

							Inspection (Permission to inspect) Signature: _____ Date: ____/____/____ Lister Initials: ____ Inspected _____ Refused _____ Est _____ OB Only _____ Vac Dwlg _____ Street Paved Gravel Dirt Utilities City Well / Septic Rural			
							Exterior: _____ _____ _____ _____ Siding: _____ Windows: _____ Roof: _____ Bsmt: _____ _____ Interior: _____ _____ _____ _____ _____ Kitchen: _____ _____ Bath: _____ Heat: _____ A/C: _____			
Addn 1	Addn 2	Addn 3	Addn 4	Addn 5	Addn 6	Addn 7				
Yr Blt	Yr Blt	Yr Blt	Yr Blt	Yr Blt	Yr Blt	Yr Blt				
Condition	Condition	Condition	Condition	Condition	Condition	Condition				
Bsmt	Bsmt	Bsmt	Bsmt	Bsmt	Bsmt	Bsmt				
Attic	Attic	Attic	Attic	Attic	Attic	Attic				
____ Single Fam Year Blt: _____ Att Gar Yr Blt: _____ ____ # Fam Conv ____ 1 Story ____ 1 1/2 Story ____ 1 3/4 Story ____ # Fam Flat ____ 2 Story ____ 2 1/2 Story ____ 3 Story ____ Duplex ____ Split Foyer ____ Split Level ____ MFD (S) ____ Condo ____ MFD(MS) ____ MFD Home							____ Frame ____ Metal-Post Fr ____ Brk ____ Metal-Wd Fr ____ Log (C) ____ A-Frame ____ Log (P) ____ Unique ____ Berm ____ Salvage \$ ____ Earth			
Grade: _____							Condition: Ex VG G AN N BN F P VP OBS _____%			

BASEMENT	HEAT / A/C	ATTIC	ROOM COUNTS
____ None ____ Cellar (NC) ____ 1/4 ____ 1/2 ____ 3/4 ____ Full ____ Pier ____ Perimeter ____ Crawl ____ Slab ____ SF Dirt Flr ____ Obsv	No Heat: Top <input type="checkbox"/> 2nd & 3rd Flr <input type="checkbox"/> ____ Yes ____ No - base heat ____ FHA - Gas ____ FHA - Electric ____ Gravity ____ HW - Baseboard ____ HW - Radiant ____ HW - Floor ____ Elec - Baseboard ____ Elec - Radiant ____ Heat Pump In Flr HW Heat _____ SF	____ Pull-Stair ____ 3/4 ____ F/S ____ Full ____ 1/4 ____ Obsv ____ 1/2 FINISH DESCRIPTIONS Fdtn: CONC CBLK STN TILE BRK _____ Walls: VINYL WDLAP BRK STL MTL CBRD _____ Roof: AGBL AHIP AMAN MTLGBL _____ Int Fin: DRWL PAN PSTR LOG KP _____ Floor: CARP VNYL HDWD CER LAM _____	Total Bsmt 1st 2nd Attic Bedrooms _____ _____ _____ _____

PLUMBING	BUILT INS	GARAGES/CARPORTS
____ Std Bath - 3 Fixt ____ SS Bath - 3 Fixt ____ Toilet Room ____ Lavatory ____ Water Closet ____ Sink ____ SS / Tub ____ Mtl SS Bath ____ Mtl SS ____ Wet Bar ____ Cust Bath - 3 Fixt ____ Cust Tub ____ No Hot Water Tank ____ No Plumbing ____ Sewer & Water Only ____ Water Only w/Sink ____ Hot Tub ____ Bidet ____ Fbgls Service Sink ____ Urinal ____ Sauna ____ Cust Bath - 4 Fixt ____ Cust Tile Full Bath ____ Cust Tile SS Bath ____ Cust Bath - 5 Fixt ____ Cust Tile Shower ____ Cust Tile SSB w/lav ____ Cust Tile SSB w/Std Tub ____ Cust Tile SSB - 5 Fixt ____ Cust Bath w/lav ____ Cust Bath w/Cust SS ____ Cust Bath w/Cust SS+lav	____ Range ____ Oven ____ Dbl Oven ____ Dishwasher ____ Microwave ____ Security Sys ____ BI Vacuums ____ Intercom Sys ____ BI Stereo	Type Det Gar/Car Det Gar/Car Det Gar/Car Year Blt _____ _____ _____ Const _____ _____ _____ W x L _____ _____ _____ Grade _____ _____ _____ Cond _____ _____ _____ Bsmt _____ _____ _____ Dirt Flr <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> # Stalls _____ _____ _____ Int Fin _____ _____ _____ Heat Yes/InFlr/Susp Yes/InFlr/Susp Yes/InFlr/Susp A/C <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Plumbing <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Cabinetry <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Qtrs Style Unf / Fin Unf / Fin Unf / Fin Qtrs Hgt Sloped / Full Sloped / Full Sloped / Full Qtrs Plumb Yes / No Yes / No Yes / No

BSMT FINISH	W/O	SQUARE FOOT	SQ FT PRICE	INCLUDE IN TLA	BSMT STALLS
Minimal Fin		_____	L A H _____	<input type="checkbox"/>	# _____
Rec Room	<input type="checkbox"/>	_____	L A H _____	<input type="checkbox"/>	# Openers _____
Living Qtrs	<input type="checkbox"/>	_____	L A H _____	<input type="checkbox"/>	
Walk-out (PLF Exposed)		_____	L A H _____		

FIREPLACES	Count	Dbl Sided	YARD ITEM	1	2	3	4
Freestanding	_____	_____	Type	_____	_____	_____	_____
Prefab	_____	_____	Const	_____	_____	_____	_____
Masonry	_____	_____	Qual/SF Rate	L A H _____	L A H _____	L A H _____	L A H _____
Extra On Same Stack	_____	_____	W x L or SF	_____	_____	_____	_____
Gas	_____	_____	Year Blt	_____	_____	_____	_____
Mas w/ Gas Insert	_____	_____	Condition	_____	_____	_____	_____
Electric (Permanent)	_____	_____	Count	_____	_____	_____	_____
			Lump/SV	_____	_____	_____	_____