
AARON HOME INSPECTION

PROFESSIONAL HOME INSPECTION

INSPECTION
REPORT

Clients name

1234 street address
your city, FL 12345

AARON HOME INSPECTION

PROFESSIONAL HOME INSPECTION

INSPECTION REPORT INTRODUCTION

CLIENT

Note Number:

PROPERTY

1234 street address

your city, FL 32926

Approximate Year Built: 1986

1318 S.F.

BUYER'S AGENT

INSPECTION DATE

6-18-08

88 °F

I'm pleased to report that we performed a professional and thorough inspection of the above referenced property.

Included in the body of this Inspection Presentation Report is information pertinent to the inspection performed. The report is formatted according to a checklist system and is written specifically for easy understanding & knowledge of the systems inspected. The final pages of the report consist of summary notes that specifically address any items reported in the body of the checklist report. Separately attached are items that you may want to consider with respect to maintenance and improved efficiency.

It was a real pleasure to be of service to you. If you have any questions or comments, please feel completely free to contact me as I remain at your service.

Respectfully Submitted,

Barry Miller
NACHI Certified Home Inspector
321 961-3413
Brevard Occupational license #885009613

Home Inspection Definitions and Scope*

1.1. A Home inspection is a non-invasive visual examination of a residential dwelling, performed for a fee, which is designed to identify observed material defects within specific components of said dwelling. Components may include any combination of mechanical, structural, electrical, plumbing, or other essential systems or portions of the home, as identified and agreed to by the Client and Inspector, prior to or during the inspection process.

I. A home inspection is intended to assist in evaluation of the overall condition of the dwelling. The inspection is based on observation of the visible and apparent condition of the structure and its components on the date of the inspection and not the determination of future conditions.

II. A home inspection will not reveal every problem that exists or ever could exist, but only those material defects observed on the day of the inspection.

1.2. A Material defect is a problem with a residential real property or any portion of it that would have a significant adverse impact on the value of the property or that involves an unreasonable risk to people on the property. The fact that a structural element, system or subsystem is near, at or beyond the end of the normal useful life of such a structural element, system or subsystem is not by itself a material defect.

1.3. An Inspection report shall describe and identify in written format the inspected systems, structures, and components of the dwelling and shall identify material defects observed. Inspection reports may contain recommendations regarding conditions reported or recommendations for correction, monitoring or further evaluation by professionals.

***From NACHI
(NATIONAL ASSOCIATION OF CERTIFIED HOME INSPECTORS)
STANDARDS OF PRACTICE**

AARON HOME INSPECTION

PROFESSIONAL HOME INSPECTION

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LOT GRADING / DRAINAGE

A-01

| | | |
|--|---|--------------------------------|
| <input checked="" type="checkbox"/> Graded Away From House | <input checked="" type="checkbox"/> Graded Toward House | <input type="checkbox"/> Steep |
| <input type="checkbox"/> Level Grade | <input type="checkbox"/> Ravine Lot | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|---------------|
| 1. Does the yard visually appear to drain water away from the house foundation? | | X | | A-01.1 |
| 2. Is the site free of visible soil erosion problems in the areas of yard against the foundation? | X | | | |

Note: The inspection does not include geological, soil conditions or underground items. Drainage around the house foundation is viewed by the eye only to see if water appears that it will be carried away from or around the house

DRIVEWAY

A-02

| | | |
|--|---|--------------------------------|
| <input checked="" type="checkbox"/> Concrete | <input type="checkbox"/> Stone / Pavers | <input type="checkbox"/> Brick |
| <input type="checkbox"/> Asphalt | <input type="checkbox"/> Gravel | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Is the surface free of major cracking other than normal shrinkage cracks? | X | | | |
| 2. Is the surface free of abnormal deterioration? | X | | | |
| 3. Does the driveway appear to slope away from the garage where it meets the door? | X | | | |

WALKWAYS

A-03

| | | |
|--|-------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> Concrete | <input type="checkbox"/> Wood | <input type="checkbox"/> Brick /Stone |
| <input type="checkbox"/> Pavers | <input type="checkbox"/> Tile | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Is the surface free of major cracking other than normal shrinkage cracks? | X | | | |
| 2. Is the surface free of abnormal deterioration? | X | | | |
| 3. Do the walkways slope away from house? | X | | | |

Note: Only those sidewalks adjacent to the house are included in the inspection (does not include street-side sidewalks).

FENCING

A-04

| | | |
|--|---|--------------------------------|
| <input checked="" type="checkbox"/> Wood | <input type="checkbox"/> Masonry / Brick | <input type="checkbox"/> Vinyl |
| <input checked="" type="checkbox"/> Chain Link | <input type="checkbox"/> Masonry / Stucco | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 1. Is the fence free of signs of deterioration/rot or damage where it is adjacent to house? | X | | | |
| 2. Does the fence appear to be reasonably plumb? | X | | | |
| 3. If gates exist, do they function properly? | X | | | |

Note: Fencing is inspected only where it is adjacent to the structure (approximately five feet to either side of the house).

SPRINKLER SYSTEM

A-05

| | | |
|---|--|---|
| <input type="checkbox"/> Automatic Timers (Manually Tested) | <input type="checkbox"/> Timer Location _____ | <input type="checkbox"/> Number of Zones <input style="width:40px;" type="text"/> |
| <input type="checkbox"/> Manual System (Not Inspected) | <input type="checkbox"/> Valve Locations _____ | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|---------------|
| 1. Are valves free of obvious signs of leaks? | | | X | A-06.1 |
| 2. Are all heads in place? | | X | | |
| 3. Are all heads operational? | | X | | |
| 4. Is spray directed away from Structure, Fences, etc.? | | | X | A-06.1 |

Note: The inspection of the sprinkler system is limited and includes only the questions of this section.

SOFFIT / FASCIA / EAVES

A-06

| | | |
|---------------------------------------|--|---------------------------------------|
| <input type="checkbox"/> Wood _____ | <input checked="" type="checkbox"/> Aluminum _____ | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Open Rafters | <input type="checkbox"/> Vinyl _____ | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Is the surface free of visible rot/deterioration? | X | | | |
| 2. Is the surface free of vermin entry? | X | | | |
| 3. Are seams and corners matched and free of openings? | X | | | |
| 4. Do materials appear to be secure? | X | | | |

GUTTER & DOWNSPOUTS

A-07

| | | |
|---------------------------------------|---|---|
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Galvanized Metal | <input checked="" type="checkbox"/> Vinyl |
| <input type="checkbox"/> Pre-Finished | <input type="checkbox"/> Painted | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|---------------|
| 1. Are the gutters and downspouts firm? | | X | | A-08.1 |
| 2. Are downspouts attached to the gutters? | | X | | |
| 3. Do downspouts direct water away from the foundation? | | X | | |

Note: No gutters or downspouts on the home except for a partial area above North garage door.

