



Blueberry River First Nations

ON-RESERVE HOUSING POLICY



Blueberry River First Nations
PO Box 3009
Buick Creek, BC
V0C 2R0
T: 250-630-2584
F: 250-630-2588



Unit Condition Report

Street Address

Tenants Name

Home Phone

Other Phone

Email Address

Report ID# (N,E)

Move in Date

Insert Photo of Property

KEY: Y=INSPECTED N=NOT INSPECTED R=REPAIR / REPLACE

ROOFING

ROOFING	Y	N	R
Roof Covering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flashing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chimneys, Penetrations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof Drainage Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Roof Material	xx	Viewed Roof From:	xx
3 Tab Fiberglass	<input type="checkbox"/>	Ground	<input type="checkbox"/>
Asphalt Shingle	<input type="checkbox"/>	Walked the roof	<input type="checkbox"/>
Architectural	<input type="checkbox"/>	Ladder	<input type="checkbox"/>
Roll Roofing	<input type="checkbox"/>	Binoculars	<input type="checkbox"/>
Half-Lap	<input type="checkbox"/>		
Built-up	<input type="checkbox"/>		
Slate	<input type="checkbox"/>		
Rubber Membrane	<input type="checkbox"/>		
Concrete	<input type="checkbox"/>		
Tile	<input type="checkbox"/>		
Tar and Gravel	<input type="checkbox"/>		
Cedar Shakes	<input type="checkbox"/>		
Metal	<input type="checkbox"/>		
Asbestos	<input type="checkbox"/>		
Wood Shakes	<input type="checkbox"/>		
Modified Bitumen	<input type="checkbox"/>		
Ceramic / Clay	<input type="checkbox"/>		
Asphalt / Fiberglass	<input type="checkbox"/>		
Corrugated Fiberglass	<input type="checkbox"/>		

SKYLIGHTS	xx	EXT. CHIMNEY	xx
None	<input type="checkbox"/>	None	<input type="checkbox"/>
One	<input type="checkbox"/>	Masonry Stucco	<input type="checkbox"/>
Two	<input type="checkbox"/>	Block	<input type="checkbox"/>
Three	<input type="checkbox"/>	Metal Flue Pipe	<input type="checkbox"/>
More than three	<input type="checkbox"/>	Brick	<input type="checkbox"/>
Ventilating	<input type="checkbox"/>	Comp. Board	<input type="checkbox"/>
Fixed	<input type="checkbox"/>	EIFS (Stucco)	<input type="checkbox"/>
Homemade	<input type="checkbox"/>	Metal Siding	<input type="checkbox"/>
Motorized	<input type="checkbox"/>	Stone	<input type="checkbox"/>
Solar Tube	<input type="checkbox"/>	Cement Fiber	<input type="checkbox"/>
Custom Made	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Roof Windows	<input type="checkbox"/>	Panels	<input type="checkbox"/>
	<input type="checkbox"/>	Other	<input type="checkbox"/>

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EXTERIOR

EXTERIOR	Y	N	R
Wall Cladding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flashing & Trim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Balconies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Railings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porch & Patio Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walkways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Covers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driveways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vegetation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Retaining Walls & Related Structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Porches	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eaves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Soffit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fascias	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SIDING STYLE	XX	SIDING MATERIAL	XX
Bevel	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Channel	<input type="checkbox"/>	Vinyl	<input type="checkbox"/>
Drop	<input type="checkbox"/>	EIFS	<input type="checkbox"/>
Lap	<input type="checkbox"/>	Cement Fiber	<input type="checkbox"/>
Log	<input type="checkbox"/>	Masonry Panels	<input type="checkbox"/>
Ship Lap	<input type="checkbox"/>	Logs	<input type="checkbox"/>
Shakes	<input type="checkbox"/>	Aluminum	<input type="checkbox"/>
Shingles	<input type="checkbox"/>	Shingles	<input type="checkbox"/>
Vertical Lap	<input type="checkbox"/>	Cedar	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Shakes	<input type="checkbox"/>
Block & Mortar	<input type="checkbox"/>	Full Brick	<input type="checkbox"/>
Tongue & Groove	<input type="checkbox"/>	Brick Veneer	<input type="checkbox"/>
German Lap	<input type="checkbox"/>	Asphalt	<input type="checkbox"/>
T 1-11	<input type="checkbox"/>	Stone	<input type="checkbox"/>
Reverse Board & Batten	<input type="checkbox"/>	Metal	<input type="checkbox"/>
Brick	<input type="checkbox"/>	Corrugated Metal	<input type="checkbox"/>
Cement Stucco	<input type="checkbox"/>	Plywood	<input type="checkbox"/>
Batten	<input type="checkbox"/>	Unfinished	<input type="checkbox"/>

