cycles are not tested. | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC. | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | |
| <i>Potential Health / Safety Hazard [1]</i> <i>Damaged / Deteriorated [2] DEFICIENCY</i> <i>Improperly Installed [3] KEY</i> <i>Outdated Safety Standards [4]</i> <i>Not Functioning as Intended [5]</i> | | | | | | | | | | |
| APPLIANCES: | | | | | | | | | | |
| <input type="checkbox"/> DISHWASHER | ◇ | ○ | <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> RANGE | ◇ | ○ | <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> OVEN | ◇ | ○ | <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> COOKTOP | ◇ | ○ | <input type="checkbox"/> | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> DISPOSAL | ◇ | ○ | <input type="checkbox"/> | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> MICROWAVE | ◇ | ○ | <input type="checkbox"/> | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> INSTA-HOT | ◇ | ○ | <input type="checkbox"/> | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| <input type="checkbox"/> REFRIGERATOR | ◇ | ○ | <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| EXHAUST FAN <input type="checkbox"/> Ducted <input type="checkbox"/> Ductless | ◇ | ○ | <input type="checkbox"/> No exhaust fan [4] <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| WALLS / CEILING / DOORS | ◇ | ○ | <input type="checkbox"/> Moisture stains [5] <input type="checkbox"/> Wall / ceiling cracks / holes [2] <input type="checkbox"/> Door hits the frame [5] | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| CABINETS / COUNTERTOPS | ◇ | ○ | <input type="checkbox"/> Missing or cracked caulk / grout [2] <input type="checkbox"/> INFO | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| SINK | ◇ | ○ | <input type="checkbox"/> No drain high loop for dishwasher [3] <input type="checkbox"/> Leak under sink [5] <input type="checkbox"/> Improper drain line [3] / slow to drain [5] | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |
| FLOORS | ◇ | ○ | <input type="checkbox"/> Swelling of the underlayment [2] <input type="checkbox"/> Moisture in underlayment [2] | | · | ○ | <input type="checkbox"/> | <input type="checkbox"/> | · | · |

COMMENTS:

A.

Photos are inserted here if they are relevant.

| LAUNDRY AREA | | | | | | | | | | |
|---|-------------|--------------------|---|---|------------------------|---|----------|--------|-----|--|
| WASHER HOOKUPS: <input type="checkbox"/> Water lines <input type="checkbox"/> None WASHER DRAIN: <input type="checkbox"/> Sink <input type="checkbox"/> Drain Pipe <input type="checkbox"/> None | | | DRYER SERVICE: <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> None | | | LIMITATIONS: Typically include carpet & floor coverings, furnishings, storage under sink, freshly painted walls and ceilings, and behind and under appliances <input type="checkbox"/> Machinery in place | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | | |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] DEFICIENCY Improperly Installed [3] KEY Outdated Safety Standards [4] Not Functioning as Intended [5] | | | | | | |
| WALLS / CEILINGS | ◇ | ○ | <input type="checkbox"/> Moisture stains [5] <input type="checkbox"/> Wall / ceiling cracks / holes [2] <input type="checkbox"/> Unfinished | | | | | | | |
| SINK / DRAIN / STANDPIPE | ◇ | ○ | <input type="checkbox"/> Sink is slow to drain [5] <input type="checkbox"/> Leak under sink [5] <input type="checkbox"/> Sink not secured to the wall / into place [3] <input type="checkbox"/> No trap visible (in wall void) | | | | | | | |
| FLOORS | ◇ | ○ | <input type="checkbox"/> Swelling of the underlayment [2] <input type="checkbox"/> Moisture in underlayment [2] <input type="checkbox"/> Obscured by the appliances | | | | | | | |
| EXHAUST FAN | ◇ | ○ | <input type="checkbox"/> No exhaust fan / noisy | | | | | | | |
| DRYER VENT | ◇ | ○ | <input type="checkbox"/> Damaged outside hood / damper assembly [2] <input type="checkbox"/> Outside damper needs cleaning [5] <input type="checkbox"/> Plastic flex ducting in use (metal recommended) [1] | | | | | | | |

COMMENTS: 1. We recommend cleaning the dryer vent system on a regular basis
 2. Washing machine drain pipe and water supplies are not tested.

A.

