

Inspection Report

Atlantic Home Inspection Company LLC



Confidential Home Inspection Report

Of
Jane & Joe Public
2 Flipp Road
Biddeford, Maine
Date of inspection: 10/15/07



By
Jack LeClair
Of

Atlantic Home Inspection Company LLC
www.atlantichi.com

Arundel, Maine 04046

Phone 207-283-HOME



The World's Elite Inspectors
**National Association of
Certified Home Inspectors**





Certified Inspector
AMERICAN
HOME INSPECTORS TRAINING INSTITUTE

Building Description

Attribute	Description / Type	Address / Comments
Age (approximate)	1938	
Area (approximate)	1230	This building has had several additions attached over the years.
Building type	<input checked="" type="checkbox"/> Single family, ranch <input type="checkbox"/> Single family, two story <input type="checkbox"/> Single family, split level <input type="checkbox"/> See comments	
Construction	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Frame <input type="checkbox"/> Brick <input type="checkbox"/> See comments	

Utilities

Description	Source / type	Comments
Water	<input type="checkbox"/> Not tested <input type="checkbox"/> Public <input checked="" type="checkbox"/> Well <input checked="" type="checkbox"/> See comments	Poor water quantity Recommend: Seek plumber/well specialist to determine the cause of the poor water quantity.
Electricity	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Public Utility <input type="checkbox"/> Private cooperative <input type="checkbox"/> See comments	
Gas/ Fuel	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Propane <input checked="" type="checkbox"/> See comments	
Sewage	<input checked="" type="checkbox"/> Excluded from this inspection <input type="checkbox"/> Private sanitary system <input type="checkbox"/> See comments	Rusted Oil tank in crawl space. Monitor tank for leaks

Weather at time of inspection

Temperature	Start Time	General Conditions
70	9:00	Fair

Client Information

Buyer: J & J Public	For Sale By Owner:	Seller: Brenda Beware
2 Flip Rd..		
Biddeford, Maine		

Note: red boxes throughout this report indicating damage or items marked as needing repair may result in further damage or may present a health or safety hazard if not repaired.

Landscaping

Item		Comments
Slope away from house	<input checked="" type="checkbox"/>	
Front yard	<input checked="" type="checkbox"/>	
Back yard	<input checked="" type="checkbox"/>	
Side yards	<input checked="" type="checkbox"/>	
Bushes/ shrubs	<input checked="" type="checkbox"/>	Needs trimming 2 ft away from house.
Trees	<input checked="" type="checkbox"/>	
Hot tub	<input type="checkbox"/>	
Drainage ditch	<input type="checkbox"/>	
Wooded area	<input checked="" type="checkbox"/>	
Lake	<input type="checkbox"/>	
Playground	<input type="checkbox"/>	
See additional comments below	<input type="checkbox"/>	



Pavements and Constructs



Item		Comments
Sidewalks	<input type="checkbox"/>	
Driveway	<input checked="" type="checkbox"/>	
Front porch	<input type="checkbox"/>	
Rear porch	<input type="checkbox"/>	
Deck	<input checked="" type="checkbox"/>	
Patio	<input type="checkbox"/>	
Fence	<input type="checkbox"/>	
Curbs	<input type="checkbox"/>	
Retaining wall	<input type="checkbox"/>	
Courtyard	<input type="checkbox"/>	
Gazebo	<input type="checkbox"/>	Handrail is required for stairs with 4 or more risers. Missing Handrail.
Culvert	<input type="checkbox"/>	Guardrail is required when deck is 30 " from ground. Max opening on guardrail is 4 ".
Playground equipment	<input type="checkbox"/>	
See additional comments below	<input type="checkbox"/>	



