



Report No. _____

INSPECTION REPORT.....

Address: _____
 Date: _____
 Client: _____
 Purpose: _____
 Inspector: _____
 Age of Property: _____
 Special Conditions: _____

 Attached Publications: _____

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Exclusions and Limitations of a Home Inspection.....

- The inspection is essentially a limited visual inspection, and its results based on observable conditions that existed at the time of the inspection only. The report is based on professional opinion, after such observation, and is not intended to be "technically exhaustive". The inspection and report exclude all components, items, and conditions that are not observed, regardless of the reason they are not observed. **THE INSPECTION AND REPORT ARE FURNISHED AS A "PROFESSIONAL OPINION", AND AS SUCH IS NOT INTENDED TO REVEAL ALL LATENT DEFECTS.** MHI assumes no responsibility for the cost of repairing or replacing unreported defects or conditions. MHI assumes no liability and shall not be liable for any mistakes, omissions, or errors in judgment of the inspector. This limitation of liability shall include and apply to all consequential damages, bodily injury, incidental damages, and property damage of any nature.
- The inspection and report shall not be construed as a compliance inspection for zoning or other governmental or nongovernmental codes or regulations.
- The inspection and report exclude and do not intend to cover swimming pools, whirlpools, hot tubs, spas, saunas, fountains, playground equipment, fences, storm windows & doors, recreational & leisure appliances, household appliances, underground electric & plumbing systems, water conditioners, termite, pest, or vermin infestation, security systems, security bars, energy saving devices, fireplace inserts and equipment, seasonal equipment, outdoor grilles, systems which are shut off or otherwise secured, and all cosmetic items such as wall coverings & carpeting. Also excluded are radon gas or other radiation, lead, asbestos, carbon monoxide, urea formaldehyde, underground storage tanks, soil contamination, mold, EMF's, or any and all other environmental hazardous or toxic substances and pollutants. Any comments about excluded items are strictly "informational" only.
- The inspection and report are not intended to reflect the value of the premises, or make any representation as to the advisability or inadvisability of purchase.
- **THE INSPECTION AND REPORT ARE NOT INTENDED TO BE CONSIDERED AS A GUARANTEE OR WARRANTY, EXPRESSED OR IMPLIED, INCLUDING ANY IMPLIED WARRANTY OF THE MERCHANTABILITY OR FITNESS FOR USE, REGARDING THE CONDITIONS OF THE PROPERTY, ITEMS, AND SYSTEMS INSPECTED AND SHOULD NOT BE RELIED UPON AS SUCH.**
- The inspection and report are for the sole and exclusive use of the client and not intended for the use and/or benefit of any other person, party or other entity. The inspection and report are not transferrable, and there are no oral representations.

EXTERIOR

This is a Report of conditions observed at the time of Inspection only. This is Not a Guarantee or Warranty.

Architectural Style: Ranch Colonial Split/Bi-Level Bungalow Eclectic Other _____

Exterior Coverings: Wood Lap Siding Aluminum Siding Vinyl Siding EIFS Wood Drop Siding
 Board & Batten Siding Wood Shingles/Shakes Asbestos Cement Shingles
 Brick Veneer Stone Veneer Stucco Fiberboard Siding Plywood Siding

Window Types: Single/Double-hung Sliding Casement Awning/Hopper Fixed w/Storm windows

Grading around Foundation: _____ Wood to Ground Distance: _____ (approx.)

Storm Drainage: Below Ground Drainage Above Ground Drainage

Comments: Repair all Loose or Cracked Caulking Cut Open all Weep Holes in Storm Windows
 Repair all Damaged Exterior Covering/Trim Replace all Loose Glazing Compound
 Cut back Vegetation Away from Buildings Re-point all Loose/Cracked Mortar
 Paint/Stain all Exposed Wood Remove Rotted Wood/Firewood around Property or in Garage
 Remove Insect/Vermin Nests Regrade to Slope Soil/Slabs Away from Foundation

*Marginal - Needs Repair (See Glossary)
 **Unsatisfactory - Inadequate or Requires Immediate Repair

COMPONENT ITEMS	Acceptable			COMMENTS
	Acceptable	*Marginal	**Unsatisfactory	
<input type="checkbox"/> Siding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Shingles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Veneer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Stucco/EIFS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Trim Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Primary Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Exterior Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Front Porch/Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Side Porch/Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Rear Porch/Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Railings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sidewalks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Driveway/Carport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Attached Garage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Detached Garage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Garage Doors and Openers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Deck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Patio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Balcony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Retaining Walls	<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"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

