



OUR CUTTING-EDGE TECHNOLOGY AND UNBIASED APPROACH WILL KEEP YOUR HOME SAFE AND SOUND.

**PREPARED FOR:** \_\_\_\_\_ | \_\_\_\_\_  
*(Name of Client)*

**CONCERNING:** \_\_\_\_\_  
*(Address of Property)*

**BY:** \_\_\_\_\_ | \_\_\_\_\_  
*(Name of Technician) (Consultation Date)*



YOUR HOME CHECK  
1305 FM 359, Suite G  
Richmond, TX 77469

P 281-342-Home  
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**IV. ATTIC:**

| Examined                            | Needs Attention  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> H Clips on Decking  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Soffits Clear   |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> Insulation                      Depth <u>14</u> Inches |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Venting   |

Comments:

Attic is effectively vented with three types of venting; soffit, gable and ridge venting

The attic access hatch door should be insulated.

**V. WALLS:**

**A. Exterior Type:**

|  |   |                                 |                               |
|--|---|---------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> Brick        | <input type="checkbox"/> Stone          | <input type="checkbox"/> Siding | <input type="checkbox"/> Wood |
| <input checked="" type="checkbox"/> Cement Fiber | <input type="checkbox"/> Masonry Stucco | <input type="checkbox"/> EFIS   |                               |

| Examined                            | Needs Attention                                  | Examined                            | Needs Attention                       |
|-------------------------------------|--|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition               | <input checked="" type="checkbox"/> | <input type="checkbox"/> Cracks       |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> Installation | <input checked="" type="checkbox"/> | <input type="checkbox"/> Water Damage |

**B. Interior**

| Examined                            | Needs Attention                        | Examined                            | Needs Attention                                       |
|-------------------------------------|--|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition     | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> Settlement Cracks |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Stains/Damage | <input checked="" type="checkbox"/> | <input type="checkbox"/> Railing Openings             |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Moisture      | <input checked="" type="checkbox"/> | <input type="checkbox"/> Stairway                     |

Comments:

All exterior brick wall corners or joints should be caulked or sealed to prevent moisture intrusion.

Minor cracks were observed on interior sheetrock walls in multiple rooms. This condition is mainly cosmetic in nature and should be patched.

Infrared scanning of Interior walls did not reveal any moisture intrusion.

**VI. CEILINGS & FLOORS:**

**A. Ceilings:**

| Examined                            | Needs Attention                        | Examined                            | Needs Attention                            |
|-------------------------------------|--|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition     | <input checked="" type="checkbox"/> | <input type="checkbox"/> Moisture          |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Installation  | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> Cracks |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Stains/Damage |                                     |  |

**B. Floor Type:**

|  |                               |  |                                   |
|--|-------------------------------|--|-----------------------------------|
| <input checked="" type="checkbox"/> Tile | <input type="checkbox"/> Wood | <input checked="" type="checkbox"/> Carpet | <input type="checkbox"/> Linoleum |
|--|-------------------------------|--|-----------------------------------|

| Examined                            | Needs Attention                       |
|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition    |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Installation |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Cracks       |

| Examined                            | Needs Attention                           |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Sloping          |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Loose Sub Floors |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Damage/Stains    |

Comments:

Minor cracks were observed on vaulted ceilings in multiple areas. This condition is mainly cosmetic in nature and should be patched.

All flooring materials appear to be performing properly and be properly installed.

### VII. DOORS:

| Examined                            | Needs Attention                           |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Safety Glass     |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Adjustment/Trim  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Locking Hardware |

| Examined                            | Needs Attention                                 |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Weather Stripping      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition/Water Damage |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Keyed Egress           |

Comments:

All doors functioned as intended.