EXT. DOORS	XX	APPURTENANCES	XX
Wood	<input type="checkbox"/>	Deck	<input type="checkbox"/>
Steel	<input type="checkbox"/>	Deck with Steps	<input type="checkbox"/>
Hollow Core	<input type="checkbox"/>	Sidewalk	<input type="checkbox"/>
Solid	<input type="checkbox"/>	Patio	<input type="checkbox"/>
Single Pane	<input type="checkbox"/>	Porch	<input type="checkbox"/>
Insulated Glass	<input type="checkbox"/>	Covered Porch	<input type="checkbox"/>
Plastic Comp.	<input type="checkbox"/>	Ramp	<input type="checkbox"/>
Insulated Door	<input type="checkbox"/>	Steps w/ Railing	<input type="checkbox"/>
Fiberglass	<input type="checkbox"/>	Balcony	<input type="checkbox"/>
Insul. Fiberglass	<input type="checkbox"/>	Other	<input type="checkbox"/>

DRIVEWAYS	XX
Asphalt	<input type="checkbox"/>
Gravel	<input type="checkbox"/>
Brick	<input type="checkbox"/>
Dirt	<input type="checkbox"/>
Cobblestone	<input type="checkbox"/>
Street Parking	<input type="checkbox"/>
Parking Lot	<input type="checkbox"/>
Shared Drive	<input type="checkbox"/>
Not Visible	<input type="checkbox"/>
Other	<input type="checkbox"/>

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STRUCTURAL COMPONENTS

STRUCTURAL COMPONENTS	Y	N	R
Foundation/Basement/ Crawlspace	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ceilings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Columns or Piers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Roof Structure Including Attic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOUNDATION	XX	WALL STRUCTURE	XX
Masonry Block	<input type="checkbox"/>	Brick	<input type="checkbox"/>
Pressure Treated Wood	<input type="checkbox"/>	Block	<input type="checkbox"/>
Poured Concrete	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Brick	<input type="checkbox"/>	2x4 Wood	<input type="checkbox"/>
Skirting	<input type="checkbox"/>	2x6 Wood	<input type="checkbox"/>
Concrete Slab	<input type="checkbox"/>	Metal Studs	<input type="checkbox"/>
Aesthetic Block	<input type="checkbox"/>	Diameter Logs	<input type="checkbox"/>
Rock	<input type="checkbox"/>		<input type="checkbox"/>

FLOOR STRUCTURE	XX	COLUMNS/PIERS	XX
2x6	<input type="checkbox"/>	Wood Piers	<input type="checkbox"/>
2x8	<input type="checkbox"/>	Brick Piers	<input type="checkbox"/>
2x10	<input type="checkbox"/>	Supporting Walls	<input type="checkbox"/>
2x12	<input type="checkbox"/>	Dry Stacked Stone	<input type="checkbox"/>
Wood Beams	<input type="checkbox"/>	Dry Stacked Brick	<input type="checkbox"/>
Engineered Floor Joists	<input type="checkbox"/>	Dry Stacked Block	<input type="checkbox"/>
Steel I-Beam	<input type="checkbox"/>	Mortared Material	<input type="checkbox"/>
Slab Floor	<input type="checkbox"/>	Block Supports	<input type="checkbox"/>
Concrete Floor	<input type="checkbox"/>	Steel Screw Jacks	<input type="checkbox"/>
Not Visible	<input type="checkbox"/>	Steel Lally Columns	<input type="checkbox"/>

