

# ***Pacific Coast Home Inspections***

***Steve Spisak***

Owner/Inspector

Residential & Commercial Inspections

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***An Associate Member of the American Society of Home Inspectors***

## ***HOME INSPECTION REPORT***

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**Report Number: 4034**

Per the 'written agreement' between **Pacific Coast Home Inspections** and the person named in the agreement, this report is for the use of the person named under the client information on page one of this report only. This report may not be transferred or sold without the permission of **Pacific Coast Home Inspections** owner, **Stephen C. Spisak**

<i>Client Information</i>		<i>Property Location</i>	
Name	<u><b>Kathleen Gerber</b></u>	Address	<u><b>2380 Main Street</b></u>
Street	_____	City	<u><b>Cambria</b></u>
City	_____	County	<u><b>San Luis Obispo</b></u>
State	<u><b>CA</b></u> Zip <u><b>934</b></u>	State	<u><b>CA</b></u> Zip <u><b>93428</b></u>
Phone	_____	Notes	<b>This report does not include any tenant equipment or tenant improvements. This report also includes a map developed by McElwain Real Estate and supplied by the client</b>
Phone	<u><b>805.909.0665</b></u>		
E-mail	_____		
E-mail	<u><a href="mailto:kjgerber2003@yahoo.com">kjgerber2003@yahoo.com</a></u>		

Inspection Date	<u><b>September 6, 2024</b></u>	Start Time	<u><b>9:15</b></u> <b>am</b>	Finish Time	<u><b>11:55</b></u> <b>am</b>
	<u><b>September 5, 2024</b></u>		<u><b>9:00</b></u> <b>am</b> pm		<u><b>1:15</b></u> <b>am</b> <b>pm</b>
Weather condition	<input checked="" type="checkbox"/> Clear	<input type="checkbox"/> Cloudy	<input type="checkbox"/> Raining	<input type="checkbox"/> Fog	
Air temperature at start of inspection	<u><b>6<sup>th</sup>-63</b></u> degrees	<u><b>5<sup>th</sup>-59</b></u> degrees	<input checked="" type="checkbox"/> Fahrenheit	<input checked="" type="checkbox"/> Tenant items	
Ground condition	<input checked="" type="checkbox"/> Dry	<input type="checkbox"/> Damp	<input type="checkbox"/> Wet		
Present at Inspection:	<u><b>5th</b></u> Clients	<u><b>Same</b></u> Owner	<input type="checkbox"/> List. Agent	<input type="checkbox"/> Agent	
	<input type="checkbox"/> Single Family	<input type="checkbox"/> Condo	<input type="checkbox"/> Duplex	<u><b>(6)</b></u> Units	<input checked="" type="checkbox"/> Commercial
Mobile Home Manuf'r	_____	Identification #	_____		
Age of Bldg.	<u><b>1976+/-</b></u> Method obtained:	<input type="checkbox"/> Co. Assess.	<input type="checkbox"/> Owner	<input type="checkbox"/> Agent	<input type="checkbox"/> Zillow
For the purpose of this inspection, the front of the home faces	<input checked="" type="checkbox"/> North	<input type="checkbox"/> South	<input type="checkbox"/> East	<input checked="" type="checkbox"/> West	

**Definitions**

**S - Satisfactory:** The item is functioning as intended, but may show signs of normal wear, tear and exposure.

**M - Marginal:** The item probably will require repair or replacement in the near future.

**P - Poor:** The item needs repair or replacement to function as intended as soon as possible.

**H - Hazard:** Apparent or potential safety hazard noted. Recommend correction of hazard immediately.

**N/A or na:** Not applicable or none

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
<b>GROUNDS</b>									
0		✓		<b>Parking lot</b> ___ Concrete ___ Asphalt ___ Gravel ___ Sinking ___ Stress cracks ___ Displacement ___ Fill cracks/seal coat					
1	na			<b>Fencing</b> Type _____ ___ None					
2	✓			<b>Grading</b> ___ Drains toward structure ___ Inadequate drainage					
3	✓			<b>Landscaping</b> ___ Overgrown ___ Other Adversely affecting; ___ Driveway ___ Electrical service ___ Sidewalk ___ Structure					
4	✓			<b>Water meters</b> ___ Meter box is filled with dirt/debris <b>Location See attached appraisal map</b>					
5	na			<b>Retaining wall</b> ___ Settling cracks ___ CMU (block) ___ Poured in place ___ Dry stack					
6	✓			<b>Steps</b> ___ Concrete <b>Corner @ units D and G</b> Wood ___ Wood railings/pickets/rail caps ___ Cracked ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b> ___ Inconsistent stair riser ___ Incorrect stair tread width ___ <b>Recommend hand railings</b>					
7	✓			<b>Walkways</b> ___ Brick ___ Concrete ___ Stone ___ None ___ Drains toward structure ___ Stress cracks <b>No Horizontal/vertical displacement</b>					
<b>EXTERIOR</b>									
8	na			<b>#1 A/C condenser</b> ___ None ___ Level Outside shutoff ___ Yes ___ No ___ Rusted Year _____ Brand _____ Model # _____ Serial # _____					
9	na			<b>#2 A/C condenser</b> ___ None ___ Level Outside shutoff ___ Yes ___ No ___ Rusted Year _____ Brand _____ Model # _____ Serial # _____					
10	na			<b>Balcony</b> ___ None ___ Railings present ___ Recommend hand railings/balusters					
11	✓			<b>Caulking recommended</b> ___ Brick ___ Doors ___ Pipe penetrations <b>All Trim</b> ___ Windows					
12	na			<b>Chimney</b> ___ None ___ Framed wood ___ CMU ___ Brick ___ Metal ___ Stone ___ Tile flue ___ Metal flue ___ Vented ___ Rain cap ___ Spark arrestor ___ Cracked/Loose chimney cap ___ Flaking/spalling ___ Holes in metal ___ <b>Have flue cleaned and re-evaluated</b> ___ Not evaluated ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b>					
13		✓		<b>Deck</b> ___ Wood frame ___ Wood planks ___ Wood rails/pickets <b>2x6</b> Wood rail cap Supports and piers ___ Wood ___ Concrete ___ Treated ___ Not visible ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b>					
14	✓			<b>Exterior electrical service</b> ___ Overhead ___ Underground ___ Low wire ___ Missing/frayed insulation ___ Needs service ___ <b>Potential safety hazard</b>					
15	✓			<b>Exterior doors</b> <b>(6)</b> Steel frame w/glass <b>(3)</b> Wood w/glass <b>(2)</b> Wood ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b>					
16			✓	<b>Exterior electrical outlets</b> ___ None ___ Operated <b>Damaged outlet</b> <b>GFI Protected</b> ___ Yes ___ No ___ <b>Potential safety hazard</b> ___ <b>Non-weatherproof box</b>					
17	✓			<b>Exterior lighting</b> ___ Operates properly ___ Does not operate ___ <b>Aged fixtures</b>					
18	✓			<b>Fascia</b> ___ Wood ___ Vinyl ___ Aluminum ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b>					
19			✓	<b>Rain gutters/downspouts</b> ___ None ___ Aluminum ___ Copper ___ Galvanized <b>Rear Dented</b> ___ Downspout extensions recommended ___ Holes ___ Leaking connections ___ Rusting ___ <b>Recommend cleaning</b> ___ <b>Recommend additional gutters and downspouts</b>					
20			✓	<b>Water pressure/faucets</b> <b>(3)</b> Operated ___ Tested <b>40 P.S.I. No Anti-siphon valves</b>					
21	na			<b>Patio</b> ___ None ___ Concrete ___ Brick ___ Stone ___ Wood ___ Drains toward structure ___ Settling cracks ___ Horizontal/vertical displacement					
22	na			<b>Porch</b> ___ None ___ Concrete ___ Wood ___ Damage ___ <b>Please see the pest report</b>					
23			✓	<b>Siding</b> ___ Wood ___ Hardy Board ___ Stone <b>Rear</b> Stucco ___ Vinyl ___ Aluminum ___ Damaged wood ___ Recommend repair/paint ___ <b>Please see the pest report</b>					