STEPS, PORCHES, AND DECKS

A-08

| | | |
|---|--------------------------------|-----------------------------------|
| <input checked="" type="checkbox"/> Covered Porch | <input type="checkbox"/> Deck | <input type="checkbox"/> Railings |
| <input type="checkbox"/> Patio | <input type="checkbox"/> Steps | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| Steps & Railings _____ Note Number: _____ | | | | |
| 1. Are steps free of visible rot/deterioration? | | | X | |
| 2. Are steps railings free of visible rot/deterioration? | | | X | |
| 3. If railings exist, do they appear to be firm? | | | X | |

COVERED PORCHES

| Covered Porch Front | Covered Porch Rear | Covered Porch | Covered Porch | _____ |
|---------------------|--------------------|---------------|---------------|-------|
| _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 4. Is the porch free of visible signs of settlement? | X | | | |
| 5. Is porch floor surface free of visible rot and/or deterioration? | X | | | |
| 6. If supported by posts, do they appear to be in good condition? | X | | | |
| 7. If porch is screened, is screen material generally in satisfactory condition? | | X | | A-09.7 |
| 8. Is porch ceiling generally in satisfactory condition? | X | | | |

DECK / PATIO / UNCOVERED PORCH

| Covered Porch Front | Covered Porch Rear | Covered Porch | Covered Porch | _____ |
|---------------------|--------------------|---------------|---------------|-------|
| _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | |
| _____ | _____ | _____ | _____ | |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 9. Is the surface free of visible deterioration/damage? | | | X | |
| 10. Are floor joists/beams free of visible rot/deterioration? | | | X | |
| 11. Do support posts appear well supported and free of rot? | | | X | |
| OTHER | | | | |

WINDOW - EXTERIOR

A-09

| | | |
|--|--|---|
| <input checked="" type="checkbox"/> Aluminum | <input type="checkbox"/> Wood | <input type="checkbox"/> Vinyl |
| <input checked="" type="checkbox"/> Double Hung | <input type="checkbox"/> Sliding Glass | <input type="checkbox"/> Casement |
| <input checked="" type="checkbox"/> Insulated Glass System | <input type="checkbox"/> Storm Window System | <input type="checkbox"/> Awning <input type="checkbox"/> Jalousie |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Are windows free of broken glass? | X | | | |
| 2. Are screens present at all windows (where necessary) ? | X | | | |
| 3. Do frames appear to be in satisfactory condition? | X | | | |
| 4. Do sills appear to be in satisfactory condition? | X | | | |
| 5. Does caulking appear to be in satisfactory condition? | X | | | |
| 6. If windows are thermal pane (insulated), are they sealed? | X | | | |

DOORS - EXTERIOR

A-10

| | | |
|--|--|--|
| <input type="checkbox"/> Wood | <input checked="" type="checkbox"/> Aluminum | <input type="checkbox"/> Other |
| <input type="checkbox"/> French / Swinging | <input checked="" type="checkbox"/> Sliding | <input type="checkbox"/> Storm Door(s) |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 1. Are doors in satisfactory condition? | X | | | |
| 2. Are frames in satisfactory condition? | X | | | |
| 3. If doors have glass, is glass in satisfactory condition? | X | | | |
| 4. Do doors have weatherstripping? | X | | | |
| 5. If doors have screens, are they free of damage? | X | | | |

EXTERIOR WALLS

A-11

| | | |
|---|--|--|
| <input type="checkbox"/> Wood Frame | <input checked="" type="checkbox"/> Masonry | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Wood Siding | <input checked="" type="checkbox"/> Stucco | <input type="checkbox"/> Asbestos Siding |
| <input type="checkbox"/> Vinyl Siding | <input checked="" type="checkbox"/> Concrete Block | <input type="checkbox"/> Wood Shingle |
| <input type="checkbox"/> Aluminum Siding | <input type="checkbox"/> Brick | <input type="checkbox"/> Asphalt Shingle |
| <input type="checkbox"/> Plywood / T-111 | <input type="checkbox"/> Stone | <input type="checkbox"/> EIFS |
| <input type="checkbox"/> Hardboard Siding | <input type="checkbox"/> Artificial Stone | <input type="checkbox"/> Other |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| SIDING / WOOD TRIM | | | | |
| 1. Overall, does the siding/trim appear to be firm? | | | X | |
| 2. Does the siding/trim appear to be free of localized rot? | | | X | |
| 3. Is substrate fully covered by the siding? | | | X | |
| <p>Observations are made of exterior wood siding and trim to try and assess the extent of damage (if any) from wood decay and/or termites. It is not within the scope of the inspection to detect all damage which would require extensive, and time prohibitive probing. Therefore, sampling by probing is employed at various random areas/locations, at visually suspicious areas of wood, and in areas where probability is higher for damage. The inspection does not guarantee that other areas of damage may exist undiscovered. With two story homes or greater, probing of siding, trim, overhang materials, etc. is limited to the first floor. Observations of second floor materials are made from the ground.</p> | | | | |
| BRICK / BLOCK / STONE | | | | |
| 4. Is the surface free of major cracks (hairline cracks excluded)? | X | | | |
| 5. Is the surface free of abnormal damage? | X | | | |
| 6. Does the mortar appear to be in satisfactory condition? | X | | | |
| STUCCO | | | | |
| 7. Is the surface free of major cracks (hairline cracks excluded)? | X | | | |
| 8. Is the surface free of abnormal damage? | X | | | |
| 9. Does the stucco appear to be firm? | X | | | |
| <p>Shrinkage cracks in masonry joints and stucco surfaces are common and are usually normal and arise from shrinkage and/or minor settlement. This type of crack is not reported by the inspector. However, a settlement crack or other structural crack often begin, in their appearance, as a shrinkage crack and then change over the course of time (short or long period of time). The crack may widen, increase, develop a surface differential on either side of the crack, etc. The inspection does not warrant against shrinkage (hairline) cracks that are the beginning manifestations of settlement/structural cracks. Additionally, stucco thickness is not determined.</p> | | | | |

R O O F - E X T E R I O R

A-12

Roof Profile: Gable Hipped Gambrel Mansard Flat
Roof Material: Shingle Tile Wood Shake Metal Other
Roof Pitch: Moderate (3/12 to 5/12) ***Approximate Age :** 3-4 years ***Approximate Remaining Life :** 16-21 years
Method of making roof observations: Traversing the roof

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Does the roofing material appear to be in normal condition (normal wear/tear excepted)? | X | | | |
| 2. Is the roofing free of visible deterioration/damage? | X | | | |
| 3. Do visible flashings appear to be in normal condition? | X | | | |
| 4. Are the stack pipes free of obvious problems? | X | | | |
| 5. Is the roof free of visible leaks? | X | | | |
| 6. Does the roof surface appear to be firm? | X | | | |

***Note:** The "Approximated Age" of roofing and the "Approximate Remaining Life" of roofing are approximations only and are not warranted to be accurate. The Client assumes all risk and responsibilities related to the use of this information. Tile roof systems are not traversed which can result in damage to the tile. Observations of tile roofing are made from the ground and poses restrictions in the assessment of the roofing.

