

Definitions

NOTE: All definitions listed below refer to the property or item listed as inspected on this report at the time of inspection

A	Acceptable	Functional with no obvious signs of defect.
NP	Not Present	Item not present or not found.
NI	Not Inspected	Item was unable to be inspected for safety reasons or due to lack of power, inaccessible, or disconnected at time of inspection.
M	Marginal	Item is not fully functional and requires repair or servicing.
D	Defective	Item needs immediate repair or replacement. It is unable to perform its intended function.

General Information**Property Information**

Property Address 1234 School House Road
City Redmond **State** OR **Zip** 97756
Contact Name Emma Goodagent
Phone (541)-111-1111 **Fax** (541)-111-1111

Client Information

Client Name Jennifer and Michael Smith
Client Address 3212 Homestead Dr.
City Bend **State** OR **Zip** 97707
Phone (541)-111-1234 **Fax** (541)-111-2345
E-Mail buyer@woodenhouse.com

Inspection Company

Inspector Name Lee Boutell
Company Name Boutell Home Inspections
Company Address P.O. Box 22
City Madras **State** OR **Zip** 97741
Phone 541-475-4510 **Fax**
E-Mail boutell@q.com
File Number 22222
Amount Received \$300.00

Conditions

Others Present Buyer's Agent and Buyer **Property Occupied** Occupied
Estimated Age 15 **Entrance Faces** Northwest
Inspection Date 4/15/07
Start Time 10:00am **End Time** 1:00pm
Electric On Yes No Not Applicable
Gas/Oil On Yes No Not Applicable
Water On Yes No Not Applicable
Temperature 70 degrees
Weather Partly cloudy **Soil Conditions** Dry
Space Below Grade Basement
Building Type Single family **Garage** Detached
Sewage Disposal City **How Verified** Visual **Inspection**
Water Source City **How Verified** Visual **Inspection**
Additions/Modifications None

Lots and Grounds

Note: Wood sidings should be a minimum of 6" above ground. Detection of the presence of concealed moisture, mold or wood decay present behind exterior finishes is beyond the scope of this inspection. Promote positive (+) drainage away from foundation and extend runoff from roofing and downspouts a minimum 10 ft from foundation.

- | | A | N | P | I | M | D | |
|----|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--------------------------|-------------------------------------|---|
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Walks: Concrete |
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Steps/Stoops: Concrete |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Patio: Pebble top |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Deck: Treated wood --The deck has been built below acceptable building standards and is not safe in its current state. Recommend further evaluation and estimate to bring deck up to an acceptable building standard. |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Balcony: Concrete |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Porch: Concrete |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Vegetation: Shrubs with some weeds |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Retaining Walls: Railroad ties --The wall is showing signs of movement, but appears to be stable at this time. A qualified contractor is recommended to evaluate and estimate repairs to maintain the wall. |



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| 9. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Basement Stairwell: Concrete |
| 10. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Grading: Moderate slope --The grade and landscaping materials are too high and extend above the window well at the Northeast rear of the home. Recommend that the grade be reduced or the metal window well soil retainer be replaced with a taller unit to keep the mulch and soil beds from washing into the well. |



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| 11. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Swale: Adequate slope and depth for drainage |
| 12. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Window Wells: Drain present |
| 13. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bsmt. Stairwell Drain: Surface drain |
| 14. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Exterior Surface Drain: Not present |
| 15. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Driveway: Concrete |

Exterior Surface and Components

A NP NI M D

Front Elevation Exterior Surface

1. Type: Brick veneer --Loose half brick at front door. Remove and tuckpoint back in place.



2nd Floor rear dormer Exterior Surface

2. Type: Vinyl siding
 3. Trim: Composite material --Note: Damaged wood areas should be checked while doing the repair and replaced if wood rot is present.

1. Water damage to trim wood at either side of garage door from moisture wicking into the finished particle board. The surface is starting to delaminate. Recommend repair/replacement of trim boards.

2. The wood window boxes have water damage and will require repair/replacement. The wood has started to separate at the supports and at the corners of the window boxes.

3. The trim board at the southwest corner of the porch has water damage due to water penetration and will require repair/replacement of the wood. The trim board extends out creating a ledge allowing water to collect on the top edge of the board and cause the wood to rot.

Recommend estimate/repairs by a qualified contractor.