# S M P # = Item Number S=Satisfactory M=Marginal P=Poor H= Safety Hazard H

Exterior continued

24	✓			<b>Soffit/rafter tails</b> <u>Soffit</u> Wood <b>4x6 rafters</b> Wood ___Hardy Board ___Stucco ___Damaged wood ___Recommend repair/paint ___✓ <b>Please see the pest report</b>
25	✓			<b>Supports and piers</b> ___Concrete <b>4x4</b> Wood (21) ___Aluminum ___Damaged wood ___Recommend repair/paint ___✓ <b>Please see the pest report</b>
26		✓		<b>Exterior trim</b> ___Aluminum ___Vinyl <b>1x4</b> Wood ___Other ___✓ <b>Damaged wood</b> ___✓ <b>Recommend repair/paint</b> ___✓ <b>Please see the pest report</b>
27	✓			<b>Structure walls</b> ___✓Wood frame ___Brick ___Cement block ___Masonry ___Stone ___Poured in place ___✓Not visible ___✓ <b>Please see the pest report</b>

ROOF

28		✓		<b>Plumbing vents</b> ___Cast Iron ___✓Plastic ___✓Metal ___Steel ___None ___✓ <b>Missing rain/vent cap (over Sea and Green)</b> ___All sealed
29		✓		<b>Roofing</b> <b>Visibility 100 %</b> ___Limited by: _____ Inspected: ___From ground with binoculars ___Ladder at eaves ___✓ <b>On the roof</b> Style: ___✓ <b>Flat (over units)</b> ___Hip ___Gable ___Gambrel ___✓ <b>Shed (store fronts)</b> Covering#1 ___Asphalt ___Other <b>Torch (flat composite sheets)</b> Approximate age <b>15+</b> yrs. Covering#2 ___Asphalt ___Other <b>50-year composite shingle</b> Approximate age <b>15+</b> yrs. Covering#3 ___Asphalt ___Other _____ Approximate age _____ yrs. ___Curling ___Cupping ___Cracking ___Missing tabs <b>Flat Patched/over-sealed</b> ___Moss growth ___Nail popping ___Ponding ___Felt exposed ___Burn spots
30	✓			<b>Roof flashing</b> ___N/A ___Not visible ___Asphalt ___✓Galv./Aluminum ___Copper ___Pulled away from chimney ___Pulled away from roof ___Rusted ___Recommend sealing
31	na			<b>Roof valley</b> ___✓None ___Not visible ___Composite shingle ___Galv./Aluminum ___Holes ___Recommend sealing ___Rusted
32	na			<b>Skylights</b> ___Yes ___✓None ___Needs caulking ___Operates ___Does not operate
33	✓			<b>Ventilation</b> ___✓Gable ___Power ___Ridge ___Roof surface ___Soffit <b>(8)</b> Turbines ___Does not appear adequate ___Recommend additional ventilation

CARPORT \_\_\_✓**NO CARPORT**

34				___1 Car ___2 Car ___3 car
35				<b>Roofing</b> ___Same as Home ___ <b>Please see the pest report</b> Visibility____% Inspected: ___From ground with binoculars ___Ladder at eaves ___On the roof Style: ___Flat ___Hip ___Gable ___Gambrel ___Mansard ___Shed Covering#1 ___Asphalt ___Other_____ Approximate age _____ yrs Covering#2 ___Asphalt ___Other_____ Approximate age _____ yrs Covering#3 ___Asphalt ___Other_____ Approximate age _____ yrs ___Curling ___Cupping ___Cracking ___Missing tabs ___Missing shingles ___Burn spots ___Moss growth ___Nail popping ___Ponding ___Felt exposed ___Blocked drainage
36				<b>Ceiling</b> ___Wood ___Aluminum ___Damaged ___ <b>Please see the pest report</b>
37				<b>Walls</b> ___None ___Wood ___Other: ___Damaged wood ___ <b>Please see the pest report</b>
38				<b>Electrical outlets</b> ___None ___Operated ___ <b>Reverse polarity</b> ___ <b>Open ground</b> <b>GFCI protected</b> ___Yes ___No ___ <b>Potential safety hazard</b> ___ <b>Non-weatherproof box</b>
39				<b>Lighting</b> ___None ___Operates properly ___On the home ___Bulb out
40				<b>Columns</b> ___Aluminum ___Wood ___Steel ___Damaged columns ___ <b>Please see the pest report</b>
41				<b>Floor</b> ___Concrete ___Asphalt ___Wood ___Stress crack ___Displacement

#	S	M	P	# = Item Number	S=Satisfactory	M=Marginal	P=Poor	H = Safety Hazard	H	
42				___ Detached ___ Attached ___ 1 car ___ 2 car ___ 3 car ___ 4 car						
43				<b>Automatic opener</b> ___ None ___ Does not operate <b>Brand:</b> _____ ___ Safety reverse ___ Operable ___ Not operating ___ Recommend safety reverse						
44				<b>Columns</b> ___ None ___ Steel ___ Wood ___ Rusted ___ Damaged wood ___ Please see the pest report						
45				<b>Electrical outlets</b> ___ None ___ Operated ___ Reverse polarity ___ Open ground <b>GFI Protected</b> ___ Yes ___ No ___ Potential safety hazard ___ 220V						
46				<b>Lighting/switches</b> ___ None ___ Operates properly ___ Does not operate ___ Missing plates						
47				<b>Fascia</b> ___ Aluminum ___ Vinyl ___ Wood ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
48				<b>Fire safety separation wall and ceiling between garage &amp; living area</b> ___ N/A ___ Present ___ Missing ___ Safety hazard						
49				<b>Floor</b> ___ Concrete ___ Stress cracks ___ Horizontal/vertical displacement ___ Other _____ ___ Tripping hazard						
50				<b>Gas furnace, gas water heater, or gas fueled appliance located in garage</b> ___ Yes ___ No ___ Burner is located less than 18" above floor ___ Safety hazard						
51				<b>Rain gutters/downspouts</b> ___ None ___ Aluminum ___ Copper ___ Galvanized ___ Plastic ___ Downspout extensions recommended ___ Holes ___ Leaking connections ___ Rusting ___ Recommend cleaning ___ Recommend gutters and downspouts						
52				<b>Interior ceiling/walls</b> ___ Exposed framing ___ Drywall ___ CMU ___ Poured concrete						
53				<b>Overhead door</b> ___ None ___ Aluminum roll-up ___ Vinyl ___ Steel ___ Wood roll-up ___ Broken spring ___ Not operable ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
54				<b>Pedestrian entry door</b> ___ Metal clad ___ Wood ___ Please see the pest report ___ Damaged wood ___ Missing/broken hardware ___ Self-closing ___ Not fire rated						
55				<b>Roofing</b> Visibility _____% ___ Under the living area Inspected: ___ From ground with binoculars ___ Ladder at eaves ___ On the roof Style: ___ Flat ___ Hip ___ Gable ___ Gambrel ___ Mansard ___ Shed Covering#1 ___ Asphalt ___ Other _____ Approximate age _____ yrs. Covering#2 ___ Asphalt ___ Other _____ Approximate age _____ yrs. Covering#3 ___ Asphalt ___ Other _____ Approximate age _____ yrs. ___ Curling ___ Cupping ___ Cracking ___ Missing tabs ___ Missing shingles ___ Moss growth ___ Nail popping ___ Ponding ___ Felt exposed ___ Burn spots						
56				<b>Siding</b> ___ Wood ___ Hardy Board ___ Stone ___ Stucco ___ Vinyl ___ Aluminum ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
57				<b>Sill plates</b> ___ Floor level ___ Elevated ___ Not visible ___ Foundation bolts in place ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
58				<b>Soffit/rafter tails</b> ___ Vinyl ___ Wood ___ Stucco ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
59				<b>Exterior trim</b> ___ Vinyl ___ Wood ___ Damaged wood ___ Recommend repair/paint ___ Please see the pest report						
60				<b>Structure walls</b> ___ Wood frame ___ Brick ___ CMU block ___ Poured in place ___ Not visible ___ Partially visible ___ Please see the pest report						
61				<b>Windows/frames</b> ___ Aluminum frame ___ Vinyl frame ___ Metal ___ Wood ___ Operated ___ Cracked glass ___ Dual paned ___ Insulation leak ___ None						