Photos are inserted here if they are relevant.

| EXTERIOR DOORS / WINDOWS / INT. DOORS | | | | | | | | | | | | | |
|--|-------------|--------------------|--|---|------------------------|---------|----------|---|-----------|------|--------|---|---|
| WINDOW TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Vinyl <input type="checkbox"/> Single pane glass <input type="checkbox"/> Double pane glass <input type="checkbox"/> Storm sash | | | | | | | | | | | | | |
| DOOR TYPE: <input type="checkbox"/> Wood <input type="checkbox"/> Metal <input type="checkbox"/> Composite Sliding glass: <input type="checkbox"/> Vinyl <input type="checkbox"/> Metal <input type="checkbox"/> Wood | | | | | | | | | | | | | |
| LIMITATIONS: <input type="checkbox"/> Window coverings. & <input type="checkbox"/> No access to: INFO | | | | | | | | | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES <i>DEFICIENCY KEY</i> Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] Outdated Safety Standards [4] Not Functioning as Intended [5] | ACTION | | | | LOCATIONS | | | | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | FRONT | BACK | GARAGE | | |
| EXTERIOR DOORS | ◇ | ○ | <input type="checkbox"/> Gaps / damaged weather-stripping [2] <input type="checkbox"/> No weather-stripping <input type="checkbox"/> Rubs on jamb / threshold [5] <input type="checkbox"/> Misalignment door / latch [5] <input type="checkbox"/> Cracked glass [1] / Failed seal [2] <input type="checkbox"/> Physical damage <input type="checkbox"/> Interior keyed dead bolt [1] <input type="checkbox"/> No light outside [1] <input type="checkbox"/> Light not working [5] <input type="checkbox"/> Front doorbell not working / found [5] | ▪ | ○ | □ | □ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ |
| SCREEN / STORM DOORS | ◇ | ○ | <input type="checkbox"/> Rubs on jamb / threshold [5] <input type="checkbox"/> Misalignment door/latch [5] <input type="checkbox"/> Physical damage <input type="checkbox"/> Screen / storm door installed at: | ▪ | ○ | □ | □ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ |
| SAFETY GLAZING | ◇ | ○ | <input type="checkbox"/> No tempered glass "stamp" found at: [1] <input type="checkbox"/> Shower doors <input type="checkbox"/> French doors <input type="checkbox"/> Stairway windows <input type="checkbox"/> INFO | ▪ | ○ | □ | □ | ▪ | ▪ | ▪ | ▪ | ▪ | ▪ |
| PRIME / STORM WINDOWS | ◇ | ○ | <input type="checkbox"/> Some missing screens / hardware / torn screens [5] <input type="checkbox"/> Some windows did not open [5] <input type="checkbox"/> Some weathered frames [2] <input type="checkbox"/> Some missing sash cords [5] <input type="checkbox"/> "Repair" cracked glass at: INFO [1] <input type="checkbox"/> Lighting and glass that is wet or dirty can make detection of failed insulated seals very difficult or impossible at: windows, sliding doors and skylights <input type="checkbox"/> Found failed seals at: INFO [5] | | | | | STORM SASH <input type="checkbox"/> Gaps around some frames [3] <input type="checkbox"/> Some missing / loose sash [5] <input type="checkbox"/> Some missing / torn screens [2] <input type="checkbox"/> " Repair" cracked glass [1] | | | | | |
| INTERIOR DOORS | ◇ | ○ | <input type="checkbox"/> Some missing entry / closet doors [5] <input type="checkbox"/> Some doors do not latch [5] <input type="checkbox"/> Some doors hit the frames / floor / carpet [5] <input type="checkbox"/> Some missing door hardware [5] | | | | | | | | | | |

COMMENTS:

A.