ROOF STRUCTURE	XX	TYPE OF ROOF	XX
Engineered Trusses	<input type="checkbox"/>	Gable Roof	<input type="checkbox"/>
2x4 Rafters	<input type="checkbox"/>	Gable w/Dormers	<input type="checkbox"/>
2x6 Rafters	<input type="checkbox"/>	Gable w/ Addition	<input type="checkbox"/>
2x8 Rafters	<input type="checkbox"/>	Double Gable	<input type="checkbox"/>
2x10 Rafters	<input type="checkbox"/>	Multiple Dormers	<input type="checkbox"/>
2x12 Rafters	<input type="checkbox"/>	Hip Roof	<input type="checkbox"/>
Steel Trusses	<input type="checkbox"/>	Shed Roof	<input type="checkbox"/>
Lateral Bracing	<input type="checkbox"/>	Gambrel Roof	<input type="checkbox"/>
Common Board	<input type="checkbox"/>	Round	<input type="checkbox"/>
Wood Slats	<input type="checkbox"/>	Geodesic Dome	<input type="checkbox"/>
Plywood Sheathing	<input type="checkbox"/>	A-Frame	<input type="checkbox"/>
Collar Ties	<input type="checkbox"/>	Flat Roof	<input type="checkbox"/>
Not Visible	<input type="checkbox"/>	Other	<input type="checkbox"/>

CEILING STRUCTURE	XX	CRAWLSPACE VIEWED FROM	XX
2x4	<input type="checkbox"/>	Crawled	<input type="checkbox"/>
2x6	<input type="checkbox"/>	From Entry	<input type="checkbox"/>
2x8	<input type="checkbox"/>	Unsafe Conditions	<input type="checkbox"/>
2x10	<input type="checkbox"/>	No Crawlspace	<input type="checkbox"/>
Diameter Logs	<input type="checkbox"/>	Standing Water	<input type="checkbox"/>
Not Visible	<input type="checkbox"/>	No Access	<input type="checkbox"/>

ATTIC INFORMATION	XX	ATTIC VIEWED FROM	XX
Attic Hatch	<input type="checkbox"/>	Entry	<input type="checkbox"/>
Pull Down Stairs	<input type="checkbox"/>	Walked	<input type="checkbox"/>
Lighting in Attic	<input type="checkbox"/>	Inaccessible	<input type="checkbox"/>
Scuttle Hole	<input type="checkbox"/>	From Stairs	<input type="checkbox"/>
Storage	<input type="checkbox"/>	Partial Viewing	<input type="checkbox"/>

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INTERIOR

INTERIOR INFORMATION	Y	N	R
Ceilings			
Walls			
Floors			
Windows (representative number)			
Doors			
Counter Tops & Cabinets			
Steps, Stairways, Railings			

FLOOR COVERINGS	XX	CEILING MATERIALS	XX
Carpet	<input type="checkbox"/>	Drywall	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Sheetrock	<input type="checkbox"/>
Hardwood T & G	<input type="checkbox"/>	Wallpaper	<input type="checkbox"/>
Laminate T & G	<input type="checkbox"/>	Wallpaper/ Painted Over	<input type="checkbox"/>
Vinyl	<input type="checkbox"/>	Ceiling Tile	<input type="checkbox"/>
Linoleum	<input type="checkbox"/>	Plaster	<input type="checkbox"/>
Unfinished	<input type="checkbox"/>	Suspended Ceiling Tile	<input type="checkbox"/>
Wood Planking	<input type="checkbox"/>	Comp. Mineral Fiberboard	<input type="checkbox"/>
9" Tile (possible asbestos)	<input type="checkbox"/>	Textured Sheetrock	<input type="checkbox"/>
T & G Planking	<input type="checkbox"/>	Unfinished Ceiling	<input type="checkbox"/>
Tile	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Stone	<input type="checkbox"/>	Comp. Particleboard	<input type="checkbox"/>
Self Adhesive Tile	<input type="checkbox"/>	Plywood	<input type="checkbox"/>