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H	
<b><u>JJ'S KITCHEN</u></b>										
62	✓			Cabinets	___ Loose	___ Loose/missing hardware	___ None			
63	✓			Ceiling/walls	___ Cracks	___ Moisture stains	___ Missing hardware			
64	na			Countertop(s)	___ Tile	___ Needs caulking	___ Chipped tile			
65	✓			Sink(s)	___ ✓ Stainless steel	___ Chipped	___ Needs caulking			
66	na			Dishwasher	___ Yes	___ No	___ Operates	Performed full cycle test	___ Yes ___ No	
67	✓			Drain line	___ Poor drainage	___ Air-vac (on top of the sink) or 'High loop' (under the sink)				
68		✓		Electrical outlets	___ None	___ ✓ Operated	___ Open ground	___ Reverse polarity		
				GFCI protected	___ Yes	___ ✓ No	___ ✓ Potential safety hazard	___ ✓ Non GFI within 6' of water		
69	✓			Lighting	___ ✓ Operates properly	___ Does not operate	___ Bulb burned out	___ None		
70	✓			Exhaust fan	___ ✓ Yes	___ No	___ ✓ Operates	( ) Speeds		
71				Faucet	___ ✓ Operates	___ Hot/cold reversed	___ Leaks	___ Low flow aerator	1.2 gpm	
72		✓		Floor	___ ✓ Tile	8+/- Cracked tiles	___ Squeaks	___ Wood	___ Carpeted	___ Stained
73	na			Heat source	___ Present/operates	___ Low flow	___ Not operated	___ ✓ None		
74	na			Oven	___ ✓ Yes	___ No	___ ✓ Operating	___ ✓ Gas	Temp. set @ ___ Actual temp ___	
75	na			Range	___ ✓ Yes	___ No	___ Operate	___ ✓ Gas	___ Electric	
76	na			Microwave oven	___ Yes	___ No	___ Operates	___ Does not operate		
77	✓			Pipes	___ Cast iron	Pressure Copper	___ Galvanized	Drain Plastic	___ Steel	___ Leaking
78	na			Refrigerator	___ ✓ Yes	___ No	___ Operates	Temp. set @ ___ Actual temperature ___		
79	na			Window	___ Operated	___ Dual paned	___ Insulation leak	___ ✓ None		
80	na			Waste disposer	Brand _____	___ Operates properly	___ Does not operate	___ ✓ None		
<b><u>WATER HEATERS / Location: Storage room next to unit D</u></b>										
81				Appliances	___ Dryer	___ Washer	___ Furnace	___ Water heater		
82				Dryer, gas supply line	___ None	___ Shutoff valve present	___ Pipe only/capped			
83				Dryer venting	___ N/A	___ Ceiling	___ Not vented	___ Thru floor	___ Thru ext. wall	
84				Electrical outlets	___ None	___ Operated	___ Reverse polarity	___ Open ground	___ 220V	
				GFI protected	___ Yes	___ No	___ Potential safety hazard	___ Non GFI within 6' of water		
85				Lighting/switches	___ Operates properly	___ Does not operate	___ Bulb burned out	___ None		
86				Faucets	___ Operate	___ Hot/cold reversed	___ Leaks	___ Low flow aerator	___ gpm	
87				Laundry sink	___ None	___ Concrete	___ Fiberglass	___ Plastic	___ Steel	
					___ Hot/cold reversed	___ Leaking	___ Other _____			
88	✓			Water heater #1	___ ✓ Gas	___ ✓ Storage room/next to unit D	Capacity 50 gallons	Year 2013		
				Brand	Bradford White	Serial # KJ18873634-394	Model # M45036FBN			
					___ ✓ Relief valve present	___ ✓ Relief valve extension	___ ✓ Vent proper pitch	___ Pan		
					___ ✓ Seismic restraints/block in place	Temp. set at 'Hot'	Actual temp. ___ F.			
89	✓			Water heater #2	___ ✓ Gas	___ ✓ Storage room/next to unit D	Capacity 40 gallons	Year 2014		
				Brand	Bradford White	Serial # LD34343511-394	Model # M440T6FBN			
					___ ✓ Relief valve present	___ ✓ Relief valve extension	___ ✓ Vent proper pitch	___ Pan		
					___ ✓ Seismic restraints/block in place	Temp. set at 'Hot'	Actual temp. ___ F.			
90				Exhaust fan	___ Yes	___ No	___ Operates	___ Unable to operate		
91				Ceiling/walls/doors	___ Cracks	___ Moisture stains	___ Missing hardware			
92				Window	___ Operated	___ Dual paned	___ Insulation leak	___ Cracked glass	___ None	