4. Fascia: Composite material
 5. Soffits: Composite material
 6. Door Bell: Hard wired
 7. Entry Doors: Metal
 8. Patio Door: Vinyl sliding
 9. Windows: Vinyl
 10. Storm Windows:
 11. Window Screens:
 12. Basement Windows: Aluminum slider
 13. Exterior Lighting: Surface mounted lamps front and rear
 14. Exterior Electric Outlets: 110 VAC GFCI
 15. Hose Bibs: Frost Free
 16. Gas Meter: Exterior surface mount at side of home

Garage/Carport

A NP NI M D

Left Elevation Garage

1. Type of Structure: Tuck under Car Spaces: 2
2. Garage Doors: Insulated aluminum
3. Door Operation: Mechanized
4. Door Opener: Lift Master
5. Service Doors: Metal
6. Ceiling: Drywall
7. Walls: Drywall
8. Floor/Foundation: Poured concrete --Cracked with minor displacement
9. Hose Bibs: Frost free
10. Electrical: 110 VAC outlets and lighting circuits
11.
12. Heating:
13. Windows: Vinyl double hung
14. Gutters: Steel
15. Downspouts: Aluminum

Electrical

Testing of smoke detectors or alarms, timers, low voltage circuits such as door bells, security, and pet containment systems are beyond the scope of this inspection. Smoke detectors are recommended to be located in each Bedroom and one per floor level. Smoke alarms should be tested monthly and replaced per manufacturers guidelines or every ten years. Recommend grounded and GFCI protected outlets be installed at all Exterior, Kitchen, Wet Bar, Garage and Unfinished Basement outlet locations.

A NP NI M D

1. Service Size Amps: 200 Volts: 110-240 VAC
2. Service: Aluminum
3. 120 VAC Branch Circuits: Copper
4. 240 VAC Branch Circuits: Copper
5. Aluminum Wiring: Not present
6. Conductor Type: Romex
7. Ground: Plumbing and rod in ground.
8. Smoke Detectors: Hard wired with battery backup --Safety: Recommend replacing batteries every 6 months

Garage Electric Panel

9. Manufacturer: General Electric --Double taps noted in panel at several breakers. Recommend corrections



10. Max Capacity: 200 Amps
11. Main Breaker Size: 200 Amps
12. Breakers: CU/AL
13. Fuses: Not present
14. GFCI Basement, garage, kitchen, bathrooms
15. Is the panel bonded? Yes No

Roof

Chimney flue inspection is limited due to height. The inspection covers only the visible portion of the flue.

A NP NI M D

Main Roof Surface

- 1. Method of Inspection: On the roof
- 2. Unable to Inspect: 30% --Height of the roof
- 3. Material: Fiberglass shingle --Missing roof shingles from wind damage as marked "x" in diagram. Repairs are required.
- 4. Type: Gable
- 5. Approx Age: 15
- 6. Flashing: Galvanized
- 7. Valleys: Preformed metal
- 8. Skylights:
- 9. Plumbing Vents: PVC
- 10. Electrical Mast: Underground utilities
- 11. Gutters: Steel
- 12. Downspouts: Aluminum
- 13. Leader/Extension: Underground conductors --Reconnect to downspout where pulling loose.



Southeast Chimney

- 14. Chimney: Brick
- 15. Flue/Flue Cap: Metal
- 16. Chimney Flashing: Galvanized

Attic

A NP NI M D

Northeast Attic

- 1. Method of Inspection: In the attic
- 2. Unable to Inspect: 10% --Cathedral or vaulted ceiling
- 3. Roof Framing: 2x4 Truss
- 4. Sheathing: Strand board
- 5. Ventilation: Ridge and soffit vents
- 6. Insulation: Fiberglass
- 7. Insulation Depth: 12"
- 8. Vapor Barrier: Paper
- 9. Attic Fan: Direct drive
- 10. House Fan: Direct drive with manual controls
- 11. Wiring/Lighting: 110 VAC lighting circuit
- 12. Moisture Penetration: Previous water penetration noted
- 13. Bathroom Fan Venting: Electric fan