WINDOW TYPES	XX	BRAND	XX
Thermal (insulated)	<input type="checkbox"/>		<input type="checkbox"/>
Non-Insulated	<input type="checkbox"/>		<input type="checkbox"/>
Single Pane	<input type="checkbox"/>		<input type="checkbox"/>
Jalousie	<input type="checkbox"/>		<input type="checkbox"/>
Awning	<input type="checkbox"/>		<input type="checkbox"/>
Bow Window	<input type="checkbox"/>		<input type="checkbox"/>
Storm Windows	<input type="checkbox"/>		<input type="checkbox"/>
Tilting Windows	<input type="checkbox"/>		<input type="checkbox"/>
Double-Hung	<input type="checkbox"/>		<input type="checkbox"/>
Single-Hung	<input type="checkbox"/>		<input type="checkbox"/>
Sliders	<input type="checkbox"/>		<input type="checkbox"/>
Casement Windows	<input type="checkbox"/>		<input type="checkbox"/>
Both Insul. & Non- Insul.	<input type="checkbox"/>		<input type="checkbox"/>

INTERIOR WALL MATERIALS	XX	INTERIOR DOORS	XX
Drywall	<input type="checkbox"/>	Hollow Core	<input type="checkbox"/>
Sheetrock	<input type="checkbox"/>	Solid Core	<input type="checkbox"/>
Plaster	<input type="checkbox"/>	Masonite	<input type="checkbox"/>
Paneling	<input type="checkbox"/>	Raised Panel	<input type="checkbox"/>
Wallpaper	<input type="checkbox"/>	Recess Sculptured	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Metal	<input type="checkbox"/>
Unfinished	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Tile	<input type="checkbox"/>	Homemade Doors	<input type="checkbox"/>
Painted Wallpaper	<input type="checkbox"/>	Particleboard	<input type="checkbox"/>
Wainscoting	<input type="checkbox"/>	Sliding Pocket Doors	<input type="checkbox"/>

CABINETS	XX	COUNTER TOPS	XX
None Present	<input type="checkbox"/>	None Present	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Wood	<input type="checkbox"/>
Veneer	<input type="checkbox"/>	Veneer	<input type="checkbox"/>
Laminate	<input type="checkbox"/>	Corian	<input type="checkbox"/>
Plastic	<input type="checkbox"/>	Marble	<input type="checkbox"/>
Melamine	<input type="checkbox"/>	Composite	<input type="checkbox"/>
Homemade Cabinets	<input type="checkbox"/>	Laminate	<input type="checkbox"/>
Oak	<input type="checkbox"/>	Granite	<input type="checkbox"/>
Pine	<input type="checkbox"/>	Slate	<input type="checkbox"/>
Other Material	<input type="checkbox"/>	Other	<input type="checkbox"/>

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HEATING & COOLING SYSTEMS

HEATING / CENTRAL AIR COND.	Y	N	R
Heating Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Normal Operating Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automatic Safety Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooling Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gas / LP Fireplaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solid Fuel Heating Devices (woodstove, fireplace)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pellet Stove / Corn Stove / Multi-Fuel Stove	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chimneys, Flues and Vents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Distribution Systems, Fans, Controls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presence of Heat Source in Each Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Presence of Cooling Source in Each Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

KEY: HU=HEATING UNIT CU=COOLING UNIT

HU & CU BRANDS	HU	CU
Unknown	<input type="checkbox"/>	<input type="checkbox"/>
None	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