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
<b><u>WILD GINGER KITCHEN</u></b>									
62a	✓			Cabinets	___ Loose	___ Loose/missing hardware	___ None		
63a	✓			Ceiling/walls	___ Cracks	___ Moisture stains	___ Missing hardware		
64a	✓			Countertop(s)	___ ✓ Stainless steel	___ Needs caulking	___ Chipped tile		
65a	✓			Sink(s)	___ ✓ Stainless steel	___ Chipped	___ Needs caulking		
66a	na			Dishwasher	___ ✓ Yes	___ No	___ Operates	Performed full cycle test	___ Yes ___ No
67a	✓			Drain line	___ Poor drainage	___ Air-vac (on top of the sink) or 'High loop' (under the sink)			
68a	✓			Electrical outlets	___ None	___ ✓ Operated	___ ✓ GFCI reset @ the outlet	___ GFCI protected	___ ✓ Yes ___ No ___ Potential safety hazard ___ Non GFI within 6' of water
69a	✓			Lighting	___ ✓ Operates properly	___ Does not operate	___ Bulb burned out	___ None	
70a	✓			Exhaust fan	___ ✓ Yes	___ No	___ ✓ Operates	(1) Speed	
71a	✓			Faucet	___ ✓ Operates	___ Hot/cold reversed	___ Leaks	___ Low flow aerator	___ gpm
72a	✓			Floor	___ Tile	___ ✓ Linoleum	___ Squeaks	___ Wood	___ Carpeted ___ Stained
73a	na			Heat source	___ Present/operates	___ Low flow	___ Not operated	___ ✓ None	
74a	na			Oven	___ ✓ Yes	___ No	___ Operates	___ ✓ Gas	Temp. set @ ___ Actual temp. ___
75a	na			Range	___ ✓ Yes	___ No	___ Operate	___ ✓ Gas	___ Electric
76a	na			Microwave oven	___ ✓ Yes	___ ✓ Not built-in	___ Operates	___ Does not operate	
77a	✓			Pipes	___ Cast iron	___ Pressure Copper	___ Galvanized	___ Drain Plastic	___ Steel ___ Leaking
78a	✓			Refrigerator	___ ✓ Yes	___ No	___ Operates	Temp. set @ ___ Actual temperature ___	
79a	✓			Window	___ Operated	___ Dual paned	___ Insulation leak	___ ✓ None	
80a	na			Waste disposer	Brand _____	___ Operates properly	___ Does not operate	___ ✓ None	
<b><u>WATER HEATER / LOCATION: REAR OF UNITS F/G</u></b>									
81a				Appliances	___ Dryer	___ Washer	___ Furnace	___ Water heater	
82a				Dryer, gas supply line	___ None	___ Shutoff valve present	___ Pipe only/capped		
83a				Dryer venting	___ N/A	___ Ceiling	___ Not vented	___ Thru floor	___ Thru ext. wall
84a				Electrical outlets	___ None	___ Operated	___ Reverse polarity	___ Open ground	___ 220V
				GFI protected	___ Yes	___ No	___ Potential safety hazard	___ Non GFI within 6' of water	
85a				Lighting/switches	___ Operates properly	___ Does not operate	___ Bulb burned out	___ None	
86a				Faucets	___ Operate	___ Hot/cold reversed	___ Leaks	___ Low flow aerator	___ gpm
87a				Laundry sink	___ None	___ Concrete	___ Fiberglass	___ Plastic	___ Steel
					___ Hot/cold reversed	___ Leaking	___ Other _____		
88a		✓		Water heater #3	___ ✓ Gas	___ ✓ Storage area behind Wild Ginger	Capacity 40 gallons	Year Newer	
				Brand Rheem Professional	Serial # ID plate removed	Model # ID plate removed	___ ✓ Relief valve present	___ No Relief valve extension	___ ✓ Vent proper pitch ___ Pan
					___ ✓ Seismic restraints/block in place	Temp. set at 'A'	Actual temp. 121.5 F.		
89a	na			Water heater #4	___ Gas	___ Electric	___ Oil	Capacity _____ gallons	Year _____
				Brand N/A	Serial # _____	Model # _____	___ Relief valve present	___ Relief valve extension	___ Vent proper pitch ___ Too hot
					___ Seismic restraints/block in place	Temp. set at _____	Actual temp. _____ F.		
90a				Exhaust fan	___ Yes	___ No	___ Operates	___ Unable to operate	
91a				Ceiling/walls/doors	___ Cracks	___ Moisture stains	___ Missing hardware		
92a				Window	___ Operated	___ Dual paned	___ Insulation leak	___ Cracked glass	___ None

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
112				<b>Access</b> ___ Limited ___ Standard door ___ Scuttle					
113				<b>Columns</b> ___ Wood ___ Steel A-frames ___ <b>Please see the pest report</b> ___ 4x4 ___ 4x6 ___ Metal connectors ___ Concrete piers ___ Wood pads ___ 6x6					
114				<b>Drain/Waste pipe</b> ___ Cast Iron ___ Copper ___ Plastic ___ Steel					
115				<b>Lighting</b> ___ Operating properly ___ Not operating ___ Bulb burned out ___ None					
116				<b>Floor</b> ___ Concrete ___ Wood ___ Dirt					
117	✓			<b>Foundation/walls</b> ___ ✓ CMU walls ___ ✓ Poured concrete slab ___ Foundation bolts in place ___ Horizontal cracks ___ Step crack ___ Vertical crack ___ ✓ Not visible (floor coverings)					
118				<b>Girders</b> ___ Steel frame ___ Wood ___ <b>Please see the pest report</b> ___ 4x4 ___ 4x6 ___ T-Straps/Gussets ___ Rusty ___ Partially visible ___ Not visible ___ 4x12					
119				<b>Insulation</b> ___ Batts ___ Styrofoam ___ Not visible ___ Recommended					
120				<b>Joists</b> ___ Trusses ___ Wood ___ 2x4 ___ 2x6 ___ 2x8 ___ 2x10 ___ 2x12 ___ Damaged wood ___ Not visible ___ Partially visible ___ <b>Please see the pest report</b>					
121				<b>Moisture present</b> ___ None ___ Walls ___ Floor ___ Main level sub floor ___ Floor joists					
122				<b>Sump pump</b> ___ None ___ Not tested ___ Not working ___ Working ___ <b>No safety cover</b>					
123				<b>Vapor barrier</b> ___ None ___ Fiberboard ___ Kraft paper ___ Plastic ___ Vinyl					
124				<b>Ventilation</b> ___ None ___ Fan/Blower ___ Screens ___ Windows					
125				<b>Water entry piping</b> ___ Not visible ___ Copper ___ Plastic ___ Galvanized					
126				<b>Water lines</b> ___ Partially visible ___ Copper ___ Plastic ___ Galvanized ___ Insulated					

**Utility/Access Map**



Front of building faces

**Northwest**

**See the attached map from the appraiser**



**Bathroom #1** Location Rear hall for Grace/Raven, Corky's/Smoke Shop

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H					
127	✓			<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains	<input type="checkbox"/> Missing hardware							
128	✓			<b>Electrical outlet</b>	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> GFCI reset @ outlet/right of the sink	<input checked="" type="checkbox"/> GFI protected	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Potential safety hazard	<input type="checkbox"/> Non GFI within 6' of water		
129	✓			<b>Lighting</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None						
130	✓			<b>Exhaust fan</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Not operated	<input type="checkbox"/> None							
131	✓			<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input type="checkbox"/> Tile	<input checked="" type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged				
132	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None						
133	✓			<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input checked="" type="checkbox"/> Pressure Copper	<input type="checkbox"/> Galvanized	<input checked="" type="checkbox"/> Drain Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking				
134	na			<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain
135	na			<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed						
136	✓			<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None							
137	✓			<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug							
138	✓			<b>Sink faucet</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Hot/cold reversed	<input checked="" type="checkbox"/> Low flow aerator	<input checked="" type="checkbox"/> 0.5 gpm	<input type="checkbox"/> Leak					
139			✓	<b>Toilet</b>	<input checked="" type="checkbox"/> Operated	<input type="checkbox"/> Low flow model	<input checked="" type="checkbox"/> 1.6 gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor					
140	na			<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking							
141	na			<b>Spa tub</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated							
142	na			<b>Window</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None					