### VIII. WINDOWS:

Type:  Single Pane  Double Pane

| Examined                            | Needs Attention                         |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Installation   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Condition      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Safety Glass   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Locks/Hardware |

| Examined                            | Needs Attention                       |
|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Water Stains |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Water Damage |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Screens      |

Comments:

All windows installed properly

Infrared scanning did not reveal any leaks or excessive energy loss

### IX. FIREPLACE/CHIMNEY:

Type:  Masonry  Manufactured  Gas  Artificial Log

| Examined                            | Needs Attention                      |
|-------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Hearth      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Flue/Damper |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Firebox     |

| Examined                            | Needs Attention                                |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Screen Spark Arrestor |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Gas Value/Log Lighter |

Comments:

Unit operated and is vented properly.

### X. ELECTRICAL:

**A. Main Panel Type: Cutler-Hammer**

**Amperage Size: 150**

**Electrical Service Panel Located: front left corner of home**

| <b>Examined</b>                     | <b>Needs Attention</b>                              |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Mounting                   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Openings                   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Grounded/Bonded            |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Terminations/Breaker Sizes |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Clearances                 |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Wire Sizes                 |

Comments:

Sub panel for garage outlets located on rear garage wall  
Units were bonded and grounded properly.

**B. Branches**

|                                     |  |                                     |   |  |
|-------------------------------------|--|-------------------------------------|---|--|
| <b>Wire Type:</b>                   | <input checked="" type="checkbox"/> Copper | <input type="checkbox"/> Aluminum   |   |  |
| <b>Examined</b>                     | <b>Needs Attention</b>                     | <b>Examined</b>                     | <b>Needs Attention</b>                      |  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> AFCI              | <input checked="" type="checkbox"/> | <input type="checkbox"/> Fixtures           |  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> GFCI   | <input checked="" type="checkbox"/> | <input type="checkbox"/> Outlets            |  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Recessed Lights   | <input checked="" type="checkbox"/> | <input type="checkbox"/> Insulation Contact |  |

Comments:

The installation of a ground fault circuit interrupter (GFCI) is recommended for all garage outlets. A ground fault circuit interrupter (GFCI) offers protection from shock or electrocution.

All other fixtures, outlets and switches operated properly.  
Infrared scanning did not reveal any excessive heat being emitted from electrical wire or fixtures.

**XI. HEATING & COOLING:**

**A. Heating – Furnace:**

Type:  Gas Forced Air     Gas Draft     Electric

**Energy Source:**

| <b>Examined</b>                     | <b>Needs Attention</b>                     | <b>Examined</b>                     | <b>Needs Attention</b>                          |
|-------------------------------------|--|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Flue Vent         | <input checked="" type="checkbox"/> | <input type="checkbox"/> Vent Strapping         |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Burners/Condition | <input checked="" type="checkbox"/> | <input type="checkbox"/> Duct Material Type B   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Gas/Valve         | <input checked="" type="checkbox"/> | <input type="checkbox"/> Venting into Roof Jack |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Gas Line Material | <input checked="" type="checkbox"/> | <input type="checkbox"/> Flex Line              |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Sediment Trap     |                                     |   |

Brand: Goodman

Comments:

Single zone system  
 2005 Goodman brand model #FP-136 gas forced air furnace in attic  
 Unit is installed and vented properly.

**B. Cooling:**

**Type of cooling system: Central**

**Energy source: Electricity**

| <b>Examined</b>                     | <b>Needs Attention</b>                          | <b>Examined</b>                     | <b>Needs Attention</b>                                 |
|-------------------------------------|---|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Compressor/Evaporator  | <input checked="" type="checkbox"/> | <input type="checkbox"/> Trap Primary (Present)        |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> Coil Sizing | <input checked="" type="checkbox"/> | <input type="checkbox"/> Secondary Pan Stopped         |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Pan/Drain              | <input checked="" type="checkbox"/> | <input type="checkbox"/> Over Current Protection       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Insulation Freon Line  | <input checked="" type="checkbox"/> | <input type="checkbox"/> Power Switch & Outlet at Unit |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Ducts                  |                                     |  |

Brand: Goodman

Comments:

Single zone system

2005 Goodman brand model #CLT-42-1B 3 1/2 ton unit at left side of home.

Unit operated to control and produced a supply of 59 degrees and a return of 75 degrees. This is within test limits of 15 to 20 degrees.

