

Hometown Inspections

Property Inspection Report

, OH

Inspection prepared for:
Date of Inspection: 7/18/2014

Inspector: Andrea Renner
License #
18571 Road 9Q, Columbus Grove, OH 45830
Phone: 419-202-2316
Email: andrea@hometowninspections.net

Report Summary

The summary below consists of potentially significant findings. These findings can be a safety hazard, a deficiency requiring a major expenses to correct or items I would like to draw extra attention to. The summary is not a complete listing of all the findings in the report, and reflects the opinion of the inspector. Please review all of the pages of the report as the summary alone does not explain all the issues. All repairs must be done by a licensed & bonded trade or profession. I recommend obtaining a copy of all receipts, warranties and permits for the work done.

We appreciate the opportunity to conduct this inspection for you! Please carefully read your entire Inspection Report. Call us after you have reviewed your report, so we can go over any questions you may have. Remember, when the inspection is completed and the report is delivered, we are still available to you for any questions you may have, throughout the entire closing process. Properties being inspected do not "Pass" or "Fail." - The following report is based on an inspection of the visible portion of the structure; inspection may be limited by vegetation and possessions. Depending upon the age of the property, some items like GFI outlets may not be installed; **this report will focus on safety and function, not current code.** This report identifies specific non-code, non-cosmetic concerns that the inspector feels may need further investigation or repair. For your safety and liability purposes, we recommend that licensed contractors evaluate and repair any critical concerns and defects. **Note that this report is a snapshot in time. We recommend that you or your representative carry out a final walk-through inspection immediately before closing to check the condition of the property, using this report as a guide.**

Inspection Details

1. Attendance

2. Home Type

3. Occupancy

Interior Areas

The Interior section covers areas of the house that are not considered part of the Bathrooms, Bedrooms, Kitchen or areas covered elsewhere in the report. Interior areas usually consist of hallways, foyer, and other open areas. Within these areas the inspector is performing a visual inspection and will report visible damage, wear and tear, and moisture problems if seen. Personal items in the structure may prevent the inspector from viewing all areas on the interior.

The inspector does not usually test for mold or other hazardous materials. A qualified expert should be consulted if you would like further testing.

1. Bar

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Cabinets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Ceiling Fans

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Closets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Door Bell

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Doors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Security Bars

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Smoke Detectors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Stairs & Handrail

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Window-Wall AC or Heat

Good	Fair	Poor	N/A	None

12. Ceiling Condition

Good	Fair	Poor	N/A	None

13. Patio Doors

Good	Fair	Poor	N/A	None

14. Screen Doors

Good	Fair	Poor	N/A	None

15. Wall Condition

Good	Fair	Poor	N/A	None

16. Fireplace

Good	Fair	Poor	N/A	None

17. Window Condition

Good	Fair	Poor	N/A	None

Bedrooms

The main area of inspection in the bedrooms is the structural system. This means that all walls, ceilings and floors will be inspected. Doors and windows will also be investigated for damage and normal operation. Personal items in the bedroom may prevent all areas to be inspected as the inspector will not move personal items.

1. Locations

2. Cabinets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Ceiling Fans

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Closets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Doors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Fireplace

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Floor Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Security Bars

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Smoke Detectors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Wall Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Window-Wall AC or Heat

Good	Fair	Poor	N/A	None

13. Window Condition

Good	Fair	Poor	N/A	None

14. Ceiling Condition

Good	Fair	Poor	N/A	None

15. Patio Doors

Good	Fair	Poor	N/A	None

16. Screen Doors

Good	Fair	Poor	N/A	None

Bathroom

Bathrooms can consist of many features from jacuzzi tubs and showers to toilets and bidets. Because of all the plumbing involved it is an important area of the house to look over. Moisture in the air and leaks can cause mildew, wallpaper and paint to peel, and other problems. The home inspector will identify as many issues as possible but some problems may be undetectable due to problems within the walls or under the flooring..

1. Locations

2. Cabinets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Ceiling Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Counters

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Doors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. GFCI

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Exhaust Fan

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Floor Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Heating

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Mirrors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Plumbing

Good	Fair	Poor	N/A	None

13. Security Bars

Good	Fair	Poor	N/A	None

14. Showers

Good	Fair	Poor	N/A	None

15. Shower Walls

Good	Fair	Poor	N/A	None

16. Bath Tubs

Good	Fair	Poor	N/A	None

17. Enclosure

Good	Fair	Poor	N/A	None

18. Sinks

Good	Fair	Poor	N/A	None

19. Toilets

Good	Fair	Poor	N/A	None

20. Window Condition

Good	Fair	Poor	N/A	None

Kitchen

The kitchen is used for food preparation and often for entertainment. Kitchens typically include a stove, dishwasher, sink and other appliances.