HEAT- ENERGY SOURCE	xx	FIREPLACES	xx
Oil	<input type="checkbox"/>	Conventional (wood)	<input type="checkbox"/>
Natural Gas	<input type="checkbox"/>	Stand Alone	<input type="checkbox"/>
Propane	<input type="checkbox"/>	Gas Non Vented	<input type="checkbox"/>
Kerosene	<input type="checkbox"/>	Gas Vented	<input type="checkbox"/>
Solar	<input type="checkbox"/>	Decorative Only	<input type="checkbox"/>
Electric	<input type="checkbox"/>	Prop. Gas Log Vented	<input type="checkbox"/>
Wood	<input type="checkbox"/>	Prop. Gas Log Non-V	<input type="checkbox"/>
Coal	<input type="checkbox"/>	Pellet Insert	<input type="checkbox"/>
Pellets	<input type="checkbox"/>	Sealed-off Fireplace	<input type="checkbox"/>
Corn or Alternate Fuel	<input type="checkbox"/>	None	<input type="checkbox"/>

FILTER TYPES	xx	DUCT WORK	xx
N/A (None)	<input type="checkbox"/>	Insulated	<input type="checkbox"/>
Washable	<input type="checkbox"/>	Non-Insulated	<input type="checkbox"/>
Disposable	<input type="checkbox"/>	Both (I & NI)	<input type="checkbox"/>
Electronic Air Cleaner	<input type="checkbox"/>	Partially Insulated	<input type="checkbox"/>
Cartridge	<input type="checkbox"/>	Galvanized Ducts	<input type="checkbox"/>
Multiple Filters	<input type="checkbox"/>	Possible Asbestos Material	<input type="checkbox"/>
Missing Filter	<input type="checkbox"/>	No Ducts	<input type="checkbox"/>

COOLING EQUIPMENT TYPE	xx	NUMBER OF FIREPLACES	
Heat Pump Forced Air	<input type="checkbox"/>		
Air Conditioning Unit	<input type="checkbox"/>	NUMBER OF WOOD STOVES	
Window A/C Unit	<input type="checkbox"/>		
Swamp Cooler	<input type="checkbox"/>	TOTAL NUMBER OF HEAT SYSTEMS	

NUMBER OF A/C ONLY UNITS	

HEATING UNIT TYPE(S)	xx
Oil Fired Forced Warm Air	<input type="checkbox"/>
Steam Boiler	<input type="checkbox"/>
Hydronic (boiler)	<input type="checkbox"/>
Gas Fired Forced Warm Air	<input type="checkbox"/>
Radiant Floor Heating	<input type="checkbox"/>
Radiant Ceiling Heating	<input type="checkbox"/>
Electric Baseboard Heat	<input type="checkbox"/>
Oil Furnace Converted to Gas	<input type="checkbox"/>
Coal Furnace Converted to Oil	<input type="checkbox"/>
Coal Furnace Converted to Gas	<input type="checkbox"/>
Heat Pump Forced Air	<input type="checkbox"/>
Geothermal Convection Pump	<input type="checkbox"/>
Outdoor Boiler	<input type="checkbox"/>
Space Heater	<input type="checkbox"/>
Other	<input type="checkbox"/>
None	<input type="checkbox"/>

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ELECTRICAL SYSTEM

ELECTRICAL SYSTEM	Y	N	R
Conductors - Service Entrance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Distribution Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Over-Current Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grounding & Polarity of GFCI Outlets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operation of GFCI Outlets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Branch Circuit Conductors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compatibility of Over-Current Device to Branch Circuit Conductors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Over-Current Devices of Each Branch Circuit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Smoke Detectors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carbon Monoxide Detectors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LOCATION-MAIN & DIST. PANELS	xx	ELECTRICAL PANEL CAPACITY	xx
Basement Wall	<input type="checkbox"/>	60 AMP	<input type="checkbox"/>
1st Level Wall	<input type="checkbox"/>	100 AMP	<input type="checkbox"/>
2nd Level Wall	<input type="checkbox"/>	125 AMP	<input type="checkbox"/>
3rd Level Wall	<input type="checkbox"/>	150 AMP	<input type="checkbox"/>
Garage / Carport	<input type="checkbox"/>	200 AMP	<input type="checkbox"/>
Hallway	<input type="checkbox"/>	225 AMP	<input type="checkbox"/>
Bedroom	<input type="checkbox"/>	(2) 200 AMP Panels	<input type="checkbox"/>
Closet	<input type="checkbox"/>	(2) 150 AMP Panels	<input type="checkbox"/>
Utility Room	<input type="checkbox"/>	(2) 100 AMP Panels	<input type="checkbox"/>
Other	<input type="checkbox"/>	Inadequate	<input type="checkbox"/>