| ELECTRICAL | | | | | | | | | | | | | | | | | |
|---|--|-------------|--------------------|---|---|---|--|---|------------------------|---------|----------|-----------|----|-----|----|----|---|
| SERVICE ENTRANCE TYPE: <input type="checkbox"/> Overhead service <input type="checkbox"/> Underground service SERVICE AMP. RATING: INFO VOLTAGE: <input type="checkbox"/> 240 <input type="checkbox"/> 120 PANEL TYPE: <input type="checkbox"/> Breaker <input type="checkbox"/> Fuse PERMIT: INFO LOCATION OF MAIN DISCONNECTS: <input type="checkbox"/> Meter <input type="checkbox"/> Panel- INFO SUB PANEL TYPE: <input type="checkbox"/> Breaker: INFO <input type="checkbox"/> Fuse: INFO | | | | EXCLUSIONS: Low voltage systems, ancillary wiring, security systems, central vacuums, smoke detectors and wall receptacle load capacity testing | | | | | | | | | | | | | |
| CONDUCTORS | SERVICE ENTRANCE: <input type="checkbox"/> Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> Unknown | | | WIRING METHODS FOUND: <input type="checkbox"/> Non-Metallic Cable <input type="checkbox"/> Metal / Plastic Conduit <input type="checkbox"/> Knob and Tube <input type="checkbox"/> Solenoid Type Lighting System | | | BRANCH WIRING: <input type="checkbox"/> Stranded Conductor Copper / Aluminum <input type="checkbox"/> Solid Conductor Copper / Aluminum <input type="checkbox"/> Solid Conductor Aluminum (12 & 10 gauge- Further evaluation needed, potential fire hazard) | | | | | | | | | | |
| | INSPECTED COMPONENT OR SYSTEMS | | CONDITION | | DEFICIENCIES | | | | ACTION | | | LOCATIONS | | | | | |
| | | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | IN | INF | IN | IN | |
| SERVICE DROP METER BASE & DISCONNECTS | | ◇ | ○ | <input type="checkbox"/> Wires low [4] / vegetation touching wires [1] <input type="checkbox"/> INFO [1] | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | |
| SERVICE GROUND | | ◇ | ○ | <input type="checkbox"/> Termination <u>not</u> found <input type="checkbox"/> Ground wire has been spliced inside the panel box [3] | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | |
| INTERIOR OF PANELS, CONDUCTORS, OVERCURRENT DEVICES | | ◇ | ○ | <input type="checkbox"/> No Permit found at: <input type="checkbox"/> Double taps at branch circuits / main feeds [3] <input type="checkbox"/> Improper over-current protection [1] <input type="checkbox"/> Overheating / corrosion [1] <input type="checkbox"/> Missing wire clamps [3] <input type="checkbox"/> Cabinet / cover loose [3] <input type="checkbox"/> Exposed wiring cables [3] <input type="checkbox"/> Missing knockout covers INFO [1] <input type="checkbox"/> INFO [3] <input type="checkbox"/> INFO [3] | ⋮ | ○ | □ | □ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ | ⋮ |
| ■ ADDITIONAL ELECTRICAL ITEMS ARE LISTED at the STAIRS & INTERIOR / pages | | | | | | | | | | | | | | | | | |

A. Safety Hazards:

- a. Missing cover plates / exposed cables / open or no junction boxes at: [3].
- b. Ungrounded 3-pronged / reverse polarity plugs at: [3].
- c. Suggest upgrading outlets to GFCI's at: outside garage bathrooms kitchen laundry [4].
- d. HVAC wiring: [3]

B. Fire Hazards:

- a. Incandescent closet lighting installed at: [4]