Additional comments

Roof

Covering, Structure, and Attachments

Item / Attribute	Type / Style	Condition	Comments
Roof structure	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Pitched <input checked="" type="checkbox"/> Flat, <2/12 <input checked="" type="checkbox"/> See comments	<input type="checkbox"/> Good/ fair <input type="checkbox"/> Warped <input type="checkbox"/> Damage <input checked="" type="checkbox"/> Needs repair	
Roof covering	<input type="checkbox"/> Not inspected <input checked="" type="checkbox"/> Asphalt shingles <input checked="" type="checkbox"/> Rolled roofing <input type="checkbox"/> See comments	<input type="checkbox"/> Good/ fair <input type="checkbox"/> Missing pcs. <input type="checkbox"/> Damage <input checked="" type="checkbox"/> Needs repair	
Remaining life Estimated	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Greater than five years <input checked="" type="checkbox"/> See comments		
Slope	<input type="checkbox"/> Not applicable <input checked="" type="checkbox"/> Medium, steep <input checked="" type="checkbox"/> Flat <input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Normal <input type="checkbox"/> Abnormal <input type="checkbox"/> Not visible <input type="checkbox"/> Unstable	
Chimney	<input type="checkbox"/> None <input checked="" type="checkbox"/> Stone <input type="checkbox"/> Cap/ screen <input checked="" type="checkbox"/> See comments <input checked="" type="checkbox"/> Location/height NOT acceptable	<input type="checkbox"/> Good/ Fair <input type="checkbox"/> Minor wear <input checked="" type="checkbox"/> Out of spec <input type="checkbox"/> Unstable <input type="checkbox"/> Chimney is unstable.	
Gutters, downspouts	<input type="checkbox"/> None <input checked="" type="checkbox"/> Metal <input checked="" type="checkbox"/> See comments	<input type="checkbox"/> Good/ fair <input checked="" type="checkbox"/> Inadequate <input type="checkbox"/> Damage <input checked="" type="checkbox"/> Needs repair	crack in mortar Chimney height not acceptable. must be 3 ft above roof
Ventilation	<input type="checkbox"/> None <input checked="" type="checkbox"/> Static <input type="checkbox"/> Powered <input type="checkbox"/> See comments	<input type="checkbox"/> Good <input type="checkbox"/> Satisfactory <input checked="" type="checkbox"/> Marginal <input type="checkbox"/> Inadequate	

Inspected from

Item / Attribute	R	C	V	Location	R	C	V	Visibility	Comments
R = Roof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ladder	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Good	
C = Chimney	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ground	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fair	
V = Ventilators	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Roof	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	See comments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Not visible	

Additional comments

See additional roof pictures

General

Item	F	S	B	Description	Item	F	S	B	Description
<input checked="" type="checkbox"/> Siding				Not applicable	<input checked="" type="checkbox"/> Foundation				Access Control
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Wood		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Block
				Brick					Brick
				Vinyl / metal siding					See comments
				See comments					
<input checked="" type="checkbox"/> Windows, Doors				Not inspected	<input checked="" type="checkbox"/> Fascia, Soffits Trim				Not applicable
				Vinyl/Metal		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Wood
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Wood					Vinyl
				See comments					See comments
<input checked="" type="checkbox"/> Faucets				Tested	<input checked="" type="checkbox"/> REPAIRS NEEDED				None
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		No pressure		<input checked="" type="checkbox"/>			Paint (trim doors windows siding)
				No tested					Siding (missing broken holes)
				See comments					See comments

Additional Comments

F = Front, S = Sides, B = Back

Garages, Sheds, Outbuildings

Item	F	S	B	Description	Item	F	S	B	Description
<input checked="" type="checkbox"/> Garage, shed				Not applicable	<input checked="" type="checkbox"/> REPAIRS NEEDED				Not applicable
	<input checked="" type="checkbox"/>			Attached		<input checked="" type="checkbox"/>			Paint (trim doors windows siding)
				Storage shed				<input checked="" type="checkbox"/>	Doors
				See comments					O.H. Door (opener springs door)
<input checked="" type="checkbox"/> Overhead door				Not applicable	<input checked="" type="checkbox"/> Floor				Not applicable
	<input checked="" type="checkbox"/>			Wood		<input checked="" type="checkbox"/>			Minor/settling cracks
				Fiberglass					Good condition
	<input checked="" type="checkbox"/>			See comments					See comments
<input checked="" type="checkbox"/> Door opener	<input checked="" type="checkbox"/>			Tested	<input type="checkbox"/> Safety eye				Tested
				Not tested					Not tested
				None/ Not working					None/ Not working
<input checked="" type="checkbox"/> GFCI outlets*				Tested	<input checked="" type="checkbox"/> O.H. Door spring	<input checked="" type="checkbox"/>			Not applicable
	<input checked="" type="checkbox"/>			None/ Not working					Torsion
				See comments					Extension (recommend replacing with torsion springs)

Additional Comments

The overhead door has a broken window pane. The entrance door to the living quarters is not fire rated and should be replaced. Safety Hazard: Main electrical cover is off.