1. Cabinets

Good	Fair	Poor	N/A	None

2. Counters

Good	Fair	Poor	N/A	None

3. Dishwasher

Good	Fair	Poor	N/A	None

4. Doors

Good	Fair	Poor	N/A	None

5. Garbage Disposal

Good	Fair	Poor	N/A	None

6. Microwave

Good	Fair	Poor	N/A	None

7. Cook top condition

Good	Fair	Poor	N/A	None

8. Oven & Range

Good	Fair	Poor	N/A	None

9. Sinks

Good	Fair	Poor	N/A	None

10. Drinking Fountain

Good	Fair	Poor	N/A	None

11. Spray Wand

Good	Fair	Poor	N/A	None

12. Hot Water Dispenser

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Soap Dispenser

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Trash Compactor

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Vent Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. Window Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Floor Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Plumbing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Ceiling Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Security Bars

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. Patio Doors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Screen Doors

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. GFCI

Good	Fair	Poor	N/A	None

25. Wall Condition

Good	Fair	Poor	N/A	None

Laundry

1. Locations

2. Cabinets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Counters

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Dryer Vent

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. GFCI

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Exhaust Fan

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Gas Valves

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Wash Basin

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Floor Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Plumbing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Wall Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Ceiling Condition

Good	Fair	Poor	N/A	None

14. Security Bars

Good	Fair	Poor	N/A	None

15. Doors

Good	Fair	Poor	N/A	None

16. Window Condition

Good	Fair	Poor	N/A	None

Heat/AC

The heating, ventilation, and air conditioning and cooling system (often referred to as HVAC) is the climate control system for the structure. The goal of these systems is to keep the occupants at a comfortable level while maintaining indoor air quality, ventilation while keeping maintenance costs at a minimum. The HVAC system is usually powered by electricity and natural gas, but can also be powered by other sources such as butane, oil, propane, solar panels, or wood.

The inspector will usually test the heating and air conditioner using the thermostat or other controls. For a more thorough investigation of the system please contact a licensed HVAC service person.

1. Heater Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Heater Base

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Enclosure

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Venting

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Gas Valves

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Refrigerant Lines

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. AC Compress Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Air Supply

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Registers

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Filters

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Thermostats

Good	Fair	Poor	N/A	None

Water Heater

1. Base

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Heater Enclosure

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Combusion

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Venting

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Water Heater Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. TPRV

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Number Of Gallons

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Gas Valve

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Plumbing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Overflow Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Strapping

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Garage

1. Roof Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Walls

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Anchor Bolts

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Floor Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Rafters & Ceiling

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. GFCI

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. 240 Volt

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Exterior Door

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Fire Door

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Garage Door Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Garage Door Parts

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Garage Opener Status

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. Garage Door's Reverse Status

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Ventilation

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. Vent Screens

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Cabinets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Counters

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. Wash Basin

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Electrical

1. Electrical Panel

Good	Fair	Poor	N/A	None

2. Main Amp Breaker

Good	Fair	Poor	N/A	None

3. Breakers in off position

Good	Fair	Poor	N/A	None

4. Cable Feeds

Good	Fair	Poor	N/A	None

5. Breakers

Good	Fair	Poor	N/A	None

6. Fuses

Good	Fair	Poor	N/A	None

Roof

1. Roof Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Flashing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Chimney

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Sky Lights

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Spark Arrestor

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Vent Caps

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Gutter

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Attic

1. Access

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Structure

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Ventilation

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Vent Screens

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Duct Work

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Attic Plumbing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Insulation Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Chimney