AVERAGE LIFE EXPECTANCIES OF ROOFING

The following information is provided for the convenience of the Client. The information contained herein is believed to be accurate but is not warranted as such. The client assumes all risk and responsibilities related to the use of this information.

| ROOFING TYPE | AVER. LIFE EXPECTANCY | SPECIAL REMARKS |
|---------------------------------|-----------------------------------|---|
| ASPHALT SHINGLES | 12-14 Years | Used on nearly 80% of all residential roofs; requires little maintenance. Not recommended for low slope roofs. |
| ASPHALT MUTI-THICKNESS SHINGLES | 20-30 Years | Heavier and more durable than regular asphalt shingles. Not recommended for low slope roofs. |
| ASPHALT INTERLOCKING SHINGLES | 15-25 Years | Especially good in high-wind areas. Not recommended for low slope roofs. |
| ASPHALT ROLLS | 10 Years | Used on low slope roofs. |
| BUILT-UP ROOFING | 10-20 Years | Used on low slope roofs, 2 to 3 times as costly as asphalt shingles. |
| WOOD SHINGLES | 10-40 Years | Treat with preservative every 5 years to prevent decay. |
| CLAY TILES | 20+ Years | Durable, fire-resistant, but not watertight, requiring a good subsurface base (which is not visible). |
| CEMENT TILES | 20+ Years | Durable, fire-resistant, but not watertight, requiring a good subsurface base (which is not visible). |
| SLATE SHINGLES | 30-100 Years | Extremely durable, but brittle and expensive. |
| ASBESTOS CEMENT SHINGLES | 30-75 Years | Durable, but brittle and difficult to repair. |
| METAL ROOFING | 15-40+ Years | Comes in sheets and shingles; should be well grounded for protection from fighting; certain metals must be painted. |
| SINGLE PLY MEMBRANE | 15-25 Years (manufacturers claim) | New material; has not yet passed the test of time. |

G A R A G E / C A R P O R T

A-13

| | | |
|---|--|---------------------------------------|
| <input checked="" type="checkbox"/> Attached / Enclosed | <input type="checkbox"/> Attached / Open | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Detached / Open | <input type="checkbox"/> Detached / Enclosed | <input type="checkbox"/> _____ |

| DESCRIPTION | YES | NO | NA | See Note No: |
|---|-----|----|----|--------------|
| WALL & CEILING FINISHES | | | | |
| 1. Do walls appear to be in satisfactory condition (cosmetic items excluded)? | X | | | |
| 2. Does the ceiling appear to be in satisfactory condition (cosmetic items excluded)? | X | | | |
| FLOOR | | | | |
| 3. If attached, is the floor of the garage lower than the house? | X | | | |
| 4. Is the floor free of major cracks (normal shrinkage cracks not reported) ? | X | | | |

GARAGE DOOR 16' Overhead Door 8' Overhead Door Other: _____

| | | |
|---|--|--|
| <input type="checkbox"/> Aluminum / Uninsulated | <input checked="" type="checkbox"/> Aluminum / Insulated | <input type="checkbox"/> Steel / Insulated |
| <input type="checkbox"/> Wood | <input type="checkbox"/> Fiberglass / Uninsulated | <input type="checkbox"/> Other |

| | | | | |
|---|---|--|--|--|
| 5. Does the Garage Door(s) appear to be in satisfactory condition? | X | | | |
| 6. Does the Door have weatherstripping at the base of door? | X | | | |
| 7. Does the Door have an Automatic Opener and does it operate? | X | | | |
| 8. Does the Auto Reverse (safety) work? <input checked="" type="checkbox"/> Light Beam <input type="checkbox"/> Pressure Sensitive* <input type="checkbox"/> None | X | | | |

Note: Pressure sensitive reversing action is not tested for operation as this may damage the door opener.

S W I M M I N G P O O L & S P A

A-14

| | | |
|--|---|--------------------------------|
| <input type="checkbox"/> In-ground | <input type="checkbox"/> Above-ground | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Yes <input type="checkbox"/> No Screen Enclosure | <input type="checkbox"/> Yes <input type="checkbox"/> No Fence Enclosure | <input type="checkbox"/> Spa |

| DESCRIPTION | YES | NO | NA | See Note No: |
|---|-----|----|----|--------------|
| 1. Is the pool pump working and free of obvious leakage? | | | X | |
| 2. Is the pool filter free of obvious leakage? | | | X | |
| 3. Does the pool surface generally appear to be in satisfactory condition (wear/tear excepted)? | | | X | |
| 4. Does the deck topping appear to be in satisfactory condition (wear/tear excepted)? | | | X | |
| 5. If there is a pool/spa heater, is it operational? <input type="checkbox"/> Electric <input type="checkbox"/> Gas | | | X | |
| 6. If an underwater pool light exists, does it operate? | | | X | |
| 7. Are screen enclosure panels secured? | | | X | |
| 8. Do screen enclosure panels appear to be in satisfactory condition (minor holes & tears excluded)? | | | | |
| 9. Do screen doors appear to be in satisfactory condition? | | | | |

Note: Swimming pools and spas are inspected for their general operation only and the scope of the inspection includes only those questions indicated in this section. It is recommended that a pool specialist inspect the pool or spa if the Client has any concerns as to its condition and operation. Solar pool heating equipment is not included in this inspection and should be inspected by a solar heating specialist. Pools without a barrier such as fence or screen enclosure are a liability.