| HEATING | | | | | | | | | | |
|---|-------------|--------------------|---|---|---|---------|----------|--------|------------|---|
| LIMITATIONS: Only readily accessible panels provided for routine homeowner maintenance are opened | | | | | EXCLUSIONS: Interior of flues and chimneys, heat exchangers, oil tanks, humidifiers and dehumidifiers, electronic air cleaners and solar heating systems | | | | | |
| UNIT A TYPE: <input type="checkbox"/> Forced air <input type="checkbox"/> Space heating <input type="checkbox"/> Boiler FUEL SOURCE: <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric AGE: INFO FILTER TYPE: <input type="checkbox"/> Disposable <input type="checkbox"/> Washable <input type="checkbox"/> Electronic FILTER CONDITION: <input type="checkbox"/> Serviceable <input type="checkbox"/> Dirty <input type="checkbox"/> Missing SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life MAIN FUEL SHUT OFF: <input type="checkbox"/> Meter <input type="checkbox"/> INFO | | | | | UNIT B TYPE: <input type="checkbox"/> Forced air <input type="checkbox"/> Space heating <input type="checkbox"/> Boiler FUEL SOURCE: <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric AGE: FILTER TYPE: <input type="checkbox"/> Disposable <input type="checkbox"/> Washable <input type="checkbox"/> Electronic FILTER CONDITION: <input type="checkbox"/> Serviceable <input type="checkbox"/> Dirty <input type="checkbox"/> Missing SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | A | B |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | | INF | |
| FLUES / CHIMNEY | ◇ | ○ | <input type="checkbox"/> Minimal clearance to combustibles for flue pipe [1] <input type="checkbox"/> Flue pipe needs additional support/fasteners /sealing to chimney[1] <input type="checkbox"/> Upgrade flue pipe to double wall / line chimney [4] <input type="checkbox"/> Soot / fly ash in flue / efflorescence at joints [5] | : ○ □ □ : : : ○ □ □ : : : ○ □ □ : : : ○ □ □ : : | | | | | | |
| SAFETY CONTROLS & HAZARDS | ◇ | ○ | <input type="checkbox"/> Not 18" above garage floor [1] <input type="checkbox"/> No bumper pipe in garage [1] | : ○ □ □ : : : ○ □ □ : : | | | | | | |
| HEAT EXCHANGER | ◇ | ○ | <input type="checkbox"/> Rusty / soot buildup [5] / damaged [2] <input type="checkbox"/> View of heat exchanger restricted/ not visible | : ○ □ □ : : : ○ □ □ : : | | | | | | |
| BURNERS / FUEL SYSTEM / COMBUST-AIR | ◇ | ○ | <input type="checkbox"/> Rusty / need cleaning / damaged [2] <input type="checkbox"/> Fuel line needs additional support [3] <input type="checkbox"/> Minimal combustion air [1] | : ○ □ □ : : : ○ □ □ : : : ○ □ □ : : | | | | | | |
| DISTRIBUTION SYSTEMS (Fans, pumps, insulation, ducts, piping, supports) | ◇ | ○ | <input type="checkbox"/> Debris in heat ducts / dirty blower [5] <input type="checkbox"/> Ductwork needs additional support / repair [3] <input type="checkbox"/> INFO [5] <input type="checkbox"/> INFO [5] | : ○ □ □ : : : ○ □ □ : : : ○ □ □ : : : ○ □ □ : : | | | | | | |

COMMENTS: Heating systems are checked for operation only, not for full load heating capacity, nor life expectancy. **For full analysis consult a specialist.** (Exterior observation only. Disassembly is required to locate problems not visible by an exterior evaluation). Suggest yearly tune-up and safety inspection and regular cleaning of the heat exchanger and flues on all combustion type furnaces

A.

Photos are inserted here if they are relevant.

| AIR CONDITIONING | | | | | | | | | | |
|--|-------------|--------------------|--|---|--|---------|--------------------------|--------------------------|-------------|---|
| LIMITATIONS: Only readily accessible panels provided for routine homeowner maintenance are opened. | | | | | | | | | | |
| UNIT A TYPE: <input type="checkbox"/> Air conditioner <input type="checkbox"/> Heat pump <input type="checkbox"/> Wall unit | | | | | UNIT B TYPE: <input type="checkbox"/> Air conditioner <input type="checkbox"/> Heat pump <input type="checkbox"/> Wall unit | | | | | |
| FUEL SOURCE: Electric AGE: INFO | | | | | FUEL SOURCE: Electric AGE: | | | | | |
| FILTER CONDITION: <input type="checkbox"/> Serviceable <input type="checkbox"/> Dirty <input type="checkbox"/> Missing | | | | | FILTER CONDITION: <input type="checkbox"/> Serviceable <input type="checkbox"/> Dirty <input type="checkbox"/> Missing | | | | | |
| SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life | | | | | SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATIO | | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR | A | B |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | | INFO | |
| COOLING COIL | ◇ | ○ | <input type="checkbox"/> Damaged / dirty [2] <input type="checkbox"/> View of coil restricted/ not visible | | ▪ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ▪ | ▪ |
| OUTDOOR EQUIPMENT (Condenser unit) | ◇ | ○ | <input type="checkbox"/> Damaged coil fins [2] <input type="checkbox"/> Outdoor condensing unit out of level [5] | | ▪ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ▪ | ▪ |
| CONDENSATE DRAIN | ◇ | ○ | <input type="checkbox"/> No water trap to stop mold growth and air flow [3] <input type="checkbox"/> Not piped to exterior of house [3] | | ▪ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ▪ | ▪ |
| REFRIGERANT LINES | ◇ | ○ | <input type="checkbox"/> Insulation damaged [2] <input type="checkbox"/> Piping needs additional support/ repair [3] | | ▪ | ○ | <input type="checkbox"/> | <input type="checkbox"/> | ▪ | ▪ |