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Exhaust Vent

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Exterior Areas

1. Doors

Good	Fair	Poor	N/A	None

2. Window Condition

Good	Fair	Poor	N/A	None

3. Siding Condition

Good	Fair	Poor	N/A	None

4. Eaves & Facia

Good	Fair	Poor	N/A	None

5. Exterior Paint

Good	Fair	Poor	N/A	None

6. Stucco

Good	Fair	Poor	N/A	None

Foundation

1. Slab Foundation

Good	Fair	Poor	N/A	None

2. Foundation Perimeter

Good	Fair	Poor	N/A	None

3. Foundation Walls

Good	Fair	Poor	N/A	None

4. Cripple Walls

Good	Fair	Poor	N/A	None

5. Ventilation

Good	Fair	Poor	N/A	None

6. Vent Screens

Good	Fair	Poor	N/A	None

7. Access Panel

Good	Fair	Poor	N/A	None

8. Post and Girders

Good	Fair	Poor	N/A	None

9. Sub Flooring

Good	Fair	Poor	N/A	None

10. Anchor Bolts

Good	Fair	Poor	N/A	None

11. Foundation Electrical

Good	Fair	Poor	N/A	None

12. Foundation Plumbing

Good	Fair	Poor	N/A	None

13. Sump Pump

Good	Fair	Poor	N/A	None

14. Ducting

Good	Fair	Poor	N/A	None

Grounds

1. Driveway and Walkway Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Grading

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Vegetation Observations

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Gate Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Patio and Porch Deck

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Stairs & Handrail

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Grounds Electrical

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. GFCI

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Main Gas Valve Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Plumbing

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Water Pressure

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Pressure Regulator

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Exterior Faucet Condition

Good	Fair	Poor	N/A	None

14. Balcony

Good	Fair	Poor	N/A	None

15. Patio Enclosure

Good	Fair	Poor	N/A	None

16. Patio and Porch Condition

Good	Fair	Poor	N/A	None

17. Fence Condition

Good	Fair	Poor	N/A	None

18. Sprinklers

Good	Fair	Poor	N/A	None

Pool

1. Air Booster Pump

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Deck Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Gate & Fence Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Filter

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Skimmer and Basket

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. Pool Heater Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Lights

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Pressure Gauge

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Pumps

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Jets

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Structure Condition

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Tile

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Timer

Good	Fair	Poor	N/A	None

14. Water Condition

Good	Fair	Poor	N/A	None

15. Water Fill Unit

Good	Fair	Poor	N/A	None

16. Electrical

Good	Fair	Poor	N/A	None

17. GFCI

Good	Fair	Poor	N/A	None

Basement/Crawlspace

1. Walls

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Insulation

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Windows

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Plumbing Materials

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Basement Electric

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. GFCI

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Access

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Stairs

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Railings

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Slab Floor

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Finished Floor

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Drainage

Good	Fair	Poor	N/A	None
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Sump Pump

Good	Fair	Poor	N/A	None

14. Framing

Good	Fair	Poor	N/A	None

15. Subfloor

Good	Fair	Poor	N/A	None

16. Columns

Good	Fair	Poor	N/A	None

17. Piers

Good	Fair	Poor	N/A	None

18. Basement/Crawlspace Ductwork

Good	Fair	Poor	N/A	None

Residential Earthquake Hazards Report

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Is the water heater braced, strapped, or anchored to resist falling during an earthquake? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Is the house anchored or bolted to the foundation? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|-------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. If the house has cripple walls: |
| | | | | a. Are the exterior cripple walls braced? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. If the exterior foundation consists of unconnected concrete piers and posts, have they been strengthened? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. If the exterior foundation, or part of it, is made of unreinforced masonry, has it been strengthened? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. If the house is built on a hillside: |
| | | | | a. Are the exterior tall foundation walls braced? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|------------------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | b. Were the tall posts or columns either built to resist earthquakes or have they been strengthened? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. If the exterior walls of the house, or part of them, are made of unreinforced masonry, have they been strengthened? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Yes | No | N/A | Don't Know | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. If the house has a living area over the garage, was the wall around the garage dooropening either built to resist earthquakes or has it been strengthened? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--|--------------------------------------------------------------------------------------------------------------------------|
| Yes | No | Don't Know | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | 8. Is the house outside an Alquist-Priolo Earthquake Fault Zone (zones immediately surrounding known earthquake faults)? |
-
- | | | | | |
|--------------------------|--------------------------|--------------------------|--|----------------------------------------------------------------------------------------------------------------|
| Yes | No | Don't Know | | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | 9. Is the house outside a Seismic Hazard Zone (zone identified as susceptible to liquefaction or landsliding)? |

EXECUTED BY:

 (Seller) (Seller) Date

I acknowledge receipt of this form, completed and signed by the seller. I understand that if the seller has answered "No" to one or more questions, or if seller has indicated a lack of knowledge, there may be one or more earthquake weaknesses in this house.

 (Buyer) (Buyer) Date