**Bathroom #2** Location At the rear of JJ's Pizza kitchen

143	✓			<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains	<input type="checkbox"/> Missing hardware							
144	✓			<b>Electrical outlet</b>	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> GFCI reset @ outlet/right of the sink	<input checked="" type="checkbox"/> GFI protected	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Potential safety hazard	<input type="checkbox"/> Non GFI within 6' of water		
145	✓			<b>Lighting</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None						
146	✓			<b>Exhaust fan</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Not operated	<input type="checkbox"/> None							
147	✓			<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input checked="" type="checkbox"/> Tile	<input type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged				
148	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None						
149	✓			<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input checked="" type="checkbox"/> Pressure Copper	<input type="checkbox"/> Galvanized	<input checked="" type="checkbox"/> Drain Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking				
150	na			<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain
151	na			<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed						
152	✓			<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None							
153	✓			<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug							
154			✓	<b>Sink faucet</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Hot/cold reversed	<input type="checkbox"/> Low flow aerator	<input checked="" type="checkbox"/> 1.2 gpm	<input type="checkbox"/> Leak					
155	✓			<b>Toilet</b>	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> Low flow model	<input checked="" type="checkbox"/> 1.28 gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor					
156	✓			<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking							
157	na			<b>Spa tub</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated							
158	na			<b>Window</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None					

**Bathroom #3** Location Rear of Wild Ginger

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H					
159		✓		<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input checked="" type="checkbox"/> Gap at the top of the entry door	<input type="checkbox"/> Missing hardware							
160	✓			<b>Electrical outlet</b>	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> GFCI reset @ the outlet/right of the sink	<input checked="" type="checkbox"/> GFI protected	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Potential safety hazard	<input type="checkbox"/> Non GFI within 6' of water		
161	✓			<b>Lighting</b>	<input type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None						
162	✓			<b>Exhaust fan</b>	<input type="checkbox"/> Operates	<input type="checkbox"/> Not operated	<input type="checkbox"/> None							
163	✓			<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input type="checkbox"/> Tile	<input type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged				
164	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input type="checkbox"/> None						
165	✓			<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input checked="" type="checkbox"/> Pressure Copper	<input type="checkbox"/> Galvanized	<input checked="" type="checkbox"/> Drain Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking				
166	na			<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain
167	na			<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed						
168	✓			<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None							
169	✓			<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug							
170			✓	<b>Sink faucet</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Hot/cold reversed	<input type="checkbox"/> Low flow aerator	<input checked="" type="checkbox"/> 1.2 gpm	<input type="checkbox"/> Leak					
171			✓	<b>Toilet</b>	<input checked="" type="checkbox"/> Operated	<input type="checkbox"/> Low flow model	<input checked="" type="checkbox"/> 1.6 gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor					
172	na			<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking							
173	na			<b>Spa tub</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated							
174	✓			<b>Window</b>	<input checked="" type="checkbox"/> (0) Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input type="checkbox"/> None					

**Bathroom #4** Location Left side of Sea Green

175	✓			<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains	<input type="checkbox"/> Missing hardware							
176	✓			<b>Electrical outlet</b>	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> GFCI reset @ the sub panel GFCI breaker	<input checked="" type="checkbox"/> GFI protected	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Potential safety hazard	<input type="checkbox"/> Non GFI within 6' of water		
177	✓			<b>Lighting</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None						
178		✓		<b>Exhaust fan</b>	<input type="checkbox"/> Operates	<input checked="" type="checkbox"/> Not operating	<input type="checkbox"/> None							
179	✓			<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input type="checkbox"/> Tile	<input checked="" type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged				
180	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None						
181	✓			<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input checked="" type="checkbox"/> Pressure Copper	<input type="checkbox"/> Galvanized	<input checked="" type="checkbox"/> Drain Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking				
182	na			<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain
183	na			<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed						
184	✓			<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None							
185	✓			<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug							
186			✓	<b>Sink faucet</b>	<input checked="" type="checkbox"/> Operates	<input checked="" type="checkbox"/> No hot water	<input type="checkbox"/> Low flow aerator	<input checked="" type="checkbox"/> 2.2 gpm	<input type="checkbox"/> Leak					
187			✓	<b>Toilet</b>	<input checked="" type="checkbox"/> Operated	<input type="checkbox"/> Low flow model	<input checked="" type="checkbox"/> 1.6 gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor					
188	na			<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking							
189	na			<b>Spa tub</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated							
190	na			<b>Window</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None					

**Bathroom #5** Location Right side of Sea Green

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H	
159a	✓			<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains	<input type="checkbox"/> Missing hardware			
160a		✓		<b>Electrical outlet</b>	<input type="checkbox"/> None	<input checked="" type="checkbox"/> Operated	<input type="checkbox"/> Open ground	<input type="checkbox"/> Reverse polarity		
				<b>GFI protected</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Potential safety hazard	<input checked="" type="checkbox"/> Non GFI within 6' of water		
161a	✓			<b>Lighting</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None		
162a			✓	<b>Exhaust fan</b>	<input type="checkbox"/> Operates	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None			
163a	✓			<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input type="checkbox"/> Tile	<input checked="" type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged
164a	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None		
165a	✓			<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input checked="" type="checkbox"/> Pressure Copper	<input type="checkbox"/> Galvanized	<input checked="" type="checkbox"/> Drain Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking
166a	na			<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input checked="" type="checkbox"/> None	
					<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain	
167a	na			<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed		
168a	✓			<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None			
169a	✓			<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug			
170a			✓	<b>Sink faucet</b>	<input checked="" type="checkbox"/> Operates	<input type="checkbox"/> Hot/cold reversed	<input type="checkbox"/> Low flow aerator	<input checked="" type="checkbox"/> 2.2 gpm	<input type="checkbox"/> Leak	
171a	✓			<b>Toilet</b>	<input checked="" type="checkbox"/> Operated	<input checked="" type="checkbox"/> Low flow model	<input checked="" type="checkbox"/> 1.28 gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor	
172a	na			<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking			
173a	na			<b>Spa tub</b>	<input checked="" type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated			
174a	na			<b>Window</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None	