COMMENTS: Cooling systems are checked for operation only, not for full load cooling capacity, nor life expectancy. For full analysis please consult a specialist. (Exterior observation only. Disassembly is required to locate problems not visible by exterior evaluation). Suggest yearly tune-up and regular cleaning of the coils on all A/C units.

A.

Photos are inserted here if they are relevant.

PLUMBING

LIMITATIONS: Report addresses only readily visible plumbing. Underground sewer lines, water stops and valves, fixture overflows, sprinkler and backflow devices not tested. Only brief leak tests performed at fixtures. Solar panels and tanks are not checked. *Pipe insulation limits the inspection.*

| | | |
|---|--|---|
| MAIN WATER LINE MATERIAL: <input type="checkbox"/> Unknown <input type="checkbox"/> Copper <input type="checkbox"/> Plastic <input type="checkbox"/> Galvanized SIZE: INFO Shut off Location: <input type="checkbox"/> Outside <input type="checkbox"/> Basement <input type="checkbox"/> Garage <input type="checkbox"/> Crawl <input type="checkbox"/> Unknown | WATER SUPPLY MATERIALS: <input type="checkbox"/> Galvanized <input type="checkbox"/> Copper <input type="checkbox"/> Plastic | DRAIN / VENT MATERIALS: <input type="checkbox"/> Cast iron/ Galvanized <input type="checkbox"/> Copper <input type="checkbox"/> Lead <input type="checkbox"/> Plastic |
|---|--|---|

WATER SUPPLY: No significant leak from street to house Meter not found **PRESSURE:** **INFO** psi Suggest reducer
HOSE FAUCETS: Hose faucets found not working: **INFO** (verify why) Leak at hose faucet / stem packing.

| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | |
|---|-------------|--------------------|---|---|---------------------------------|--|--|--------|
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] <i>DEFICIENCY</i> Improperly Installed [3] <i>KEY</i> Outdated Safety Standards [4] Not Functioning as Intended [5] | MAINTENANCE or UPGRADE | MONITOR | EVALUATE | REPAIR |
| WATER SUPPLY & DISTRIBUTION SYSTEM (potable piping) | ◇ | ○ | <input type="checkbox"/> Trap primer disconnected / not visible [1] <input type="checkbox"/> Transition fittings not used (copper to galvanized water lines) [3] <input type="checkbox"/> Saddle valve in use [3] <input type="checkbox"/> Rusty pipes / fittings [2] <input type="checkbox"/> Leak at: [2] | : : : : : : : | ○ ○ ○ ○ ○ ○ ○ | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |
| FUNCTIONAL FLOW | ◇ | ○ | <input type="checkbox"/> Low water volume with three fixtures on at once : [5] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> | |
| CROSS CONNECTIONS | ◇ | ○ | <input type="checkbox"/> No back flow check valve at the hose faucets [4] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> | |
| SUPPORTS / INSULATION | ◇ | ○ | <input type="checkbox"/> Minimal at: INFO [3] <input type="checkbox"/> Insulate pipes at: INFO [3] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> | |

COMMENTS:

A.

| | | | | | | | |
|--|---|---|--|----------------------------|----------------------------|--|--|
| DRAINAGE WASTE & VENT SYSTEM* (Waste Piping) | ◇ | ○ | <input type="checkbox"/> Improper fittings / unvented : [3] <input type="checkbox"/> Rusty pipes / fittings [2] <input type="checkbox"/> Improper pitch / slope [3] <input type="checkbox"/> Leak at: [2] | : : : : : : | ○ ○ ○ ○ ○ ○ | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| SUPPORTS | ◇ | ○ | <input type="checkbox"/> Minimal at: INFO [3] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> |
| PUMP sump/sewer | ◇ | ○ | <input type="checkbox"/> INFO [3] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> |
| WHIRLPOOL tub | ◇ | ○ | <input type="checkbox"/> Access door not found, no view of the under tub piping & motor [3] | : | ○ | <input type="checkbox"/> | <input type="checkbox"/> |

ADDITIONAL PLUMBING ITEMS ARE LISTED on BASEMENT, BATHROOM, KITCHEN & LAUNDRY pages.