ELECTRICAL PANEL MANUFACTURER	xx	OVER-CURRENT DEVICES	xx
	<input type="checkbox"/>	Circuit Breakers	<input type="checkbox"/>
Other	<input type="checkbox"/>	Fuses	<input type="checkbox"/>

ELEC. SERVICE CONDUCTORS	xx	BRANCH CIRCUIT MATERIAL	xx
Overhead Service	<input type="checkbox"/>	Copper	<input type="checkbox"/>
Lateral Service	<input type="checkbox"/>	Aluminum	<input type="checkbox"/>
Aluminum	<input type="checkbox"/>	Romex	<input type="checkbox"/>
Copper	<input type="checkbox"/>	Cotton Fiber Insulated	<input type="checkbox"/>
220 Volts	<input type="checkbox"/>	Shielded Cable	<input type="checkbox"/>
110 Volts	<input type="checkbox"/>	Conduit	<input type="checkbox"/>
Notes:	<input type="checkbox"/>	Knob & Tube	<input type="checkbox"/>

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PLUMBING SYSTEM

PLUMBING SYSTEM	Y	N	R
Plumbing Waste, Drain & Vent Systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water Supply & Distribution System, Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Main Water Shutoff Device	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hot Water Systems, Controls, Flues & Chimneys	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sump Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WATER SOURCE	xx	WATER FILTERS	xx
Well	<input type="checkbox"/>	Sediment Filter	<input type="checkbox"/>
Spring	<input type="checkbox"/>	Whole House Filter	<input type="checkbox"/>
Public Water Supply	<input type="checkbox"/>	Filter & Conditioning System	<input type="checkbox"/>
Shared Well	<input type="checkbox"/>	Faucet Filters Only	<input type="checkbox"/>
Other (Identify)	<input type="checkbox"/>	None	<input type="checkbox"/>

WATER SUPPLY INTO HOME	xx	WATER DIST. MATERIALS	xx
Copper	<input type="checkbox"/>	Copper	<input type="checkbox"/>
Black Hose	<input type="checkbox"/>	Galvanized	<input type="checkbox"/>
Pex	<input type="checkbox"/>	Pex	<input type="checkbox"/>
Poly	<input type="checkbox"/>	Poly	<input type="checkbox"/>
CPVC	<input type="checkbox"/>	CPVC	<input type="checkbox"/>
Galvanized	<input type="checkbox"/>	PVC	<input type="checkbox"/>
PVC	<input type="checkbox"/>	Other	<input type="checkbox"/>
Not Visible	<input type="checkbox"/>	Not Visible	<input type="checkbox"/>

PLUMBING WASTE MATERIAL	xx	WASHER DRAIN SIZE	xx
Cast Iron	<input type="checkbox"/>	1 1/2" Diameter	<input type="checkbox"/>
PVC	<input type="checkbox"/>	2" Diameter	<input type="checkbox"/>
ABS	<input type="checkbox"/>	No Washer Drain	<input type="checkbox"/>
Copper	<input type="checkbox"/>	Undersized	<input type="checkbox"/>
Lead	<input type="checkbox"/>	Not Visible	<input type="checkbox"/>