**Bathroom #6** Location \_\_\_\_\_

175a				<b>Ceiling/walls/door</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains	<input type="checkbox"/> Missing hardware			
176a				<b>Electrical outlet</b>	<input type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Open ground	<input type="checkbox"/> Reverse polarity		
				<b>GFI protected</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Potential safety hazard	<input type="checkbox"/> Non GFI within 6' of water		
177a				<b>Lighting</b>	<input type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None		
178a				<b>Exhaust fan</b>	<input type="checkbox"/> Operates	<input type="checkbox"/> Not operated	<input type="checkbox"/> None			
179a				<b>Floor</b>	<input type="checkbox"/> Carpet	<input type="checkbox"/> Stained	<input type="checkbox"/> Tile	<input type="checkbox"/> Linoleum	<input type="checkbox"/> Wood	<input type="checkbox"/> Damaged
180a				<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input type="checkbox"/> None		
181a				<b>Pipes</b>	<input type="checkbox"/> Cast iron	<input type="checkbox"/> Copper	<input type="checkbox"/> Galvanized	<input type="checkbox"/> Plastic	<input type="checkbox"/> Steel	<input type="checkbox"/> Leaking
182a				<b>Shower/tub area</b>	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Tile	<input type="checkbox"/> Marble	<input type="checkbox"/> Steel	<input type="checkbox"/> None	
					<input type="checkbox"/> Caulk/grout needed	<input type="checkbox"/> Loose tiles	<input type="checkbox"/> Missing plug	<input type="checkbox"/> Rotted floor	<input type="checkbox"/> Slow drain	
183a				<b>Shower/tub faucet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow shower head	<input type="checkbox"/> gpm	<input type="checkbox"/> Hot/cold reversed		
184a				<b>Sink</b>	<input type="checkbox"/> Needs caulking	<input type="checkbox"/> Chipped	<input type="checkbox"/> None			
185a				<b>Sink drain</b>	<input type="checkbox"/> Slow drainage	<input type="checkbox"/> Pop-up does not operate	<input type="checkbox"/> Missing plug			
186a				<b>Sink faucet</b>	<input type="checkbox"/> Operates	<input type="checkbox"/> Hot/cold reversed	<input type="checkbox"/> Low flow aerator	<input type="checkbox"/> gpm	<input type="checkbox"/> Leak	
187a				<b>Toilet</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Low flow model	<input type="checkbox"/> gpf	<input type="checkbox"/> Cracked	<input type="checkbox"/> Loose bowl at floor	
188a				<b>Cabinets/Counter top</b>	<input type="checkbox"/> Loose	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> Needs caulking			
189a				<b>Spa tub</b>	<input type="checkbox"/> None	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated			
190a				<b>Window</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input type="checkbox"/> None	

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
<b>Unit D Room Location Grace and Raven Cosmetology</b>									
191	✓			<b>Ceiling</b>	___ Cracks	___ Moisture stains present	___ Holes		
192	✓			<b>Door</b>	___ Loose hinges/screws	___ Holes	___ Missing hardware	___ None	
193	✓			<b>Electrical outlets</b>	___✓ Operate properly	___ Reverse polarity	___ Open ground	___ None	
194	✓			<b>Lighting</b>	___✓ Fan	___✓ Operates properly	___ Does not operate	___ Bulb burned out	___ None
195	✓			<b>Electrical switch(s)</b>	___✓ Operates properly	___ Does not operate	___ None		
196	✓			<b>Floor</b>	___✓ Wood	___ Carpet	___ Stains	___ Linoleum	___ Tile ___ Squeaks
197	✓			<b>Heat source</b>	___✓ Present/operates	___ Low flow	___ Not operated	___ None	
198	✓			<b>Walls</b>	___ Cracks	___ Holes	___ Moisture stains present		
199	✓			<b>Windows</b>	_(0) Operated	___ Dual paned	___ Insulation leak	___ Cracked glass	___ None

<b>Unit C Room Location Corky's Barber Shop hair cutting room</b>									
200	✓			<b>Ceiling</b>	___ Cracks	___ Moisture stains present	___ Holes		
201	✓			<b>Doors</b>	___ Loose hinges/screws	___ Holes	___ Missing hardware	___ None	
202			✓	<b>Electrical outlets</b>	___✓ Operate	<b>(1) Not GFCI protected</b>	___ Open ground	___ None	
203	✓			<b>Lighting</b>	___ Fan	___✓ Operates properly	___ Does not operate	___ Bulb burned out	___ None
204	✓			<b>Electrical switch(s)</b>	___✓ Operates properly	___ Does not operate	___ None		
205	✓			<b>Floor</b>	___ Wood	___ Carpet	___ Stains	___✓ Linoleum	___ Tile ___ Squeaks
206	✓			<b>Heat source</b>	___✓ Present/operates	___ Low flow	___ Not operated	___ None	
207	✓			<b>Walls</b>	___ Cracks	___ Holes	___ Moisture stains present		
208	✓			<b>Windows</b>	_(0) Operated	___ Dual paned	___ Insulation leak	___ Cracked glass	___ None

<b>Unit B Room Location JJ's Pizza/dining area</b>									
209	✓			<b>Ceiling</b>	___ Cracks	___ Moisture stains present	___ Holes		
210	na			<b>Doors</b>	___ Loose hinges/screws	___ Holes	___ Missing hardware	___✓ None	
211	✓			<b>Electrical outlets</b>	___✓ Operate properly	___ Reverse polarity	___ Open ground	___ None	
212	✓			<b>Lighting</b>	___ Fan	___✓ Operates properly	___ Does not operate	___ Bulb burned out	___ None
213	✓			<b>Electrical switch(s)</b>	___✓ Operates properly	___ Does not operate	___ None		
214		✓		<b>Floor</b>	___ Wood	___ Carpet	___ Stains	___ Linoleum	___✓ Tile <b>Minor Cracks</b>
215	na			<b>Heat source</b>	___ Present/operates	___ Low flow	___ Not operated	___✓ None	
216	✓			<b>Walls</b>	___ Cracks	___ Holes	___ Moisture stains present		
217	✓			<b>Windows</b>	_(6) Operated	___ Dual paned	___ Insulation leak	___ Cracked glass	___ None

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H	
				<b>Unit E Room Location <u>Smoke Shop/display area</u></b>						
218	✓			<b>Ceiling</b>	___Cracks	___Moisture stains present	___Holes			
219	✓			<b>Doors</b>	___Loose hinges/screws	___Holes	___Missing hardware	___None		
220	✓			<b>Electrical outlets</b>	___✓Operate properly	___Reverse polarity	___Open ground	___None		
221			✓	<b>Lighting</b>	___Fan	___✓Operates properly	___Does not operate	___✓Exposed wires		
222	✓			<b>Electrical switch(s)</b>	___✓Operates properly	___Does not operate	___None			
223	✓			<b>Floor</b>	___Wood	___✓Concrete	___Stains	___Linoleum	___Minor Cracks	___No Separation
224			✓	<b>Heat source</b>	___✓Present	___Low flow	___✓Not operational	___None		
225	✓			<b>Walls</b>	___Cracks	___Holes	___Moisture stains present			
226	✓			<b>Windows</b>	___(0)Operated	___Dual paned	___Insulation leak	___Cracked glass	___None	

				<b>Unit G Room Location <u>Wild Ginger/dining area</u></b>						
227	✓			<b>Ceiling</b>	___Cracks	___Moisture stains present	___Holes			
228	na			<b>Doors</b>	___Loose hinges/screws	___Holes	___Missing hardware	___✓None		
229	✓			<b>Electrical outlets</b>	___✓Operate properly	___Reverse polarity	___Open ground	___None		
230	✓			<b>Lighting</b>	___Fan	___✓Operates properly	___Does not operate	___Bulb burned out	___None	
231	✓			<b>Electrical switch(s)</b>	___✓Operates properly	___Does not operate	___None			
232	✓			<b>Floor</b>	___Wood	___✓Concrete	___Stains	___Linoleum	___Tile	___Squeaks
233	✓			<b>Heat source</b>	___✓Present/operates	___Low flow	___Not operated	___None		
234	✓			<b>Walls</b>	___Cracks	___Holes	___Moisture stains present			
235	✓			<b>Windows</b>	___(0)Operated	___Dual paned	___Insulation leak	___Cracked glass	___None	