COMMENTS: *We recommend a camera inspection of the underground sewer lines on older homes.

A.

| WATER HEATER | | | | | | | | | | |
|---|-------------|--------------------|--|---|--|---------|----------|--------|------------|---|
| LIMITATIONS: Tank insulation. Only readily accessible Panels provided for routine homeowner maintenance are opened. | | | | | EXCLUSIONS: Interiors of flues and chimneys. Water heater is checked for operation only; not its ability to deliver the rated volume or quantity of hot water. | | | | | |
| UNIT A: FUEL SOURCE- <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric CAPACITY: INFO gal. APPROX. AGE : INFO SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life | | | | | UNIT B: FUEL SOURCE- <input type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric CAPACITY: gal. APPROX. AGE: SERVICE LIFE WARNING: <input type="checkbox"/> Near end <input type="checkbox"/> Beyond design life | | | | | |
| INSPECTED COMPONENT OR SYSTEMS | CONDITION | | | DEFICIENCIES | ACTION | | | | LOC | |
| | SERVICEABLE | COMMENTS SEE BELOW | DEFICIENT or OBSERVATION | | MAINTENANCE | MONITOR | EVALUATE | REPAIR | A | B |
| | | | | Potential Health / Safety Hazard [1] Damaged / Deteriorated [2] Improperly Installed [3] DEFICIENCY Outdated Safety Standards [4] KEY Not Functioning as Intended [5] | | | | | INF | |
| FLUES / CHIMNEY | ◇ | ○ | <input type="checkbox"/> Evidence of flue spillage [1] <input type="checkbox"/> Minimal clearance to combustibles for flue pipe [1] <input type="checkbox"/> Flue pipe needs additional support or fasteners [3] <input type="checkbox"/> Flue pipe not sealed to chimney / secured to top of tank [1] <input type="checkbox"/> Upgrade flue pipe to double wall [4] | : ○ : ○ : ○ : ○ : ○ | ○ | □ | □ | □ | · | · |
| SAFETY CONTROLS & HAZARDS | ◇ | ○ | <input type="checkbox"/> TPR discharge piping too short [1] <input type="checkbox"/> Threads on TPR discharge pipe [1] <input type="checkbox"/> No bumper pipe in garage [1] <input type="checkbox"/> Not 18” above garage floor [4] | : ○ : ○ : ○ : ○ | ○ | □ | □ | □ | · | · |
| TANK | ◇ | ○ | <input type="checkbox"/> No seismic wall strapping [4] <input type="checkbox"/> No drain pan [3] <input type="checkbox"/> Stains from prior leaks [5] <input type="checkbox"/> Drips / Leaks: [2] | : ○ : ○ : ○ : ○ | ○ | □ | □ | □ | · | · |
| BURNERS / COMBUSTION AIR | ◇ | ○ | <input type="checkbox"/> Rust / debris (needs cleaning) [5] <input type="checkbox"/> Burner not visible <input type="checkbox"/> Minimal combustion air [3] | : ○ : ○ : ○ | ○ | □ | □ | □ | · | · |
| FUEL SYSTEM Gas/electric supply | ◇ | ○ | <input type="checkbox"/> Minimal supports: gas line / conduit / no conduit [3] | : ○ : ○ | ○ | □ | □ | □ | · | · |

COMMENTS: Check the thermostat setting upon move in to your house.

A.

Photos are inserted here if they are relevant.