The evaporator coil is oversized. It is a 5 ton unit and is matched with a 3 1/2 ton compressor. Recommend client confirm with builder that this is an approved application of these two units from this manufacturer and for this home system design.

Primary drain discharging to guest sink trap functioning as intended.

Recommended breaker size for condensing unit is 30 amps and properly sized in panel.

**XII. PLUMBING:**

| <b>Examined</b>                     | <b>Needs Attention</b>                | <b>Examined</b>                     | <b>Needs Attention</b>                            |
|-------------------------------------|---------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Faucets      | <input type="checkbox"/>            | <input type="checkbox"/> Hydro-Therapy GFCI       |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Bathtubs     | <input checked="" type="checkbox"/> | <input type="checkbox"/> Anti-Siphon on Hose Bibs |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Shower Stall | <input checked="" type="checkbox"/> | <input type="checkbox"/> Leaks                    |

Comments

All plumbing fixtures operated properly.

Infrared scanning did not reveal any plumbing leaks

**A. Water Heater:**

**Energy Source:**

| Examined                            | Needs Attention                     |
|-------------------------------------|-------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Flue Vent  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Pan Drain  |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Gas Line   |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> T & P Line |

| Examined                            | Needs Attention                                 |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Vent Strap             |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Venting into Roof Jack |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Height                 |

Brand: State

Comments:

2005 State brand model #GS650YBRS 50 gallon gas unit in attic

Unit operated and is vented and plumbed properly.

Water temperature was measured at 110 degrees and is within the recommended limit of 120 degrees

**B. Drains & Vents:**

| Examined                            | Needs Attention                      |
|-------------------------------------|--------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Drains      |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Drain Vents |

| Examined                            | Needs Attention                    |
|-------------------------------------|------------------------------------|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Pea Traps |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> Clean Out |

Comments

All drains operated and are vented properly.

**XIII. APPLIANCES:**

|            | Examined                            | Needs Attention          |
|------------|-------------------------------------|--------------------------|
| Dishwasher | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Brand: Maytag

Comments:

The dishwasher operated properly.

|          | Examined                            | Needs Attention                     |
|----------|-------------------------------------|-------------------------------------|
| Disposer | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |

Brand: In Sink Erator

Comments:

The food waste disposer operated properly at time of inspection.

The wiring leading into the food waste disposer is not secured with a wire clamp. This should be repaired as the wire connections themselves are supporting the wire and represent an electrical hazard.

|            | Examined                            | Needs Attention          |
|------------|-------------------------------------|--------------------------|
| Range Hood | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Brand: Maytag ductless microwave unit

Comments:

The range hood operated properly.

|                 |  |  |
|-----------------|--|--|
| Cook Top/Oven   | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Brand: Maytag<br>Comments:<br>The range operated properly at time of inspection.   |
| Microwave       | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Brand: Maytag<br>Comments:<br>The microwave operated properly  |
| Compactor       | <b>Examined</b><br><input type="checkbox"/>            | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Brand:<br>Comments:  |
| Exhaust Fans    | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input checked="" type="checkbox"/><br><br>Comments:<br>Client reported that two different dryers have not operated properly. He has replace dryer but clothes do not dry properly. Suspect that there is a restriction in the vent duct or that a booster pump is needed for unit to operate properly.<br><br>All other exhaust fans operated properly and are vented to the exterior |
| Garage Doors    | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Comments:<br>Two Genie brand units operated properly   |
| Door Bell       | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Comments:<br>The doorbell operated properly.   |
| Smoke Detectors | <b>Examined</b><br><input checked="" type="checkbox"/> | <b>Needs Attention</b><br><input type="checkbox"/><br><br>Comments: Smoke detectors are located in all bedrooms and adjoining hallways.  |