				<b>Unit's A and F Room Location <u>Sea Green/front display room</u></b>						
236	✓			<b>Ceiling</b>	___Cracks	___Moisture stains present	___Holes			
237	na			<b>Doors</b>	___Loose hinges/screws	___Holes	___Missing hardware	___✓None		
238	✓			<b>Electrical outlets</b>	___✓Operate properly	___Reverse polarity	___Open ground	___None		
239	✓			<b>Lighting</b>	___Fan	___✓Operates properly	___Does not operate	___Bulb burned out	___None	
240	✓			<b>Electrical switch(s)</b>	___✓Operates properly	___Does not operate	___None			
241	✓			<b>Floor</b>	___Wood	___✓Concrete	___Stains	___Linoleum	___Tile	___Squeaks
242	✓			<b>Heat source</b>	___✓Present/operates	___Low flow	___Not operated	___None		
243	✓			<b>Walls</b>	___Cracks	___Holes	___Moisture stains present			
244	✓			<b>Windows</b>	___(0)Operated	___Dual paned	___Insulation leak	___Cracked glass	___None	

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H	
<b>Unit's A and F Room Location Sea Green, right side display room</b>										
245	✓			<b>Ceiling</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains present	<input type="checkbox"/> Holes			
246	✓			<b>Doors</b>	<input type="checkbox"/> Loose hinges/screws	<input type="checkbox"/> Holes	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> None		
247	✓			<b>Electrical outlets</b>	<input checked="" type="checkbox"/> Operate properly	<input type="checkbox"/> Reverse polarity	<input type="checkbox"/> Open ground	<input type="checkbox"/> None		
248	✓			<b>Lighting</b>	<input type="checkbox"/> Fan	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None	
249	✓			<b>Electrical switch(s)</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> None			
250	✓			<b>Floor</b>	<input type="checkbox"/> Wood	<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> Stains	<input type="checkbox"/> Linoleum	<input type="checkbox"/> Tile	<input type="checkbox"/> Squeaks
251	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None		
252	✓			<b>Walls</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Holes	<input type="checkbox"/> Moisture stains present			
253	na			<b>Windows</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None	

<b>Unit's A and F Room Location Sea Green/left side display room</b>									
254	✓			<b>Ceiling</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains present	<input type="checkbox"/> Holes		
255	✓			<b>Doors</b>	<input type="checkbox"/> Loose hinges/screws	<input type="checkbox"/> Holes	<input checked="" type="checkbox"/> Aluminum roll-up door		
256	✓			<b>Electrical outlets</b>	<input checked="" type="checkbox"/> Operate properly	<input type="checkbox"/> Reverse polarity	<input type="checkbox"/> Open ground	<input type="checkbox"/> None	
257	✓			<b>Lighting</b>	<input type="checkbox"/> Fan	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None
258	✓			<b>Electrical switch(s)</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> None		
259			✓	<b>Floor</b>	<input type="checkbox"/> Wood	<input checked="" type="checkbox"/> Concrete	<input checked="" type="checkbox"/> Large cracks	<input checked="" type="checkbox"/> Sloping	<input type="checkbox"/> Tile
260	✓			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input type="checkbox"/> None	
261	✓			<b>Walls</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Holes	<input type="checkbox"/> Moisture stains present		
262	na			<b>Windows</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input type="checkbox"/> None

<b>Unit's A and F Room Location Sea Green/rear storage room</b>										
263	✓			<b>Ceiling</b>	<input type="checkbox"/> Cracks	<input type="checkbox"/> Moisture stains present	<input type="checkbox"/> Holes			
264	✓			<b>Doors</b>	<input type="checkbox"/> Loose hinges/screws	<input type="checkbox"/> Holes	<input type="checkbox"/> Missing hardware	<input type="checkbox"/> None		
265	✓			<b>Electrical outlets</b>	<input checked="" type="checkbox"/> Operate properly	<input type="checkbox"/> Reverse polarity	<input type="checkbox"/> Open ground	<input type="checkbox"/> None		
266	✓			<b>Lighting</b>	<input type="checkbox"/> Fan	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> Bulb burned out	<input type="checkbox"/> None	
267	✓			<b>Electrical switch(s)</b>	<input checked="" type="checkbox"/> Operates properly	<input type="checkbox"/> Does not operate	<input type="checkbox"/> None			
268	✓			<b>Floor</b>	<input type="checkbox"/> Wood	<input checked="" type="checkbox"/> Concrete	<input type="checkbox"/> Stains	<input type="checkbox"/> Linoleum	<input type="checkbox"/> Tile	<input type="checkbox"/> Squeaks
269	na			<b>Heat source</b>	<input type="checkbox"/> Present/operates	<input type="checkbox"/> Low flow	<input type="checkbox"/> Not operated	<input checked="" type="checkbox"/> None		
270		✓		<b>Walls</b>	<input checked="" type="checkbox"/> Cracks	<input type="checkbox"/> Holes	<input type="checkbox"/> Moisture stains present			
271	na			<b>Windows</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Dual paned	<input type="checkbox"/> Insulation leak	<input type="checkbox"/> Cracked glass	<input checked="" type="checkbox"/> None	

**Attic / Fireplace / Smoke Detectors / Stairs**

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
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Fireplace     No Fireplace

272				Location #1 _____ Location #2 _____ Location #3 _____ Fuel: ___ Gas ___ Wood ___ Other _____ ___ Free standing ___ Masonry ___ Metal prefab ___ Insert <b>___ Open joints or cracks in firebox. Recommend repair by qualified person.</b> <b>___ Recommend having flue cleaned and re-examined</b>
273				<b>Damper</b> ___ Damper operates ___ Damper damaged ___ Damper missing ___ Locked open
274				<b>Electric blower</b> ___ Operates ___ Does not operate ___ None
275				<b>Hearth</b> ___ Brick ___ Concrete ___ Stone ___ Tile ___ Wood ___ None ___ Other _____ ___ Undersized ___ Inadequate
276				<b>Mantle</b> ___ Brick ___ Concrete ___ Stone ___ Tile ___ Wood ___ None ___ Not secure

Stairs     No Stairs

277				___ Adequate headroom ___ Handrail present ___ Inconsistent stair riser ___ Incorrect stair tread width ___ Stringers not visible <b>___ Recommend hand railings</b>
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0 Smoke detectors    0 Carbon monoxide detectors

278				<u>0</u> Smoke detectors tested <u>0</u> Operate
279				<u>0</u> Carbon monoxide detectors in place <u>0</u> Operate