Exterior structure is wood shingle and wood trim. Some fascia and trim are in need of repair.

Recommend: Install carbon monoxide detector

F = Front, S = Sides, B = Back



Bedrooms

General, Interior

Item / Attribute	Bedroom Number					Description	Comments
	1	2	3	4	5		
Location	X	X				First floor	The number at the top of each column refers to the bedroom number
						Second Floor	
			X			Master bedroom	
						See comments	
Electrical Outlets						AFCI protected	Good
	X	X	X			Not AFCI	Fair
						See comments	Marginal
							Poor
Walls/Ceiling						Good	Good
						Minor cracks	Fair
	X	X	X			Damaged	Marginal
						See comments	Poor
							Fire damage
Floors						Good	Good
						Fair	Fair
						Uneven	Marginal
	X	X	X			See comments	Poor
							Carpet stains
Alarms Detectors and Sensors						Smoke	Good
						CO	Fair
						Combustible gas	Marginal
	X	X	X			See comments	Poor
							No smoke detectors

Additional comments

		
Fire damaged bedroom 1		Bedroom 2
Master Bedroom		

Interior rooms

General, Interior

Item / Attribute	Rooms					Description	Comments Room Number
	1	2	3	4	5		
Location	X	X				First floor	The number at the top of each column refers to the room number
						Second Floor	
						Master bedroom	
						See comments	
Electrical Outlets						AFCI protected	Good
	X	X				Not AFCI	Fair
	X	X				See comments	Marginal Abnormal
Walls/Ceiling						Good	Good
	X	X				Minor cracks	Fair
						Damaged	Marginal
						See comments	Poor
Floors	X	X				Good	Good
						Fair	Fair
						Uneven	Marginal
						See comments	Poor
Alarms Detectors and Sensors	X					Smoke	Good
						CO	Fair
						Combustible gas	Marginal
						See comments	Poor




Hanging light fixtures

Additional comments

		
	Hanging lights	Front Foyer fire damage
		
Water damage in ceiling & wall rear door entrance		Stained hallway carpets

Access, Insulation, Interior

Item / Attribute	Type / Style	Condition	Comments
Access	<input type="checkbox"/> No access	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Hall	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Garage	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Structure	<input type="checkbox"/> Not applicable	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Rafter	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Truss (prefabricated)	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Floor	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Good	
	<input type="checkbox"/> Eaves only	<input checked="" type="checkbox"/> Fair	
	<input type="checkbox"/> None	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Lighting	<input type="checkbox"/> None	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Switched	<input checked="" type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Pull chain	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Inadequate	
Insulation	<input type="checkbox"/> None visible	<input type="checkbox"/> Good	
	<input type="checkbox"/> Cellulose	<input checked="" type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Fiberglass	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Moisture	<input type="checkbox"/> Yes	<input type="checkbox"/> Dry	
	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Stains	
	<input type="checkbox"/> Other	<input type="checkbox"/> Moldy	
	<input checked="" type="checkbox"/> See comments	<input type="checkbox"/> Moist/ wet	
Attic baffles	<input checked="" type="checkbox"/> None visible	<input type="checkbox"/> Good	
	<input type="checkbox"/> Styrene foam	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Not needed	<input type="checkbox"/> Marginal/ poor	
	<input type="checkbox"/> See comments	<input type="checkbox"/> None	
Fan/ Attic fan	<input type="checkbox"/> Yes	<input type="checkbox"/> Tested	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Not tested	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Not working	

Additional comments

Lots of storage in the attic area

Note: RED check boxes, when checked, indicate that attention is needed. Failure to attend to these items may result in damage or create a safety hazard.