ROOF AND ATTIC

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Type: Gable Hip Shed Gambrel Mansard Salt Box Flat
 w/Shed Dormers w/Gable Dormers w/Hip Dormers

Roofing Material: Asphalt Shingles Fiberglass Asphalt Shingles Slate Shingles Clay Tiles
 Wood Shingles/Shakes Built-up Roofing Asphalt Rolls Metal Single Ply
 Asphalt Interlocking Shingles Asbestos/Cement Shingles Cement Tiles EPDM
 No. of Layers: _____ Pitch: _____ in 12" (approx.) Color: _____

Observed from: Ground Ladder at Eaves Window or Balcony Roof Attic

Condition: Buckling or Curling Cracked or Missing Shingles Erosion Ponding Moss
 Evidence of Prior Leakage or Repair Mold/Mildew on Underside of Roof Deck

Attic Insulation: Thickness: _____ (approx.) Batts or Blankets Blown-in Boards w/Vapor Barrier
 Glass/Mineral Fiber Cellulose/Wood Fiber Mineral Fills Insulating Foams
 Insulation Not Always on "House Side" Pull Back Insulation where Touching Roof Deck

Building Exhausts: Vented to Outside Discharge into Roof/Soffit Vents Discharge into Attic

Gutters/Downspouts: Aluminum Galvanized Copper Vinyl Wood

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COMPONENT ITEMS				COMMENTS
	Acceptable	*Marginal	**Unsatisfactory	
<input type="checkbox"/> Roofing Material	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Flashing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Chimneys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Roof Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Powered Roof Vent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Whole House Fan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Soffit Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Soffits and Fascias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Gutters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Downspouts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wood Decking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Plywood Decking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Waferboard Decking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Rafters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Trusses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Skylights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Garage Roofing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Garage Roof Deck/Framing	<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"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

FOUNDATION, BASEMENT AND STRUCTURAL

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Type of Structure: Frame Masonry Balloon Frame

Foundation Type: Slab Basement Posts/Piers Crawl Space Entered Crawl Space

Foundation Walls: Block Concrete Brick Clay Tile Stone
 Horizontal Cracks Vertical Cracks Step Cracks
 Open Wall Penetrations Loose Mortar Excessive Movement Mold/Mildew

Moisture/Staining: Staining On Lower Portion of Walls Only Moderate Staining Excessive Staining
 Walls Dry at this Time Moderate Dampness in Walls Excessive Dampness in Walls
 Evidence of Prior Water Penetration/Seepage Active Water Penetration/Seepage

Floor Framing: Floor Joists Size: _____ x _____ on _____ centers
 Excessive Deflection Plumbing/Wiring Cut through Lower Third of Beams Splitting
 Mold/Fungus Rot/Insect Damage Excessive Dampness Lack of Fire-stops

*Marginal - Needs Repair (See Glossary)
 **Unsatisfactory - Inadequate or Requires Immediate Repair

COMPONENT ITEMS	<div style="display: flex; justify-content: space-between;"> <div style="transform: rotate(-45deg);">Acceptable</div> <div style="transform: rotate(-45deg);">*Marginal</div> <div style="transform: rotate(-45deg);">**Unsatisfactory</div> <div style="transform: rotate(-45deg);">Not Fully Visible</div> </div>				COMMENTS
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Foundation Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sill Anchors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Floor Slab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Chimney Foundations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wood Girders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Steel Girders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Floor Joists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wood Posts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Steel Columns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Masonry Columns	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wood Sub Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Plywood Sub Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Waferboard/OSB Sub Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Cross Bridging/Blocking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Basement Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Crawl Space Ventilation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sump Pump	<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"/>	
<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"/>	<input type="checkbox"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

INTERIOR

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Wall Coverings: Drywall/Plaster Paneling Brick/Stone Stucco

Floors: Hardwood Plywood Concrete Waferboard/OSB

Windows: Wood Metal Vinyl Double/Triple Glazing Air/Gas Filled

No. of Floor Levels: _____ Working Smoke Detectors are Not Installed on Each Level

Bathroom Fans: Vent to Outside Vent to Inside Vent to Attic

Kitchen Fans: Vent to Outside Vent to Inside Vent to Attic

Separation Wall: Door to Attached Garage/Party may not be 1 HR. Fire Resistant Acceptable