| P L U M B I N G - E X T E R I O R | | | | A-15 |
|--|---|--|----|--------------|
| <input checked="" type="checkbox"/> Public Water Supply | <input type="checkbox"/> Private Well Supply | <input type="checkbox"/> Irrigation Pump | | |
| <input checked="" type="checkbox"/> Public Sewer System | <input type="checkbox"/> Septic Tank Sewer System | <input type="checkbox"/> Other: | | |
| DESCRIPTION | YES | NO | NA | See Note No: |
| 1. Are hose bibbs operational and firmly secured to structure? | X | | | |
| 2. Are hose bibbs free of obvious leaks? Water pressure at exterior hose bibb: 60-65 psi | X | | | |
| 3. Is there a main water shut-off valve? Location if visible: <u>Exterior Right</u> | X | | | |
| 4. If septic tank system, is it free of strong odors in tank area? | | | X | |
| 5. Is the septic tank area free of standing water? | | | X | |
| 6. If there is a well and/or pump, does it (they) work? | | | X | |
| Items not included are wells, septic systems (other than the questions noted above), water testing, underground and concealed plumbing and electric lines, water softeners, solar systems. Water from wells should be tested by a specialist prior to use. | | | | |

| E L E C T R I C A L - E X T E R I O R | | | | A-16 |
|---|---|---------------------------------|----|--------------|
| <input type="checkbox"/> Overhead Service | <input checked="" type="checkbox"/> Underground Service | <input type="checkbox"/> Other: | | |
| <input checked="" type="checkbox"/> Exterior Outlets | <input type="checkbox"/> Other Exterior Electrical: | | | |
| DESCRIPTION | YES | NO | NA | See Note No: |
| 1. Is entrance conduit free of obvious damage? | X | | | |
| 2. If service is overhead type, is there a drip loop? | | | X | |
| 3. If service is overhead type, does the mast appear stable? | | | X | |
| 4. If service is overhead type, are wires free of obstructions? | | | X | |
| 5. Do visible entrance wires appear undamaged? | X | | | |
| 6. Is there a main disconnect switch at the exterior? <u>See Section "F" for panel box location</u> | | X | | |
| 7. Is there a grounding rod visible (often buried beneath sod or mulch)? | X | | | |
| 8. Are exterior outlets operational & free of obvious damage? | X | | | |
| 9. Do exterior outlets have GFI devices (if not, see Section "F" of this report)? | | X | | |
| 10. Do exterior outlets have weatherproof covers? | X | | | |
| 11. Are exterior light fixtures operational (fixtures controlled by photocell excluded)? | X | | | |
| 12. Do exterior light fixtures appear to be in acceptable condition? | X | | | |

| L A N D S C A P I N G - E X T E R I O R | | | | A-17 |
|---|---|--|----|--------------|
| <input checked="" type="checkbox"/> Grass | <input checked="" type="checkbox"/> Trees | <input checked="" type="checkbox"/> Shrubs | | |
| <input type="checkbox"/> Flower/Planting Beds | <input type="checkbox"/> Elevated Planting Beds | <input type="checkbox"/> Other: | | |
| DESCRIPTION | YES | NO | NA | See Note No: |
| 1. Are shrubs & plantings away from the exterior surface of the house? | X | | | |
| 2. Are trees away from the roof such that they do not come into contact with its surface? | X | | | |

| STRUCTURAL - FOUNDATION | | | | B-01 |
|--|---|----|----|--------------|
| <input checked="" type="checkbox"/> Concrete Block | <input type="checkbox"/> Poured Concrete Footings | | | |
| <input type="checkbox"/> Crawl Space w/ Piers | <input type="checkbox"/> | | | |
| DESCRIPTION | YES | NO | NA | See Note No. |
| 1. Are visible foundation walls free of cracks (minor hairline cracks excluded)? | X | | | |
| 2. Are visible foundation walls straight? | X | | | |
| 3. If crawl space, was it accessible to the inspector? | | | X | |
| 4. If crawl space, is there a vapor barrier? | | | X | |
| 5. If crawl space, is there ventilation? | | | X | |
| 6. Does the crawl space have a sump pump, and does it work? | | | X | |
| | | | | |

| STRUCTURAL - FIRST FLOOR | | | | B-02 |
|--|---|----|----|--------------|
| <input checked="" type="checkbox"/> Slab-On-Grade | <input type="checkbox"/> Wood Joists w/ Crawl Space | | | |
| DESCRIPTION | YES | NO | NA | See Note No. |
| 1. Is the floor free of obvious sagging or sloping? | X | | | |
| 2. Does the floor feel firm? | X | | | |
| 3. If crawl space, is the floor structure free of visible signs of water damage? | | | X | |
| | | | | |

| STRUCTURAL - SECOND FLOOR | | | | B-03 |
|--|--------------------------|--------------------------|----|--------------|
| <input type="checkbox"/> Wood Joists | <input type="checkbox"/> | <input type="checkbox"/> | | |
| DESCRIPTION | YES | NO | NA | See Note No. |
| 1. Is the floor free of obvious sagging or sloping? | | | X | |
| 2. Does the floor feel firm? | | | X | |
| 3. Is the floor free of obvious signs of deterioration/damage where it is visible? | | | X | |
| | | | | |

| STRUCTURAL - CEILING | | | | B-04 |
|--|---|---|----|--------------|
| <input checked="" type="checkbox"/> Wood Trusses | <input type="checkbox"/> No Attic Space | <input type="checkbox"/> Attic above w/ limited storage | | |
| <input type="checkbox"/> Wood Joists | <input checked="" type="checkbox"/> Attic Above w/ no Storage | <input type="checkbox"/> Attic above w/ Finished Space | | |
| DESCRIPTION | YES | NO | NA | See Note No. |
| 1. Is the ceiling free of obvious sagging or sloping? | X | | | |
| 2. Are visible ceiling joists free of signs of water penetration ? | X | | | |
| 3. Are finished ceilings free of visible water stains? | X | | | |
| | | | | |

STRUCTURAL - ROOF STRUCTURE

B-05

| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Pre-Engineered Trusses | <input type="checkbox"/> Stick Frame | <input checked="" type="checkbox"/> Wood Sheathing |
| <input checked="" type="checkbox"/> Insulated <u>Fiberglass</u> | <input checked="" type="checkbox"/> Ventilated | <input type="checkbox"/> Skylights |
| <input type="checkbox"/> Sloped / Pitched Roof | <input type="checkbox"/> Flat Roof | <input type="checkbox"/> Other: |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|---------------|
| 1. Was the attic space accessible to the inspector? | X | | | |
| 2. Are roof framing members free of visible water penetration? | X | | | |
| 3. Are roof framing members free of obvious sagging? | X | | | |
| 4. Is roof sheathing free of visible signs of water penetration? | X | | | |
| 5. Is roof sheathing free of obvious sagging. | | X | | B-05.5 |
| 6. Is the attic space insulated? | X | | | |
| 7. Is insulation uniform and provide coverage throughout? | X | | | |
| 8. Is the attic space provided with outlet ventilation? <u>Ridge Vents</u> _____ | X | | | |
| 9. If electric power vents exist, are they operational? | | | X | |
| 10. If skylights exist, do they appear to be in good condition? | | | X | |
| 11. Are other roof penetrations free of visible signs of water penetration? | X | | | |

Observations are made to reveal roof leakage. However, this inspection does not guarantee against roof leakage. Conditions concealed underneath attic insulation and in smaller attic areas are excluded. During warm weather attic spaces can become very hot. The inspector will use his personal judgment as to whether the attic is too hot to safely traverse. Additionally, hot attic spaces limit the amount of time the inspector can spend making observations in these areas. The Client is advised that hot attic spaces impose observation restrictions on the inspector and his ability to detect all possible defects or damage.