Item / Attribute	Bathroom Number					Description	Comments					Bathroom Number	Condition	Comments	
	1	2	3	4	5		1	2	3	4	5				
Location	<input checked="" type="checkbox"/>					First floor									
						Basement full bath	The number at the top of each column refers to the bathroom number								
		<input checked="" type="checkbox"/>				Master bedroom									
						See comments									
Electrical Outlets						GFCI protected							Good		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Not GFCI							Unfinished		
						See comments							Marginal		
													<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	
Toilet	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Std. gravity flush	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					Good		
						Pressure flush							Unfinished		
						O.H. gravity flush							Marginal		
						See comments							<input checked="" type="checkbox"/>		
Plumbing						No leak visible							Good/ fair	Missing drain pipe	
	<input checked="" type="checkbox"/>					Leak visible							Unfinished	leaking faucets	
		<input checked="" type="checkbox"/>				Corrosion							Leaks	missing drain stops	
	<input checked="" type="checkbox"/>					See comments		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	broken faucets	
Shower and Tub	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Shower							Good		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Bath tub							Unfinished		
						Spa	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					Marginal	Needs repair	
	<input checked="" type="checkbox"/>					See comments							<input checked="" type="checkbox"/>		
Floor and Walls	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Floor							Good	floor soft around toilet	
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Wall							Unfinished		
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Water stains							Marginal		
		<input checked="" type="checkbox"/>				See comments	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>		
Windows	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Glazing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					Good		
						Sill							Unfinished		
						Treatments							Marginal		
						See comments							<input checked="" type="checkbox"/>		
Accessories	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				Towel hangers							Good		
						Mirror	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>					Fair		
						Other							Marginal		
						See comments							<input checked="" type="checkbox"/>		




Sample Report

Additional Comments

See bathroom pictures

RED check boxes, when checked, indicate that attention is needed. Failure to attend to these items may result in damage or create a safety hazard. Absence of GFCI electrical outlets does not constitute a defect or deficiency. However, GFCI outlets are r

General

Item / Attribute	Description	Condition	Comments
Floors	<input checked="" type="checkbox"/> Sheet/ VCT	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Carpet	<input type="checkbox"/> Safety hazard!	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Damaged	
Walls/ Ceilings	<input checked="" type="checkbox"/> Plaster, drywall	<input type="checkbox"/> Good	
	<input type="checkbox"/> Masonry	<input type="checkbox"/> Minor cracks	
	<input checked="" type="checkbox"/> Wood	<input checked="" type="checkbox"/> Damaged	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Unstable	
Doors	<input checked="" type="checkbox"/> Interior doors	<input type="checkbox"/> Good	
	<input type="checkbox"/> Six panel	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Wood	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Poor	
Fireplace	<input checked="" type="checkbox"/> Masonry	<input type="checkbox"/> Good / Fair	
	<input type="checkbox"/> Woodburner	<input type="checkbox"/> Need to clean	
	<input type="checkbox"/> None	<input type="checkbox"/> Cracks	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Repair needed	
Fireplace	<input type="checkbox"/> Masonry, brick	<input type="checkbox"/> Good / Fair	
	<input type="checkbox"/> Wood burner	<input type="checkbox"/> Need to clean	
	<input type="checkbox"/> None	<input type="checkbox"/> Cracks	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Repair needed	
Alarms Detectors and Sensors	<input checked="" type="checkbox"/> Smoke	<input checked="" type="checkbox"/> Tested	
	<input type="checkbox"/> Carbon Monoxide	<input type="checkbox"/> Not tested	
	<input type="checkbox"/> Combustible gas	<input type="checkbox"/> Not applicable	
	<input checked="" type="checkbox"/> None	<input checked="" type="checkbox"/> Not working	
Moisture	<input checked="" type="checkbox"/> Old stains	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Damp, moist	<input type="checkbox"/> Marginal	
	<input checked="" type="checkbox"/> Fresh stains	<input checked="" type="checkbox"/> Poor	
Whole house Fan	<input type="checkbox"/> Yes	<input type="checkbox"/> Tested	
	<input type="checkbox"/> No	<input type="checkbox"/> Not tested	

Additional comments

Moisture has entered this house in several areas. Seek professional to determine the extent of the damage after removing walls and ceilings. Fire damage in two areas need repair.