Walls/Ceiling of Attached Garage/Party may not be 1 HR. Fire Resistant

No Separation Wall above Attached Garage/Party

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COMPONENT ITEMS	Acceptable			COMMENTS
	Acceptable	*Marginal	**Unsatisfactory	
<input type="checkbox"/> Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Ceilings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Stairways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Handrails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Balcony	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Closet Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Bathroom Vanities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Bathroom Floor Coverings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tub/Shower Surrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Bathroom Fans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Kitchen Cabinets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Kitchen Countertops	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Kitchen Floor Covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Kitchen Fans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Fireplaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Woodburners	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Dryer Vent	<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"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

CENTRAL HEATING AND COOLING SYSTEMS

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Heating Energy Source: Gas Electric Fuel Oil LP Gas

Heating Equipment: Forced Air Furnace Heat Pump Gravity Furnace w/Humidifier
 Steam Boiler Water Boiler w/Standing Pilot w/Heat Saver Flue Damper

Manufacturer: _____ Capacity: _____ (approx.) Serial No. _____

Cooling Equipment: None Direct Expansion Cooling Heat Pump Gas Absorption Chiller

Manufacturer: _____ Capacity: _____ (approx.) Serial No. _____

Heating/Cooling Distribution: Steel Ductwork Plastic Ductwork Cement/Asbestos Ductwork Registers
 Fin Tube/Baseboard Water Circulation Radiators Steam/Condensate Piping
 One Pipe Steam System Zone Valves/Dampers "Open Return" System

Presence of Heating/Cooling Source in each Habitable Room: Yes No

*Marginal - Needs Repair (See Glossary)
 **Unsatisfactory - Inadequate or Requires Immediate Repair

COMPONENT ITEMS					COMMENTS
	Acceptable	Marginal	Unsatisfactory	Not Operational	
<input type="checkbox"/> Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Burner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Flue and Chimney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Pipe/Ductwork Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Fresh Air Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Water Based System:					
<input type="checkbox"/> Boiler	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Boiler Water Drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Water Fill/Level Control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Safety Relief Valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Expansion Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Air Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Circulating Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Supply/Return Piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Radiators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Fin Tube/Baseboard	<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"/>	
Air Based System:					
<input type="checkbox"/> Furnace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Heat Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Blower and Motor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Condensate Drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Air Filter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Ductwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Supply Registers/Diffusers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Return Grilles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Outdoor A/C or Heat Pump	<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"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

PLUMBING SYSTEM

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Water Supply: Municipal Well Private w/Water Softener w/Pressure Regulator

Waste Disposal: Municipal Septic System (Have Local Health Officials Check for Compliance with Local Regulations)

Water Piping: Copper Galvanized PVC/CPVC Brass PB

Water Pressure: _____ Psi (Static) - _____ Psi (Tub Flowing) Not Measured

DWV Piping: Cast Iron Copper PVC ABS Lead Galvanized

Hot Water Heater - Type: Gas Electric Fuel Oil LP Gas Integral w/ Heating System
 Manufacturer: _____ Serial No. _____
 Capacity: _____ Gallons

Number of Bathrooms: _____ Functional Flow Functional Drainage

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 **Unsatisfactory - Inadequate or Requires Immediate Repair

COMPONENT ITEMS					COMMENTS
	Acceptable	Marginal	Unsatisfactory	Not Operational	
<input type="checkbox"/> Interior Water Piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Piping Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Interior DWV Piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Interior Gas Piping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Water Heater and Flue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> w/Safety Relief Valve	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Shut-off Valves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Laundry Tub	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Floor Drains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Clean-outs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Bathroom Faucets/Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Tub and Shower Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Water Closets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Kitchen Faucet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Bar Sink	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sanitary Sump Pump	<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"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<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"/>	
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<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

CONCLUSIONS AND RECOMMENDATIONS: _____

ELECTRICAL SYSTEM

This is a Report of conditions observed at the time of Inspection only. This is Not a Guarantee or Warranty.

Main Service to Building: Overhead Underground Copper Aluminum

Service Entrance Panel: _____ Amps Service 120/240 Volt 120 Volt
 Circuit Breakers Fuses Grounded to Water Pipe and Ground Rod
 Combination Service Entrance/Main Distribution Panel

Main Distribution Panel: _____ Amps. (approx.) 120/240 Volt 120 Volt
 Circuit Breakers Fuses Grounded to Water Pipe and Ground Rod

No. of Disconnects to Cut All Power: _____ No. of 120 Volt Branch Circuits (approx.): _____

Internal Wiring: Copper Copperclad Aluminum
 Conduit Knob & Tube Nonmetallic Cable Armored Cable