COMPLETE WOOD DESTROYING ORGANISM & INSECT REPORT

| | |
|---|--|
| INSPECTION COMPANY: RED DOG HOME INSPECTIONS, INC PO BOX 11009 PORTLAND, OREGON 97211 (503) 516-0272 CCB # 171071 | PROPERTY ADDRESS: STRUCTURE INSPECTED: Sample Report 2007 |
|---|--|

OBSERVATIONS: **NO WOOD DESTROYING INSECTS found**

NO WOOD DESTROYING ORGANISMS (ROT/FUNGI) found

Moisture Ants / debris / holes:

Carpenter Ants / debris / holes / dead ants:

Damp wood Termites / debris:

Subterranean Termites / tubes:

Wood Boring Beetle holes / debris: ANOBIIDAE

ACTIVE; treatment recommended at this time **INACTIVE**; no treatment recommended at this time PRIOR TREATMENT EVIDENT

Activity / need for treatment cannot be determined without further investigation. **Reason:** Off season Check for activity during repairs No live insects found Remove all infested wood and correct conducive conditions listed below.

Vegetation contact ---- Remove:

Earth / Wood contact----Lower grade at:

Vapor barrier incomplete --Install in crawl:

Restricted/Non functioning gutter system ---- Repair: No rain, unable to test system.

Water in crawl---Eliminate: Evidence of seasonal standing water.

Cellulose debris in crawl---Remove:

Inadequate clearance in crawl---Provide 18" Clearance:

Missing / Torn crawl vent screens---Repair:

Minimal ventilation---Install additional vents:

Failed/Missing caulk – grout at water splash areas:

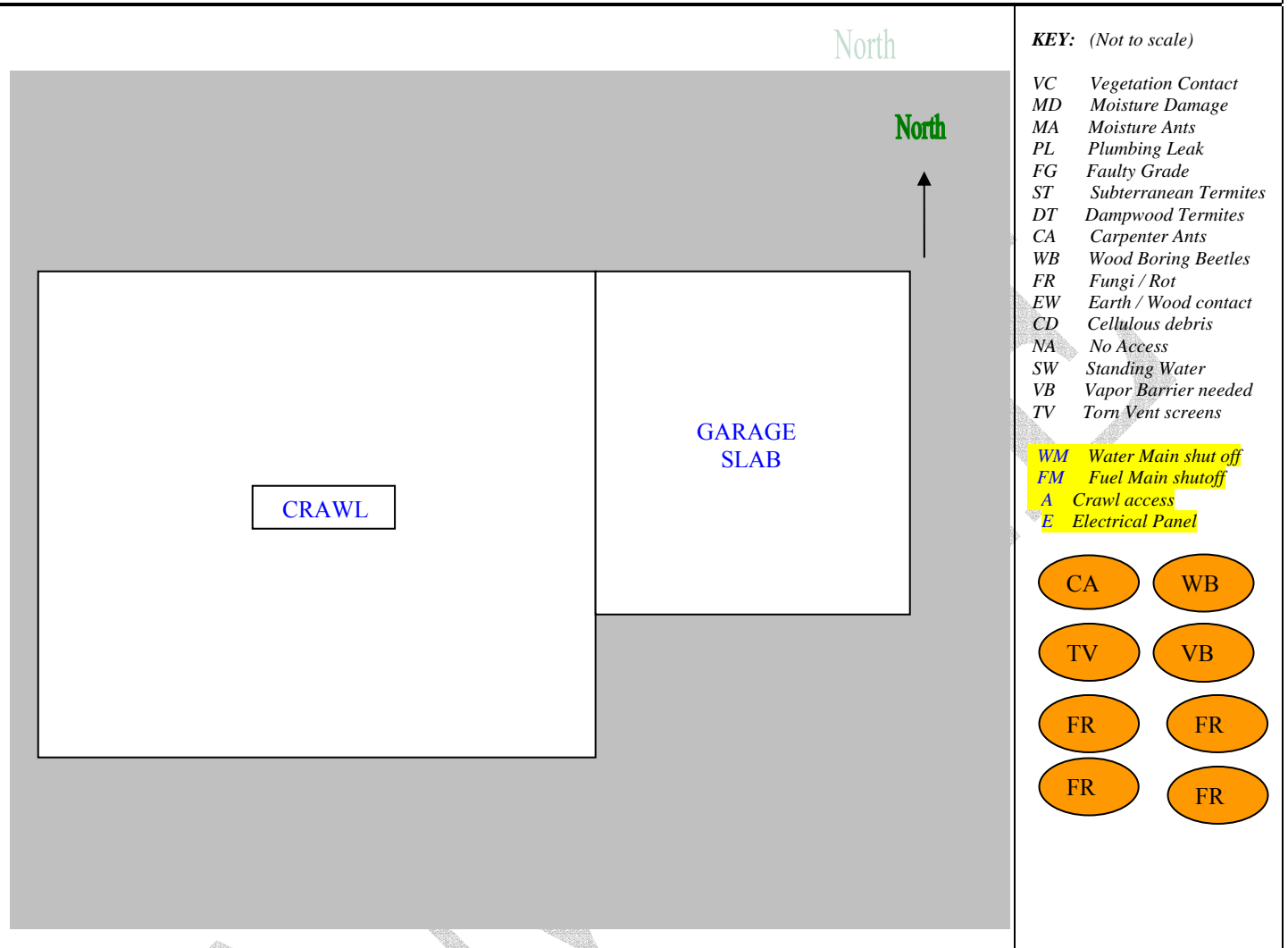
Other:

Moisture damage--- The contractor must, thoroughly investigate the following areas for concealed damage & repair any additional damage found & certify all repairs in writing. Check for & replace damaged material at the following areas:
 A.

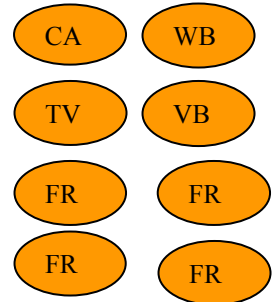
Insect / Rot / Fungi damage---The contractor must, during the repairs, thoroughly investigate the following areas for concealed damage and repair any additional damage found and certify all repairs in writing:
 A.

(CONTINUED ON FOLLOWING PAGE)

COMPLETE WOOD DESTROYING ORGANISM & INSECT REPORT (CONTINUED)



- KEY:** (Not to scale)
- VC Vegetation Contact
 - MD Moisture Damage
 - MA Moisture Ants
 - PL Plumbing Leak
 - FG Faulty Grade
 - ST Subterranean Termites
 - DT Dampwood Termites
 - CA Carpenter Ants
 - WB Wood Boring Beetles
 - FR Fungi / Rot
 - EW Earth / Wood contact
 - CD Cellulous debris
 - NA No Access
 - SW Standing Water
 - VB Vapor Barrier needed
 - TV Torn Vent screens
- WM Water Main shut off
 - FM Fuel Main shutoff
 - A Crawl access
 - E Electrical Panel



OBSTRUCTIONS & INACCESSIBLE AREAS: Observed in the following areas:

| | |
|---|--|
| <input type="checkbox"/> Basement 2,3,5,6,8,10, | <input type="checkbox"/> Garage 2,3,5,6,8,10,13, |
| <input type="checkbox"/> Crawl space 9,10, | <input type="checkbox"/> Exterior 19,20, |
| <input type="checkbox"/> Main Level 1-8, | <input type="checkbox"/> Porch 15,16, |
| <input type="checkbox"/> Attic 4,6,9,10, | <input type="checkbox"/> Attached Decks 15,16, |

The inspector may list the obstructions or inaccessible areas or use the following key:

| | |
|-------------------------------|--|
| 1 Vaulted ceiling | 11 Woodpile / snow |
| 2 Fixed ceilings | 12 Cluttered condition |
| 3 Fixed wall coverings | 13 Limited access |
| 4 Floor coverings | 14 No access / entry |
| 5 Cabinets or shelving | 15 Only visible access |
| 6 Stored items | 16 No access beneath |
| 7 Furnishings | 17 Standing water |
| 8 Appliances | 18 Dense vegetation |
| 9 Insulation | 19 Exterior coverings |
| 10 Ductwork | 20 Behind storm sash or screens |

INSPECTION FINDINGS: This report is indicative of the condition of the subject structure(s) **on the date of the inspection only** and is NOT to be construed as an implied warranty or guarantee against latent, concealed, or future infestation or defects.

Inaccessible substructure crawl areas may be vulnerable to infestation by WDO's and we recommend they be made accessible for inspection.

INSPECTOR'S SIGNATURE: *Neither I nor the company have had, presently have, or contemplate having any interest in the property.*

CUSTOMER NAME: Sample Report 2007

Certification No: OCHI #1042
 DATE OF INSPECTION:

CUSTOMER SIGNATURE

Additional photos are inserted here if they are relevant.

SAMPLE