STRUCTURAL - INTERIOR WALLS

B-06

| | | |
|--|--------------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> Wood Frame | <input type="checkbox"/> Metal Frame | <input type="checkbox"/> _____ |
|--|--------------------------------------|--------------------------------|

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 1. Are interior walls free of unusual bows? | X | | | |
| 2. Are interior walls free of separation cracks where they intersect the ceiling? | X | | | |
| 3. Are interior walls plumb? | X | | | |
| 4. Do doorway openings appear to be plumb and level? | X | | | |

General Note

This inspection does not include disassembly of any item or portion of building nor performing any procedure which may damage the property. A crawl space with less than 36" clearance or where other dangerous or adverse conditions exist is not traversed or checked. Items below grade are not inspected nor included. Engineering, soils testing, presence of hazardous substances, presence of wood destroying organisms or pests, and governmental codes compliance are excluded.

STRUCTURAL - MISCELLANEOUS **B-07**

| | | |
|---|------------------------------------|---|
| <input type="checkbox"/> Stairway | <input type="checkbox"/> Fireplace | <input type="checkbox"/> 2nd Floor Guardrails |
| <input type="checkbox"/> Interior Columns | <input type="checkbox"/> Other: | <input type="checkbox"/> Other: |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| Stairway: # _____ | | | X | |
| 1. Do the stairs feel solid under foot (do not bounce/squeak excessively)? | | | X | |
| 2. Are risers generally uniform? | | | X | |
| 3. Are treads generally uniform? | | | X | |
| 4. Does each stairway have a handrail? | | | X | |
| 5. Are stair handrails firm? | | | X | |
| Fireplace: # _____ Type: _____ <small>See General Note about fireplace inspection at bottom of this page.</small> | | | X | |
| 6. Does the damper fit tight and operate easily? | | | X | |
| 7. Do fire brick and/or fire box appear to be in acceptable condition? | | | X | |
| 8. Does grout in fire box appear to be in satisfactory condition ? | | | X | |
| 9. If exterior of fireplace is brick, stone, tile, does it appear to be in satisfactory condition? | | | X | |
| 10. Does the hearth generally appear to be in satisfactory condition? | | | X | |
| 11. Does the mantle generally appear to be in satisfactory condition? | | | X | |
| 12. If a lintel exists, is it free of sagging? | | | X | |
| 13. Does fireplace have a gas log starter? | | | X | |
| 14. Does gas log starter operate? | | | X | |
| 15. Does the chimney coping/cap appear to be in satisfactory condition? | | | X | |
| 16. Does fireplace have an electric recirculating fan? | | | X | |
| 17. Does recirculating fan operate? | | | X | |
| Second Floor / Balcony Guardrails | | | X | |
| 18. Are guardrails firm? | | | X | |
| 19. Are guardrails generally in satisfactory condition? | | | X | |

General Note: Fireplace flues and chimneys should be cleaned and inspected periodically by a chimney specialist. The inspection of the fireplace by the home inspector is very limited and general in nature and does not include lighting a fire in the fireplace to check for proper operation. It is recommended that the flue be inspected and cleaned by a chimney specialist prior to use.

INTERIOR - DOORS & WINDOWS

C-02

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|---------------|
| 1. Do interior doors and hardware operate properly? | X | | | |
| 2. Are doors generally in satisfactory condition? | X | | | |
| 3. Is door hardware generally in satisfactory condition? | X | | | |
| 4. Is door trim in satisfactory condition? | X | | | |
| 5. Do windows operate? | X | | | |
| 6. Do windows and screens generally appear to be in satisfactory condition? | | X | | C-02.6 |
| 7. Do window locks operate satisfactory? | X | | | |
| 8. Is window trim in satisfactory condition? | X | | | |
| 9. Are windows free of visible signs of water penetration? | X | | | |

The inspector tries to inspect at least one window per room if it is accessible. Each bedroom should have at least one window or exterior door that is operational to provide a means for emergency and should exit directly to the exterior. Refer to "Exterior", sections 10 & 11, for more information about windows and doors. See also "Exterior", section 14, for information about garage overhead door(s).

INTERIOR - KITCHEN/BATH/OTHER CASEWORK

C-03

| Kitchen Cabinets | Bathroom Cabinets | Other Built-In Casework |
|--------------------|--------------------|-------------------------|
| _____ | _____ | _____ |
| Countertops | | |
| _____ | Countertops | Countertops |
| | _____ | _____ |
| | _____ | _____ |

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 1. Do Kitchen cabinets appear to be in acceptable condition? | X | | | |
| 2. Do Kitchen countertops appear to be in satisfactory condition? | X | | | |
| 3. Do Bathroom cabinets appear to be in acceptable condition? | X | | | |
| 4. Do Bathroom countertops appear to be in satisfactory condition? | X | | | |
| 5. Does other "Built-In" casework appear to be in satisfactory condition? | X | | | |

Kitchen and Bathroom cabinets are inspected for basic function, operation, and major deficiencies. The terms "satisfactory" and "acceptable" from the above questions are with respect to function only and do not include cosmetic items. Normal wear and tear and minor "cosmetic" flaws are not included in the scope of this inspection. For water leakage and related damage to bottom of base cabinets, refer to "Part D - Plumbing" of this report.