Comments: Panel Knockouts not Protected Wire Splices Not Installed in Junction Boxes
 Double-Tapping of Fuses/Breakers Wiring jury-rigged across Attic/Basement Joists
 Oversized Fuses/Breakers GFCI's Not Installed in All "Wet" Areas
 Corroded Panels/Terminals Common Grounds and Neutrals in Sub-panels
 Junction Boxes without Covers Exposed Wiring along Garage/Basement Walls

*Marginal - Needs Repair (See Glossary)
 **Unsatisfactory - Inadequate or Requires Immediate Repair

COMPONENT ITEMS	Acceptable Marginal Unsatisfactory Not Operational				COMMENTS
	Acceptable	Marginal	Unsatisfactory	Not Operational	
<input type="checkbox"/> Main Service to Building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Exterior Wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Garage Wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Service Entrance Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Main Distribution Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Interior Wiring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Wall Switches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Receptacles (3-prong)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Receptacles (2-prong)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Polarity/Proper Ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Water Meter Ground Jumper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> GFCI's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> AFCI's	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sub-panel No. 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sub-panel No. 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sub-panel No. 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> Sub-panel No. 4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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CONCLUSIONS AND RECOMMENDATIONS: _____

GLOSSARY

Abbreviations:

ABS: Acrylonitrile butadiene styrene (Plastic drain pipe), BFP: Backflow Preventer, CO: Carbon monoxide, C/O: Cleanout plug or cleanout door, CPVC: Chlorinated polyvinyl chloride (High temperature plastic pipe), EMF: Electromagnetic field, EPDM: Ethylene Propylene Diene Monomer (Synthetic rubber roofing), LP Gas: Liquefied Petroleum Gas (Propane), N/A: Not applicable, OSB: Oriented strandboard, PB: Polybutylene (Plastic water pipe), PPM: Parts per million, PVC: Polyvinyl chloride (Plastic pipe), TDS: Total dissolved solids, T/A: Throw away, W/: with, W/O: without, @: at, Δ T: Temperature difference (between room temperature and supply air temperature).

Air Conditioning (A/C):

A system which uses a refrigeration cycle (compressor, condensing coil, evaporator coil) with a forced air system to distribute cooled air to more than one room.

Arc Fault Circuit Interrupter (AFCI):

AFCI's provide protection from the effects of arc faults by recognizing characteristics unique to arcing and by de-energizing the circuit when an arc fault is detected. AFCI's are intended to further reduce the risk of fire beyond the scope of conventional fuses and circuit breakers. They are required on all bedroom circuits.

Balloon Frame:

Wood frame in which the studs are continuous from the sill to the top plate of the top floor. This type of framing usually lacks "Fire-stops" commonly found in conventional platform framing.

Component:

A readily accessible and observable aspect of a system, such as a floor, or wall, but not individual pieces (such as boards or nails) that make up the component.

CrawlSpace:

The area within the confines of the foundation. The area between the ground and the underside of the lowest floor structural members.

Cross Connection:

A physical connection or arrangement between potable water and any source of contamination.

Desulfovibrio Bacterium:

A bacterium that thrives without oxygen, at high temperatures, and in the presence of magnesium (anode rod). If the hot water (and not the cold) smells of rotten eggs it should be tested for this contamination.

Drain, Waist, and Vent (DWV):

The system used to drain away liquid waste from plumbing fixtures. Traps to seal against the back flow of sewer gases. Vents to introduce air to prevent loss of trap water seals. The "Sanitary" portion of the plumbing system.

EIFS:

Exterior Insulation and Finish System (EIFS) sometimes referred to as synthetic stucco is a multilayered system. The outer layer is an acrylic finish coat. Behind this layer is a base coat with fiberglass mesh embedded in it. The innermost layer is expanded polystyrene, one to four inches thick, which is the layer that adds the insulating factor and allows aesthetic joints and features to the siding. There have been problems with EIFS, which were typically the result of improper installations. The damage in most cases, was from moisture seeping in behind the siding.

Engineering:

Analysis or design work requiring extensive preparation and experience in the use of mathematics, chemistry, physics, and the engineering sciences.

Excessive Movement:

Cracks, deflection, or other movement of a component where "immediate" structural repair is necessary.

Fire-stop:

Framing member designed to block the spread of fire within a framing cavity.

Fresh Air Vent:

Opening or ductwork designed to allow outside air into a building to provide "combustion air" for fuel burning appliances.

Functional Drainage:

A drain is functional when it empties in a reasonable amount of time and does not overflow when another fixture is drained simultaneously.

Functional Flow:

A reasonable flow at the highest fixture in a dwelling when another fixture is operated simultaneously.