General

Item / Attribute	Description	Condition	Comments
Floor	<input type="checkbox"/> Sheet/VCT	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Carpet	<input type="checkbox"/> Uneven	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Damaged	
Electrical outlets in counter and sink areas	<input type="checkbox"/> GFCI protected	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Not GFCI	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Tested	<input checked="" type="checkbox"/> Marginal	
	<input checked="" type="checkbox"/> See comments	<input checked="" type="checkbox"/> Needs repair	Wire reversal
Plumbing	<input type="checkbox"/> No leaks visible	<input type="checkbox"/> Good	
	<input type="checkbox"/> Leaks visible	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Corrosion	<input type="checkbox"/> Marginal	
	<input checked="" type="checkbox"/> See comments	<input checked="" type="checkbox"/> Poor	Poor water pressure & quantity
Counter tops	<input checked="" type="checkbox"/> Laminated	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Solid surface	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Marble/stone	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Cabinets	<input checked="" type="checkbox"/> Wood	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Laminated MDF	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Cabinet grade plywood	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Smoke/ CO/ Combustible gas Detectors	<input checked="" type="checkbox"/> Smoke	<input checked="" type="checkbox"/> Tested	
	<input type="checkbox"/> Carbon Monoxide	<input type="checkbox"/> Not tested	
	<input type="checkbox"/> Combustible gas	<input type="checkbox"/> Not applicable	
	<input type="checkbox"/> None	<input type="checkbox"/> Not working	

Additional Comments





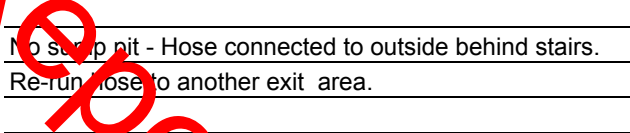
Note: RED check boxes, when checked, indicate that attention is needed. Failure to attend to these items may result in damage or create a safety hazard.

Item / Attribute	Type / Description	Condition	Comments
Location	<input checked="" type="checkbox"/> Basement	<input checked="" type="checkbox"/> Inspected	
	<input checked="" type="checkbox"/> 1st floor closet	<input type="checkbox"/> Not inspected	
	<input type="checkbox"/> 2nd floor	<input type="checkbox"/> Not applicable	
	<input type="checkbox"/> See comments	<input type="checkbox"/> See comments	
Walls	<input type="checkbox"/> Concrete	<input type="checkbox"/> Good	
	<input type="checkbox"/> Block	<input type="checkbox"/> Minor cracks	
	<input checked="" type="checkbox"/> Covered	<input type="checkbox"/> Deep cracks	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Needs repair	Missing wall
Floor drain	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> Good	
	<input type="checkbox"/> None visible	<input checked="" type="checkbox"/> Fair	
	<input type="checkbox"/> Unable to inspect	<input type="checkbox"/> Rusted	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Moisture	<input type="checkbox"/> None visible	<input type="checkbox"/> Good	
	<input type="checkbox"/> Damp / wet	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Stains	<input checked="" type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Floor	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Good	
	<input type="checkbox"/> Earth	<input checked="" type="checkbox"/> Fair	
	<input type="checkbox"/> Earth w/ vapor barrier	<input type="checkbox"/> Uneven	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Damaged	
Electrical	<input type="checkbox"/> 120V 15A circuit	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> 120V 20A circuit	<input type="checkbox"/> Fair	
	<input type="checkbox"/> 240V circuit	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Laundry connections	<input checked="" type="checkbox"/> Hot water	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Cold water	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Laundry drain	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Sink	<input checked="" type="checkbox"/> Steel/Porcelain	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Plastic	<input type="checkbox"/> Fair	
	<input type="checkbox"/> None	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	





Additional Comments:

General

Item / Attribute	Description	Condition	Comments
Main shut-off valve(s)	<input type="checkbox"/> Supply side	<input type="checkbox"/> Good / fair	
	<input checked="" type="checkbox"/> House side	<input type="checkbox"/> Leaks	
	<input type="checkbox"/> NA	<input checked="" type="checkbox"/> Corrosion	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Unable to close	
Piping	<input checked="" type="checkbox"/> No leaks visible	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Leaks visible	<input type="checkbox"/> Fair	
	<input type="checkbox"/> NA	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Soil stack (vent), drain	<input type="checkbox"/> Iron	<input checked="" type="checkbox"/> Good	Electrical boxes exposed
	<input checked="" type="checkbox"/> Plastic	<input type="checkbox"/> Fair	
	<input type="checkbox"/> NA	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Sump pump	<input checked="" type="checkbox"/> Electric	<input checked="" type="checkbox"/> Not tested	
	<input type="checkbox"/> Battery	<input type="checkbox"/> Not connected	
	<input type="checkbox"/> Backup system	<input type="checkbox"/> No cover	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Broken	
Water heater	<input type="checkbox"/> Electric	<input type="checkbox"/> Good / fair	No sump pit - Hose connected to outside behind stairs. Re-run hose to another exit area.
	<input checked="" type="checkbox"/> In heat system	<input type="checkbox"/> Leaks	
	<input type="checkbox"/> Pressure relief	<input type="checkbox"/> Corrosion	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Replace	
Water heater	<input checked="" type="checkbox"/> Pressure relief	<input type="checkbox"/> Good / fair	Boiler Mate Hot Water Maker Separately zoned.
	<input checked="" type="checkbox"/> Drain valve	<input type="checkbox"/> Leaks	
	<input type="checkbox"/> Dielectric fittings	<input type="checkbox"/> Corrosion	
	<input type="checkbox"/> Age	<input type="checkbox"/> Replace	
Capacity	<input checked="" type="checkbox"/> On Demand	<input type="checkbox"/> See comments	
Water meter	<input type="checkbox"/> Inspected	<input type="checkbox"/> See comments	
Service piping	<input type="checkbox"/> Inspected	<input type="checkbox"/> See comments	
Water softener	<input type="checkbox"/> Not applicable	<input type="checkbox"/> See comments	

Additional Comments

Filter needs replacement		Hot water tank covered	

Excess debris in crawlspace. Recommend: clean area.

Note: RED check boxes, when checked, indicate that attention is needed. Failure to attend to these items may result in damage or create a safety hazard.

Heating

Item / Attribute	Description Type	Condition	Comments
Heat source	<input type="checkbox"/> Forced air furnace	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Gravity furnace	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> Electric baseboard	<input type="checkbox"/> Damage	
	<input checked="" type="checkbox"/> Boiler	<input type="checkbox"/> Needs Repair	
Brand	<input checked="" type="checkbox"/> Crown Boiler	<input checked="" type="checkbox"/> Good	
Model	<input checked="" type="checkbox"/> CTPB-3	<input type="checkbox"/> Marginal	
BTU's (input)	<input checked="" type="checkbox"/> 80,000	<input type="checkbox"/> Damage	
Serial #	<input checked="" type="checkbox"/> 693 9360KR	<input type="checkbox"/> Poor	
Humidifier	<input type="checkbox"/> Drum humidifier	<input type="checkbox"/> Good	
	<input type="checkbox"/> Cascade humidifier	<input type="checkbox"/> Leaks	
	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Corrosion	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Service piping	<input type="checkbox"/> Black pipe	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Flexible	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Flue piping	<input type="checkbox"/> Plastic	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Galvanized steel	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Mixed types	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Distribution	<input type="checkbox"/> Sheet metal	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Flex duct	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> Zoned	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	



Excessive rust on oil tank.