INTERIOR - BUILT-IN APPLIANCES

C-04

Only "Built-In" Appliances are Included in this Inspection Report

| APPLIANCE | OPERATIONAL | | Average Life Expectancy | Condition (Good, Fair, Poor) | Comments |
|--|-------------------------------------|--------------------------|-------------------------|------------------------------|----------|
| | Yes | No | | | |
| <input checked="" type="checkbox"/> Range (Stove / Oven Combo) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 15-20 yrs. | Good | |
| <input type="checkbox"/> Oven(s) | <input type="checkbox"/> | <input type="checkbox"/> | 15-20 yrs. | | |
| <input type="checkbox"/> Stove Top | <input type="checkbox"/> | <input type="checkbox"/> | 15-20 yrs. | | |
| <input checked="" type="checkbox"/> Range Exhaust Hood <input checked="" type="checkbox"/> Recirculating <input type="checkbox"/> Exhaust to Exterior | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 10 -15 yrs. | Good | |
| <input checked="" type="checkbox"/> Dishwasher | <input type="checkbox"/> | <input type="checkbox"/> | 7-10 yrs. | Good | |
| <input checked="" type="checkbox"/> Garbage Disposal | <input type="checkbox"/> | <input type="checkbox"/> | 10 yrs. | Good | |
| <input type="checkbox"/> Microwave (built-in) | <input type="checkbox"/> | <input type="checkbox"/> | 15-20 yrs. | | |
| <input type="checkbox"/> Trash Compactor | <input type="checkbox"/> | <input type="checkbox"/> | 5-10 yrs. | | |
| <input type="checkbox"/> Other: | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| <input type="checkbox"/> Other: | <input type="checkbox"/> | <input type="checkbox"/> | | | |
| <input type="checkbox"/> Other: | <input type="checkbox"/> | <input type="checkbox"/> | | | |

Appliances are checked for basic operation only by using their normal operating control devices. Excluded from the inspection are self-cleaning modes of ranges, clocks and timers, dishwasher soap dispensers, microwave oven leakage, and non-built-in appliances such as washer, dryer, refrigerator, etc.. Water softeners and water filtering systems are not included in this inspection and should be serviced by a specialist before use. If age of appliance is indicated, this information was provided by the current Home Owner. Otherwise, the Buyer is encouraged to obtain the age of appliances from the Seller.

Other appliance average life expectancies are: Refrigerator 1-5 yrs Washer 5-10 yrs Dryer 1-2-5 yrs

PLUMBING - INTERIOR

D-01

| Water Supply Lines | Drain / Waste Lines | Water Heater |
|--|---|--|
| <input checked="" type="checkbox"/> Copper (where visible) | <input checked="" type="checkbox"/> Plastic (PVC) | <input checked="" type="checkbox"/> Electric |
| <input type="checkbox"/> Galvanized Metal (where visible) | <input type="checkbox"/> Cast Iron | <input type="checkbox"/> Gas |
| <input type="checkbox"/> Polybutylene Plastic | <input type="checkbox"/> Not Visible | <input type="checkbox"/> Oil |
| <input type="checkbox"/> CPVC | <input type="checkbox"/> Other: | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Other: | <input type="checkbox"/> Other: | <input type="checkbox"/> Capacity: <input type="text" value="40"/> Gallons |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-------------------------------------|-------------------------------------|-------------------------------------|--------------|
| 1. Are exposed pipes free of visible signs of leakage and/or deterioration? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Is the water heater operational and appear to be in satisfactory condition ? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 3. Hot water temperature at kitchen sink: <u>110-115</u> °F (See General Note below) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 4. Are faucets in satisfactory condition and free of leaks? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | D-01.4 |
| 5. Are areas under sinks free of signs of leaks or water damage? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | D-01.4 |
| 6. Are sinks in satisfactory condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 7. Are commodes in satisfactory condition and operate properly? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | D-01.4 |
| 8. Are tubs and shower units in satisfactory condition? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. Do tubs, showers, sinks, and commodes drain properly? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 10. Do tubs have whirlpool operation? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 11. Does whirlpool operate? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 12. Do all plumbing fixtures have a shut-off valve? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13. Does kitchen sink have a vegetable sprayer? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 14. Does vegetable sprayer operate properly? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

GENERAL NOTES

Items excluded are wells, water testing, items concealed in walls and underground lines, septic systems, water softeners, solar systems, hot tubs. Leakage is checked throughout the house where accessible. However, a guarantee against leakage is not provided. Pressure relief valves are not manually tested as this may permanently damage the valve. A certain amount of damage is expected at the bottom of the cabinet beneath Kitchen and Bathroom sinks as a result of prior water leakage. If the inspector finds that the bottom of the cabinet is not abnormally deteriorated and/or if this area of the cabinet remains in functional condition, the condition will not be reported as needing repair (functional is defined as the ability of the cabinet to be used for household storage).

Hot Water Temperature: 110°F minimum required to kill microbes. Scalding/burns can occur quickly at hot water temperatures above 125 °F.

H E A T I N G & A I R C O N D I T I O N I N G

E-01

| Heating | | Air Conditioning | | Fuel Type | |
|-------------------------------------|---------------------------|-------------------------------------|-------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Central Forced Air | <input checked="" type="checkbox"/> | Central Forced Air | <input checked="" type="checkbox"/> | Electric |
| <input type="checkbox"/> | Heat Pump | <input type="checkbox"/> | Heat Pump | <input type="checkbox"/> | Gas |
| <input type="checkbox"/> | Baseboard | <input type="checkbox"/> | Room A/C | <input type="checkbox"/> | Oil |
| <input type="checkbox"/> | Boiler | <input type="checkbox"/> | Other: | <input type="checkbox"/> | Other: |
| <input type="checkbox"/> | Age of air handler: 6 yrs | <input type="checkbox"/> | Age of condensing unit: 6 yrs | <input type="checkbox"/> | Capacity: <input type="text" value="n/a"/> Gallons |

| DESCRIPTION | YES | NO | NA | See Note No. |
|--|-----|----|----|--------------|
| 1. Is the thermostat operational? | X | | | |
| 2. Do all living spaces have supply vents? | X | | | |
| 3. Are supply vents adjustable? | X | | | |
| 4. Is the air conditioner mode operating? | X | | | |
| 5. Is air flow detected at all supply vents? | X | | | |
| 6. Was the temperature differential between the supply and return between 14 and 20 degrees? | X | | | |
| 7. Is the heat mode operating? NOTE: emergency electrical back-up strips are not inspected/tested. | X | | | |
| 8. Does the air feel adequately warm in the heating mode? | X | | | |
| 9. Is return air provided and equipped with a filtering device? | X | | | |
| 10. Is the blower fan free of excessive noise or vibration? | X | | | |
| 11. Does the condensate have adequate drainage? | X | | | |
| 12. Is exposed ductwork in attic insulated? | X | | | |
| 13. Is the condensing unit free of excessive noise/vibration? | X | | | |
| 14. Is there a clear area around the condensing unit (12-16")? | X | | | |
| | | | | |

The inspection of air conditioning and heating equipment is for testing of operation only using normal operating controls. It is not intended to be technically exhaustive and no dismantling of any system is performed. Refrigerant levels/leaks are not tested. Any system requiring ignition of an open flame is not operated or tested. Adequacy of systems design is excluded from this inspection and report.