Ground:

A conducting (noncurrent-carrying) connection, whether intentional or accidental, between an electrical circuit (or equipment) and the earth, or to some conducting body that serves in place of the earth.

Ground Fault Circuit Interrupter (GFCI):

A circuit breaker that will trip on a very small leakage of current, thus preventing serious shock injury. GFCI's are required on circuits in all "Wet" areas of a residential property.

Heat Pump:

Device that uses a refrigeration cycle to extract heat from an "outside" medium and transfer it to an "inside" medium. Electric elements are used when the "outside" temperature is not warm enough. A reversing valve is used to change the direction of refrigerant so that heat can be extracted from the "inside" medium and transferred to the "outside" medium, such as in an air conditioner.

Heat & Cool Pump:

Same as a "Heat Pump" but where a high efficiency gas furnace is used in place of the electric elements.

Household Appliance:

Kitchen or laundry room appliance, room air conditioner, or other similar appliance.

Inspector:

Any person who examines a building, through visual means, and through normal user controls.

Installed:

Attached or connected such that the installed item requires tools for removal.

Knob & Tube:

Wiring designed to be "open" and isolated from combustible material. Ceramic posts are used to change its direction, and ceramic tubes are used as wiring passes through wooden members.

Marginal:

A component found to be in need of repair or replacement where "immediate" action is not necessary. A component in a state of disrepair due to lack of proper maintenance. A component not installed in a professional manner (Unworkmanlike).

Non-approved:

Not acceptable to the authority having jurisdiction.

Normal Operating Controls:

Homeowner operated devices such as a thermostat, wall switch, or safety switch.

Observe:

The act of making a visual examination.

"Open Return" System:

Cold air returns that do not directly connect to the return side of a Furnace. No return ductwork, or returns that are not "fully ducted".

Operate:

To cause systems or equipment to function.

Page Layout of this Report:

Each page represents a different system. The upper section of the page is for "informational data". The middle section is where comments are recorded regarding individual components. Comments are intentionally kept simple and to the point. The bottom of the page is where "overall" recommendations are made regarding the entire system. When a "box" is not checked, the component is considered not present.

R-value:

Thermal resistance. The larger the number, the slower the rate of heat transfer. $R=1/U$ where U=Overall coefficient of heat transmission.

Re-point:

To reestablish masonry wall mortar joints by removing the worn edge mortar (approx. 1/2") and filling with new mortar.

Retaining Wall:

Masonry or wood structure designed to "hold back" the soil on a sloping lot or hill.

Safety Glazing:

Tempered glass, laminated glass, or rigid plastic. Designed to cause less injury when broken. Placed in locations of greatest risk. Local requirements vary.

Safety Railing:

Balustrade closely spaced, and/or railings high enough to lessen the risk of someone falling, or falling through. Local requirements vary.

Safety Relief Valve:

Valve designed to open when the operating temperature, or pressure of a system exceeds a predetermined value.

Shut Down:

A piece of equipment or system is shut down when it cannot be operated by the device or control which a homeowner would normally use to operate it. If a safety switch, or circuit breaker is in the "off" position, or a fuse is missing or blown, the inspector is not required to reestablish the circuit for the purpose of operating the equipment or system.

Sill Anchor:

Bolt or strap that holds down the outside wall of a building to its foundation.

Soffit Vent:

Opening in the "Soffit" to allow air to enter for ventilation of the roof and attic.

Storm (Roof) Drainage System:

Gutters, downspouts, leaders, splash blocks, and similar components used to carry water off a roof and away from a building.

Structural Component:

A component which supports non-variable forces or weights (dead loads) and variable forces or weights (live loads). A component which is a part of the "Load Path".

System:

A combination of interacting or interdependent components, assembled to carry out one or more functions.

Technically Exhaustive:

An inspection is technically exhaustive when it involves the extensive use of measurements, instruments, testing, calculations, and other means to develop scientific or engineering findings, or conclusions.

Vapor barrier:

Material or surface designed to block diffusion of water vapor or moisture. In the attic the vapor barrier should always be on the "house side" of the insulation.

Veneer:

Thin, non-structural, outer covering over the face of a wall.

Ventilation:

Movement of air to prevent the buildup of heat, moisture, or other pollutants. Passive or Active. Manual or Automatic. Air space provided between a wood roof deck and the insulation. Building exhausts should always be vented to the outside. A crawl space should either be vented to an attached basement, or to the outside.

Weep Hole:

Hole built into a storm window (or veneer wall) to allow drainage of trapped water.