Structure

- | | A | NP | NI | M | D | |
|-----|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--|
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Structure Type: Wood frame |
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Foundation: Poured |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Differential Movement: No movement or displacement noted |
| 4. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Beams: Steel I-Beam |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Bearing Walls: Frame |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Joists/Trusses: 2x10 |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Piers/Posts: Poured piers and steel posts |
| 8. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Floor/Slab: Poured slab |
| 9. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Stairs/Handrails: Wood stairs with metal handrails |
| 10. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Subfloor: Composite manufactured materials |

Crawl Space

- | | A | NP | NI | M | D | |
|------------------|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|--|
| East Crawl Space | | | | | | |
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Method of Inspection: In the crawl space |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Unable to Inspect: 40% --Insulation obstructed complete view of foundation walls |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Access: Wood door |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Moisture Penetration: Visible evidence --Owner disclosed previous moisture concerns- see seller's disclosure |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Moisture Location: Wall crack-Previous leak |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Moisture Barrier: Plastic under gravel |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Ventilation: Open to basement --No ventilation to exterior present |
| 8. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Insulation: Fiberglass |
| 9. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Vapor Barrier: Plastic |
| 10. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Sump Pump: Submerged |
| 11. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Electrical: 110 VAC |

Interior Rooms

Inspection does not cover any damage concealed by rugs, carpeting, wall paneling, furniture or fixtures. Typical wall/ceiling minor cracks/touch ups are considered normal and are not listed in report.

- | | A | NP | NI | M | D | |
|--------------------------|-------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|---|
| Family Room Living Space | | | | | | |
| 1. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Closet: None |
| 2. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Ceiling: Drywall |
| 3. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Walls: Drywall |
| 4. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Floor: Hardwood |
| 5. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Doors: Hollow wood |
| 6. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Windows: Vinyl double hung |
| 7. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Electrical: Outlets, lighting and ceiling fan |
| 8. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | HVAC Source: Air exchange ventilation |
| 9. | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Smoke Detector: Hard wired with battery back up |

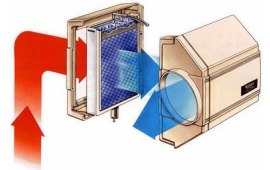
Heating System

Mechanical equipment tested for functional operation at time of inspection only. No life expectancy is expressed or implied. Inspection does not determine balancing or sizing of system. The inspection covers only the visible components of the heating system. Hidden problems may exist that are not documented in this report. Annual cleaning and servicing recommended for best performance and life expectancy.

A NP NI M D

Basement Heating System

- 1. Heating System Operation: Appears functional
- 2. Manufacturer: Lennox
- 3. Model Number: 23495-320945 Serial Number: 43p93=24985=30
- 4. Type: Forced air Capacity: 100,000 BTUHR
- 5. Area Served: Whole Bldg Approximate Age: 7
- 6. Fuel Type: Natural gas
- 7. Heat Exchanger: 5 Burner --Recommend inspection by a qualified heating specialist
- 8. Unable to Inspect: 40%
- 9. Blower Fan/Filter: Direct drive with disposable filter
- 10. Distribution: Metal duct
- 11. Circulator:
- 12. Draft Control: Automatic
- 13. Flue Pipe: Double wall
- 14. Controls: Limit switch
- 15. Devices:
- 16. Humidifier: April-Aire --Humidifier water panel has excessive buildup. Recommend cleaning periodically. See illustration for water panel location.
- 17. Thermostats: Programmable
- 18. Suspected Asbestos: No
- 19. Suspected Asbestos: No



Plumbing

Water heater tested for functional operation at time of inspection only. No life expectancy is expressed or implied. Approx. 200 gallons of water was pushed through sewer drain lines to verify functional drainage of public sewer or septic system. Water conditioning/filtering systems are not within the scope of this inspection. Recommended water pressure ranges 55-65 psi.

A NP NI M D

- 1. Service Line: Copper
 - 2. Main Water Shutoff: Basement
 - 3. Water Lines: Copper
 - 4. Drain Pipes: PVC
 - 5. Service Caps: Accessible
 - 6. Vent Pipes: PVC
 - 7. Gas Service Lines: Cast iron
- Basement Water Heater
- 8. Water Heater Operation: Appeared servicable at time of inspection
 - 9. Manufacturer: State
 - 10. Type: Natural gas Capacity: 50 Gal.
 - 11. Approximate Age: 5 Area Served: Whole building
 - 12. Flue Pipe: Double wall