Cooling

Item Attribute	Description	Condition	Comments
System type	<input type="checkbox"/> Whole house	<input type="checkbox"/> Good	
	<input type="checkbox"/> Window	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Number of units	<input type="checkbox"/> One	<input type="checkbox"/> Good	
	<input type="checkbox"/> Two	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Three	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> Four	<input type="checkbox"/> Poor	

Additional Comments




Service

Item / Attribute	Type / Description	Condition	Comments
Service location	<input checked="" type="checkbox"/> Garage	<input checked="" type="checkbox"/> Good	
Brand name	<input checked="" type="checkbox"/> Square D	<input type="checkbox"/> Fair	
Main disconnects (#)	<input checked="" type="checkbox"/> One	<input type="checkbox"/> Marginal	
System Voltage	<input checked="" type="checkbox"/> 240/120VΔ, 1Ø	<input type="checkbox"/> Poor	
Main breaker	<input checked="" type="checkbox"/> Fuse	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Breaker	<input type="checkbox"/> Fair	
Ampere rating	<input checked="" type="checkbox"/> 200	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Service	<input checked="" type="checkbox"/> Overhead, cable	<input checked="" type="checkbox"/> Good	
	<input type="checkbox"/> Overhead, conduit	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Underground	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Bonding jumper on water meter	<input type="checkbox"/> Yes	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Not applicable	<input type="checkbox"/> Loose	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Broken	
Made electrode(s)	<input type="checkbox"/> Water line	<input checked="" type="checkbox"/> Good	<p>Safety Hazard - Panel Cover is Off Recommend: Replace Cover</p>
	<input checked="" type="checkbox"/> Ground rod	<input type="checkbox"/> Fair	
	<input type="checkbox"/> None	<input type="checkbox"/> Loose	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Breakers	<input checked="" type="checkbox"/> 120V 20A circuit	<input type="checkbox"/> Tested	
	<input type="checkbox"/> AFCI	<input checked="" type="checkbox"/> Not tested	
	<input type="checkbox"/> Specialty breakers	<input type="checkbox"/> None	
	<input type="checkbox"/> See comments	<input type="checkbox"/> See comments	
Other	<input type="checkbox"/> CATV grounding	<input type="checkbox"/> Inspected	
	<input type="checkbox"/> Telephone grounding	<input type="checkbox"/> Not inspected	
	<input type="checkbox"/> Lightning arrestor(s)	<input type="checkbox"/> Not applicable	
	<input type="checkbox"/> See comments	<input type="checkbox"/> See comments	

Additional Comments:

Safety Hazard: Main electrical panel cover is off. Recommend: Replace panel cover.

Electrical issues: There are many electrical issues throughout the house, exterior and basement. Exposed wires, hanging lights, reversed wiring, no grounds, no GFCI in bathrooms, kitchen, garage or outdoor outlets. Recommend: Seek electrician to repair or replace as needed.

Item / Attribute	Type / Description	Condition	Comments
Floor	<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Earth	<input type="checkbox"/> Minor cracks	
	<input type="checkbox"/> Earth w/ vapor barrier	<input type="checkbox"/> Deep cracks	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Walls	<input type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Block	<input type="checkbox"/> Minor cracks	
	<input checked="" type="checkbox"/> Covered	<input type="checkbox"/> Deep cracks	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Windows	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Good	
	<input type="checkbox"/> Block	<input type="checkbox"/> Minor cracks	
	<input type="checkbox"/> Covered	<input type="checkbox"/> Deep cracks	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Floor drain	<input type="checkbox"/> Yes	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> None visible	<input type="checkbox"/> Fair	
	<input type="checkbox"/> Unable to inspect	<input type="checkbox"/> Rusted	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Moisture	<input type="checkbox"/> None visible	<input type="checkbox"/> Good	
	<input checked="" type="checkbox"/> Damp/ wet	<input checked="" type="checkbox"/> Fair	
	<input type="checkbox"/> Stains	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Poor	
Support beam	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> Good / fair	
	<input checked="" type="checkbox"/> Wood	<input type="checkbox"/> Sag/deflection	
	<input type="checkbox"/> Concrete	<input type="checkbox"/> Cracks	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Needs repair	
Lighting	<input checked="" type="checkbox"/> Incandescent	<input type="checkbox"/> Good	
	<input type="checkbox"/> Fluorescent	<input checked="" type="checkbox"/> Fair	
	<input type="checkbox"/> Portable lamps	<input checked="" type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input type="checkbox"/> Inadequate	
Ventilation	<input type="checkbox"/> Foundation vents	<input type="checkbox"/> Good	
	<input type="checkbox"/> Powered	<input type="checkbox"/> Fair	
	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Marginal	
	<input type="checkbox"/> See comments	<input checked="" type="checkbox"/> Poor	

Additional Comments:

Crawl space should be cleaned and exposed electrical equipment should be properly covered and secured.