WATER HEATER CAPACITY	xx	WATER HEATER LOCATION	xx
30 Gallon	<input type="checkbox"/>	Basement	<input type="checkbox"/>
36 Gallon	<input type="checkbox"/>	Attic	<input type="checkbox"/>
38 Gallon	<input type="checkbox"/>	Downstairs Closet	<input type="checkbox"/>
40 Gallon	<input type="checkbox"/>	Under Stairs	<input type="checkbox"/>
(2) 40 gallon	<input type="checkbox"/>	Utility Room	<input type="checkbox"/>
50 Gallon	<input type="checkbox"/>	Washer / Dryer Room	<input type="checkbox"/>
65 Gallon	<input type="checkbox"/>	Concealed in Wall	<input type="checkbox"/>
66 Gallon	<input type="checkbox"/>	Crawlspace	<input type="checkbox"/>
75 Gallon	<input type="checkbox"/>	Main Floor	<input type="checkbox"/>
Two Heaters	<input type="checkbox"/>	Garage	<input type="checkbox"/>
Tankless Point-of-Use	<input type="checkbox"/>	Upper Level of Home	<input type="checkbox"/>
Unknown (obscured)	<input type="checkbox"/>	Bathroom Closet	<input type="checkbox"/>
No Water Heater	<input type="checkbox"/>	No Water Heater	<input type="checkbox"/>

WATER HEATER POWER SOURCE	xx
Electric	<input type="checkbox"/>
Gas	<input type="checkbox"/>
Propane	<input type="checkbox"/>
Solar / Electrical Auxilliary	<input type="checkbox"/>
Zoned Hot Water From Boiler	<input type="checkbox"/>
None (Hot Water From Boiler Only)	<input type="checkbox"/>

WATER HEATER MFR.	xx	WATER HEATER MFR.	xx
	<input type="checkbox"/>		<input type="checkbox"/>

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INSULATION & VENTILATION

INSULATION & VENTILATION	Y	N	R
Attic Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation Under Floors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation of Attic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vapor Retarders	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vent Systems For Kitchen, Bath, Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ventilation of Foundation, Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vents, Thermostats & Controls - Attic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FLOOR INSULATION	xx	ATTIC INSULATION	xx
Faced	<input type="checkbox"/>	Faced	<input type="checkbox"/>
Unfaced	<input type="checkbox"/>	Unfaced	<input type="checkbox"/>
Fiberglass	<input type="checkbox"/>	Fiberglass	<input type="checkbox"/>
Batts	<input type="checkbox"/>	Batts	<input type="checkbox"/>
Foil Faced Reflective	<input type="checkbox"/>	Foil Faced Reflective	<input type="checkbox"/>
Vapor Barrier	<input type="checkbox"/>	Vapor Barrier	<input type="checkbox"/>
Encapsulated Fiberglass	<input type="checkbox"/>	Encapsulated Fiberglass	<input type="checkbox"/>
Foam	<input type="checkbox"/>	Rock Wool	<input type="checkbox"/>
Netted Loose Fill	<input type="checkbox"/>	Cellulose	<input type="checkbox"/>
R-11	<input type="checkbox"/>	Perlite / Vermiculite	<input type="checkbox"/>
R-19	<input type="checkbox"/>	Blown-In	<input type="checkbox"/>
R-22	<input type="checkbox"/>	R-19 or Less (poorly insulated)	<input type="checkbox"/>
R-25	<input type="checkbox"/>	R-22	<input type="checkbox"/>
R-30	<input type="checkbox"/>	R-30	<input type="checkbox"/>
None / Not Visible	<input type="checkbox"/>	R-38	<input type="checkbox"/>

ATTIC VENTILATION	xx	DRYER VENT MAT.	xx
Gable Vents	<input type="checkbox"/>	Flexible Vinyl	<input type="checkbox"/>
Soffit Vents	<input type="checkbox"/>	Flexible Metal	<input type="checkbox"/>
Ridge Vent	<input type="checkbox"/>	Rigid Metal	<input type="checkbox"/>
Passive Ventilation	<input type="checkbox"/>	Rigid PVC	<input type="checkbox"/>
Turbines	<input type="checkbox"/>	No Dryer or Vent	<input type="checkbox"/>
Thermostatically Controlled Fan	<input type="checkbox"/>		
Manually Switched Fan	<input type="checkbox"/>		
Solar Powered Fan	<input type="checkbox"/>		

Street Address: _____

Photo No.: _____

Explanation: _____