ELECTRICAL - INTERIOR

F-01

| | | |
|--|--|---|
| Service Entrance <input checked="" type="checkbox"/> Three wire 220V <input type="checkbox"/> Two wire 120V <input type="checkbox"/> <input type="checkbox"/> | Distribution Panel <input checked="" type="checkbox"/> Circuit Breaker Panel <input type="checkbox"/> Fused Panel Number of Circuits: <input type="text" value="25"/> Amperage Capacity: <input type="text" value="150"/> Copper branch wiring | Supply Wiring Type <input type="checkbox"/> Copper <input type="checkbox"/> Aluminum (solid) <input checked="" type="checkbox"/> Aluminum (multi-strand) <input type="checkbox"/> Other: |
|--|--|---|

| DESCRIPTION | YES | NO | NA | See Note No. |
|---|-----|----|----|--------------|
| 1. Do all breakers operate (turn off and on)? | X | | | |
| 2. Do breakers / fuses feel cool to the touch? | X | | | |
| 3. Is distribution panel in an accessible location? <u>Garage</u> | X | | | |
| 4. Is distribution panel secured to structure? | X | | | |
| 5. Is distribution panel in satisfactory condition? | X | | | |
| 6. Are breaker slot covers present? | | X | | F-01.6 |
| 7. Is there a main disconnect switch in panel? | X | | | |
| 8. Are outlets operational? | | X | | F-01.6 |
| 9. Are outlets three hole type? | X | | | |
| 10. Are there any ground fault circuit interrupters, (GFCI)? (see below for more information) | X | | | |
| 11. Are all switch and outlet covers present (where visible)? | | X | | F-01.6 |
| 12. Are switches operational? | X | | | |
| 13. Are permanently mounted light fixtures operational? | X | | | |
| 14. Are light fixtures free of obvious damage? | X | | | |

GENERAL NOTES

The inspection of electrical items is for testing of operation only using normal operating controls. It is not intended to be technically exhaustive and no dismantling of any system is performed. Adequacy of system design is excluded from this report. Telephone and television wiring and outlets, security systems, smoke detectors, carbon monoxide detectors, central vacuum systems, intercoms, timing devices, and low voltage items are excluded. Receptacles, switches, and light fixtures are randomly checked. Ceiling fan and light fixture mountings are not inspected.

SMOKE DETECTORS

Generally speaking, it is recommended that a smoke detector be located inside of each Bedroom and one outside of Bedrooms. The Buyer is strongly encouraged to check smoke detector locations and operation and can contact the local fire department for more information regarding recommended locations and maintenance/care. Inspection of smoke detector locations and operation are not included in this home inspection.

**G.F.C.I. DEVICES
(Ground Fault Circuit Interrupters)**

GFCI's are devices that greatly enhance shock protection at outlet locations and are required by code in newer homes. Older homes constructed before the newer code may not have these devices and it is not required by code that older homes be upgraded to provide these devices. However, our company recommends that if your home does not have GFCI devices, that you consider having this protection installed at all outlets within 6 feet of a water source such as kitchens, bathrooms, laundry rooms. GFCI's are also recommended at garages and all exterior outlets.

Your home has the following level of GFCI protection: GFCI protection at most recommended locations.

AARON HOME INSPECTION

PROFESSIONAL HOME INSPECTION

SUMMARY NOTES

Lot Grading & Drainage

Note Number: A-01.1

The grading slopes away from the house in most areas and seems to provide adequate drainage. In the area in the front of the house, right of the front entry, the grading is lower than the walkway and rainwater accumulates. It is recommended that this area be backfilled with soil to provide a sloped grading to ensure drainage away from the house.

Sprinkler System

Note number: A-06.1

The Sprinkler system was not tested as the pump is not working at this time. The system uses well water. Several broken sprinkler heads were noted.

Gutters & Downspouts

Note number: A-08.1

| | | | | | | | |
|-----------------------|-------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| A 1-9 | A 10-18 | B | C | D | E | F | G |
|-----------------------|-------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|

The home has a partial gutter system in the front. The downspout by the front door is loose and missing an extension, the other downspout has a hole at the second bend. During a hard rain it was observed that the entire gutter system is inadequate. The system should be replaced with wider gutters with corner extensions.

Steps, Porches, & Decks

Note number: A-09.7

| | | | | | | | |
|-----------------------|-------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|
| A 1-9 | A 10-18 | B | C | D | E | F | G |
|-----------------------|-------------------------|-------------------|-------------------|-------------------|-------------------|-------------------|-------------------|

There is a tear in the screen on the screen door at the rear porch, also the door-closer is rusted and not functioning smoothly. The lower panel of the door is also loose. Recommend replacing the entire door.

Roof - Exterior

Note Number: B.05.5

Some slight sagging of the substrate was noted on the roof. It appears to be normal settling based on the substrate thickness and truss spacing.

Windows - Exterior

Note Number: C.02.6

The rear/right window screen has several holes, it should be replaced to prevent bugs from entering when the window is open.

Plumbing

Note Number: D.01.2

The water heater pressure relief valve should have an extension added for safety and to bring it up to code.

Plumbing

Note Number: D.01.4

The kitchen faucet leaks and should be replaced.

There is a leak in the drain pipe at a connection under the left hand master bathroom sink, possibly it just needs to be tightened or the section needs to be replaced.

The guest bathroom toilet has a leak at the water supply where it attaches to the toilet, possibly it could be tightened, if not the connection and gasket can be replaced.

Electrical - Interior

Note Number: F-01.6

There is a missing circuit breaker slot cover at the electrical panel, it should be replaced for electrical safety.

There is a missing outlet cover in the master bedroom, it should be replaced for electrical safety.

The lower outlet receptacle in the rear guest bedroom left wall seems to be blocked with foreign matter, the outlet should be replaced.

General Note

General Notes

There is a water softening system installed, it was unclear if the system is online. The seller should be asked for any information on warranty and operating instructions.

General Note

General Notes

There was some mouse spoor noted in the garage near the air handler. There was no evidence of mice activity in the house or attic.

General Note

Note Number: **General Note**

Two of the ceiling fans had broken blades.

General Note

Note Number: **General Note**

Recommend re-caulking behind the kitchen sink to prevent water entry.

AARON HOME INSPECTION

PROFESSIONAL HOME INSPECTION

SPECIALIZED EQUIPMENT

If the property you are preparing to buy has any of the following items or equipment, you may want to consider having them inspected by a specialist in that field. These items are specifically excluded from the scope of this home inspection.