Tub caulking



Stained ceiling



Check plumbing & fixtures



Master Bath



Ceiling leak



Check flooring near toilet



damaged trim



missing gutters



Needs vent cover



bushes need trimming



broken garage window

Chimney & Fireplace



Chimney not high enough..



Chimney in serious need of a cleaning..



furnace chimney...



Smoke stained chimney..

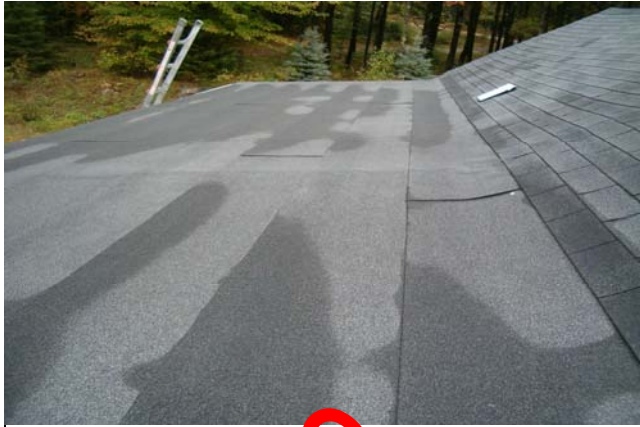


cracked mortar in chimney...



Cracked hearth...

Roof Pictures



front roof...



rear roof - Seam open...



Spongy area over rear flat roof...



Improper roof installation....



Improper valley installation...



Improper installation....

Sample Report

Roof Pictures



Improper Installation....



Shingle falling off and missing....



Vent on flat roof over bathroom (moisture entry area)...



Seam not tared....



gutter not pitched correctly....



Leaking gutter in center span....

Report Summary

Job: Report Sample

This report is based on a visual, non-invasive inspection of the apparent condition of the readily accessible installed systems and components of the property existing at the time of the inspection. Latent and concealed defects and deficiencies are excluded from this inspection report.

This report will include all "Major Concerns" and "Safety Hazards". Minor concerns and energy notes may or may not be included in the summary report.

Major Concerns:

- Poor water quantity. A water quantity test should be conducted to determine if the existing well can produce the minimum standards of 600 gallons within a 2 hour period.
Recommend: Seek well specialist or plumber to determine the cause of insufficient water supply and take corrective action.
- Roof. The roof is in need of repair. Seams are open and the rolled roofing was installed incorrectly. Valley is installed incorrectly. Recommend: Seek roof professional and replace or repair as needed.
- Fire damage. Wall, floor, ceiling and window frame damage from fire in foyer and bedroom. Recommend: Repair as needed.
- Floors. Water stains on several carpets and wood floor damage in hallway. Recommend: Repair or replace as needed.
- Ceilings. Several ceiling areas have moisture damage. Hallway leak still active. Recommend: Repair all ceilings as needed.
- Chimney. The chimney does not meet height minimum requirements. Recommend: Extend chimney to conform to code, 3 ft. above roof, 2 ft. above any part of the building within 10 ft.
- Chimney. In addition, the chimney needs repair in mortar, cracked hearth and needs a cleaning very badly.

Safety Hazards:

- Electrical lights, wiring, and open work boxes' are in need of repair. Recommend: Seek electrician to repair as needed.
- Main electrical panel door is off. Recommend: Install electrical door on main panel.
- Rear Deck has missing rail. Recommend: Install rail.
- GFCI – Bathrooms, kitchen sink area, outdoor outlets and garage outlets require GFCI outlets.
- Smoke Detectors. There is only one smoke detector in the house. Recommend: Install smoke detectors in bedrooms and consider installing a carbon monoxide detector.
- Oil tank rusted. Recommend: Monitor for leaks

As a value added service, Atlantic Home Inspection Company is providing you with a complementary "Homeowner's Handbook". It's a guide to preserving the value of your new home and our way of saying, "Thank You" for your business.