- SEA WALLS
- DOCKS AND EQUIPMENT
- SOLAR POOL EQUIPMENT / SOLAR HEATING EQUIPMENT
- DETACHED STRUCTURES (structures on the property not directly attached to the house such as detached garages, storage sheds, barns, landscaping and playground structures)
- WATER SOFTENER EQUIPMENT
- WATER PURIFICATION EQUIPMENT
- SECURITY SYSTEMS / LIGHTNING PROTECTION SYSTEMS
- RETAINING WALLS THAT DO NOT DIRECTLY AFFECT THE HOUSE
- WELLS / PUMPS
- WELL WATER
- SEPTIC SEWAGE SYSTEMS
- TELEPHONE, CABLE TV, SOUND AND INTERCOM EQUIPMENT, SMOKE DETECTORS
- WOOD DESTROYING ORGANISMS OR PESTS (including termites)
- FIREPLACES (the inspector does not light a fire in the fireplace)
- WASHER, DRYER, REFRIGERATOR, FREEZER, AND OTHER NON-BUILT-IN EQUIPMENT OR APPLIANCES

If you have any questions about these items or equipment, you should contact your real estate representative. If you have questions regarding the risks of not having these items inspected, you may contact your Home Inspector.

NOTE: The above items may not be all inclusive of specialized equipment at the property you are preparing to purchase. Be sure to thoroughly examine your Inspection Report. Items indicated in the report are included in the inspection. Items not specifically indicated in the report are not included in the scope of the home inspection. We have included this page in the report as a courtesy to our clients since our goal is that you be as informed as possible.

An Ounce of Prevention is worth a pound of cure.

Maintaining your Home!

HOME CARE SUGGESTIONS

| NOW | PERIODICALLY | SPRING | FALL | YEARLY | MAINTENANCE ITEM |
|--|--------------|--------|------|--------|--|
| GRADING / DRAINAGE | | | | | |
| | | | | X | Check soils at perimeter of foundations for positive drainage away from house. |
| | | | | X | Check for soil erosion at downspout locations and below roof valleys. |
| DRIVEWAYS / SIDEWALKS / PATIO SLABS | | | | | |
| | | | | X | Check for settlement cracks, heaving, and surface deterioration. Caulk/patch as needed. |
| RETAINING WALLS | | | | | |
| | | | | X | Check for tilting and settlement cracks. |
| FENCING | | | | | |
| | | | | X | Check masonry fencing for tilting and settlement cracks. Check for decay at wood fences. Periodically lubricate and adjust hardware and level/plumb. |
| SPRINKLER SYSTEM | | | | | |
| | X | | | | Check and adjust heads to assure that water is not spraying against the house or related equipment. Check valves for leakage. Check timer back-up battery and clock setting. |
| SOFFIT / FASCIA / EAVES | | | | | |
| | | | | X | Check for decay, insect/rodent access locations, staining on soffit (indicating possible roof leakage). Check for damaged soffit vent screen and at gable vents. |
| GUTTERS & DOWNSPOUTS | | | | | |
| | | X | X | | Clean-out gutters and downspouts. Check slope at gutters. Check for leakage. |
| DOORS & WINDOWS | | | | | |
| | | | | X | Check for decay and insect damage at door jambs, door edges, and window trim. Check for window trim for decay. Seal any cracks in window sills and check caulking. |
| | X | | | | Check operation of windows making sure that one window per bedroom is operational. |
| | X | | | | Lubricate overhead Garage door, track, and opener (rail, guide, chain, etc). |
| | X | | | | Check operation of auto-reverse safety device on garage door openers. |
| EXTERIOR WALLS | | | | | |
| | | X | | | Check siding and trim for damage, looseness, warping and decay. Caulk siding where nail heads have penetrated surface and at joints where caulking has pulled loose. |
| | | X | | | Check exterior masonry walls for cracks, looseness, missing or broken mortar. |
| | X | | | | Check stucco for cracks. Caulk to prevent water penetration. |
| | | X | | | Check painted surface for paint flaking or paint failure. |

HOME CARE SUGGESTIONS

| NOW | PERIODICALLY | SPRING | FALL | YEARLY | MAINTENANCE ITEM |
|-----|--------------|--------|------|--------|---|
| | | | | | ROOFING |
| | | | | X | Check for damaged, loose or missing shingles, blisters. |
| | | | | X | Check flashings around roof stacks, vents, skylights, chimneys, etc. as sources of leakage. |
| | | | | | Do not close-off roofing vents. The attic space needs to ventilate year round. |
| | | | | X | Thoroughly check for water stains on ceilings (which can often be difficult to see). |
| | | | | X | Check roof sheathing water stains, mildew/mold growth, dampness, etc. Give particular attention to areas where roof surface is penetrated and at overhang edges. |
| | | | | | PLUMBING |
| | X | | | | Inspect faucets, hose bibbs and shut-off valves, under sinks for leakage and operation. |
| | | | | X | If you have well water, test water for bacterial contamination at least once per year. |
| | | | | X | Check operation of main water shut-off valve which can become stuck in the open position. |
| | | | | | Have septic tank cleaned and inspected every 2-3 years. |
| | | | | | Familiarize yourself with the location of the main water shut-off valve. |
| | | | | | HEATING & AIR CONDITIONING |
| | | | | | Change or clean return air filters monthly. |
| | | X | X | | Clean outside cooling equipment. Trim vegetation away from equipment (disconnect power). |
| | | | | | Check condensate drain line monthly to be sure that the line is free of obstructions. |
| | | X | X | | Air conditioning / heating equipment should be serviced/inspected twice per year. |
| | X | | | | Have coils cleaned every 3-4 years. |
| | | | | | ELECTRICAL |
| | | | | | Make sure breakers are labeled. Don't assume old labeling to be correct. |
| | | X | | | Test trip/reset buttons at ground fault circuit interrupters (G.F.C.I.) monthly. |
| | | X | | | Check exposed electrical wiring for wear or damage (do not touch ... call electrician). |
| | | | | | If breakers trip frequently, contact a licensed electrician. |
| | | | | | Familiarize yourself with the location of the electrical main disconnect/breaker. |
| | | | | | LANDSCAPING |
| | | X | | | Trim tree branches from making contact with roof surface and building surfaces. |
| | X | | | | Cut back and trim shrubbery away from walls to allow ventilation. |
| | | | | | OTHER |
| | | | | | Visit the Michigan State University website for home maintenance. This is a great resource for home care and how-to information. Website = http://www.msue.msu.edu/msue/imp/mod02/master02.html |
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