Attic    \_\_\_ No Attic

280	<input checked="" type="checkbox"/>			<b>Access</b> ___ No access ___ Pull down <b>(2) Scuttles</b> ___ Stairs ___ Door Location: <b>Rear exterior Wild Ginger</b> <b>Rear exterior Smoke Shop</b> ___ Garage
281	<input checked="" type="checkbox"/>			<b>Ceiling joist</b> ___ Metal <input checked="" type="checkbox"/> Trusses <input checked="" type="checkbox"/> Wood <input checked="" type="checkbox"/> 2x4 ___ 2x6 ___ 2x8 ___ 2x10 ___ 2x12 ___ Damaged Wood ___ Partially visible ___ Moisture stains <input checked="" type="checkbox"/> <b>Please see the pest report</b>
282	<input checked="" type="checkbox"/>			<b>Electrical</b> ___ Evidence of non-qualified workmanship ___ <b>Wires not terminated in box</b> ___ <b>Boxes covered with insulation</b> ___ <b>Recommend qualified electrician inspect</b>
283	na			<b>Lighting</b> ___ Operates properly ___ Does not operate ___ Bulb burned out <input checked="" type="checkbox"/> None
284	na			<b>Bathroom exhaust vents</b> ___ In attic ___ To the exterior <input checked="" type="checkbox"/> Not visible ___ None
285	na			<b>Flooring</b> ___ Complete ___ Partial <input checked="" type="checkbox"/> None ___ <b>Please see the pest report</b>
286	<input checked="" type="checkbox"/>			<b>Gas lines</b> <input checked="" type="checkbox"/> Present
287	<input checked="" type="checkbox"/>			<b>Inspected from</b> <input checked="" type="checkbox"/> Access opening ___ In the attic ___ Evidence of water condensation or leaks ___ <b>Structural problem noted</b>
288	na			<b>Insulation</b> ___ Fiberglass batts ___ Blown fiberglass Approximate R-Value _____ ___ In ceiling joists ___ In the rafters ___ In the wall <input checked="" type="checkbox"/> <b>Recommend insulation</b>
289	na			<b>Power vent</b> ___ Operating ___ Not tested ___ Thermostat present ___ Recommend humidistat be installed
290	<input checked="" type="checkbox"/>			<b>Plumbing vent pipes</b> ___ Cast Iron ___ Copper <input checked="" type="checkbox"/> Plastic <input checked="" type="checkbox"/> Metal ___ Steel
291	<input checked="" type="checkbox"/>			<b>Roof rafters</b> ___ Metal <input checked="" type="checkbox"/> Trusses <input checked="" type="checkbox"/> Wood <input checked="" type="checkbox"/> 2x4 ___ 2x6 ___ 2x8 ___ 2x10 ___ 2x12 ___ Collar ties present ___ Damaged wood ___ Moisture stains <input checked="" type="checkbox"/> <b>Please see the pest report</b>
292	<input checked="" type="checkbox"/>			<b>Roof sheathing</b> <input checked="" type="checkbox"/> Plywood ___ Wood ___ Particle board ___ OSB ___ Damaged Wood ___ Moisture stains <input checked="" type="checkbox"/> <b>Please see the pest report</b>
293	<input checked="" type="checkbox"/>			<b>Water lines</b> <input checked="" type="checkbox"/> Present ___ Insulated ___ Leaking ___ None visible

#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
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**HEATING SYSTEM**

294	na			<b>Distribution ducts</b> <input checked="" type="checkbox"/> None <input type="checkbox"/> Flex duct <input type="checkbox"/> Metal duct <input type="checkbox"/> Metal/floor joists
295	na			<b>Filters</b> <input checked="" type="checkbox"/> N/A <input type="checkbox"/> None <input type="checkbox"/> Electrostatic <input type="checkbox"/> Standard disposable    Size _____ <b>Now/every 3-4 months</b> Recommend replace    Filter location _____
296		<input checked="" type="checkbox"/>		<p><b>#1 Furnace/Wall heater</b>    <input type="checkbox"/>Furnace    <input checked="" type="checkbox"/>Wall heater Unit D Brand <u>Williams</u>    Model <u>3509622</u> <b>Location</b> <u>Unit D/Grace &amp; Raven Cosmetology</u> Serial # <u>29030988</u>    Approximate age <u>2003</u></p> <p><b>#2 Furnace/Wall heater</b>    <input type="checkbox"/>Furnace    <input checked="" type="checkbox"/>Wall heater Unit C Brand <u>Williams</u>    Model <u>2509622</u> <b>Location</b> <u>Unit C/Corky's Barber Shop</u> Serial # <u>35118230D</u>    Approximate age <u>2003</u></p> <p><b>#3 Furnace/Wall heater</b>    <input type="checkbox"/>Furnace    <input checked="" type="checkbox"/>Overhead heater Unit E Brand <u>Peerless</u>    Model <u>Not accessible</u> <b>Location</b> <u>Unit E/Smoke Shop</u> Serial # <u>Not accessible</u>    Approximate age <u>U/K</u></p> <p><b>#4 Furnace/Wall heater</b>    <input type="checkbox"/>Furnace    <input type="checkbox"/>Wall heater Units A and F Brand <u>Peerless</u>    Model <u>Not accessible</u> <b>Location</b> <u>Units A and F/Sea Green</u> Serial # <u>Not accessible</u>    Approximate age <u>U/K</u></p> <p>Fuel <u>All Natural gas</u>    <input type="checkbox"/>Electric    <input type="checkbox"/>Propane    <input type="checkbox"/>Wood    <input type="checkbox"/>Heat pump    <input type="checkbox"/>Oil Type    <input type="checkbox"/>Floor radiant    <input type="checkbox"/>Forced air    <input type="checkbox"/>Hot water    <u>All Gravity flow</u>    <input type="checkbox"/>Motor vibration</p>
297	<input checked="" type="checkbox"/>			<b>Flues</b> <input type="checkbox"/> N/A <input checked="" type="checkbox"/> Metal <input type="checkbox"/> Plastic <input checked="" type="checkbox"/> Proper pitch <input type="checkbox"/> Rusted
298	<input checked="" type="checkbox"/>			<b>Heat exchanger check</b> <input checked="" type="checkbox"/> N/A, sealed system <input type="checkbox"/> No access <input type="checkbox"/> Visual with mirror <input type="checkbox"/> Rusted <input type="checkbox"/> Flame distortion <b>Recommend HVAC Technician evaluate</b>
299	na			<b>Heat pump</b> <input checked="" type="checkbox"/> None
300	<input checked="" type="checkbox"/>			<b>Main fuel shutoff location</b> <input checked="" type="checkbox"/> Outside at the gas meters <input type="checkbox"/> On tank <input type="checkbox"/> Not found <input type="checkbox"/> N/A
301	na			<b>Return ducts</b> <input type="checkbox"/> Flex duct <input type="checkbox"/> Metal duct <input type="checkbox"/> Metal/floor joists <input checked="" type="checkbox"/> None
302	<input checked="" type="checkbox"/>			<b>Safety controls</b> <input type="checkbox"/> Disconnected

**Cooling System    No Cooling system**

303				<p><b>Central unit(s)</b> Energy Source    <input type="checkbox"/>Electric    <input type="checkbox"/>Gas    <input type="checkbox"/>Other _____ Operated    <input type="checkbox"/>Yes    <input type="checkbox"/>No    <input type="checkbox"/>Ambient air temperature to low Refrigerant lines:    <input type="checkbox"/>Damaged    <input type="checkbox"/>Signs of leakage    <input type="checkbox"/>Insulation recommended</p>
304				<p><b>Window/wall units</b>    <input type="checkbox"/>None    <input type="checkbox"/>Operates properly    <input type="checkbox"/>Ambient air temperature to low Temperature set @ _____    Actual temperature _____</p>
305				<p><b>Well pump</b>    <input type="checkbox"/>None    <input type="checkbox"/>Shared well    <input type="checkbox"/>Submersible    <input type="checkbox"/>Well house    <input type="checkbox"/>Well pit <input type="checkbox"/>Should be inspected and certified by a licensed well and pump inspector</p>



#	S	M	P	# = Item Number	S = Satisfactory	M = Marginal	P = Poor	H = Safety Hazard	H
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**Electrical Main Panels**

306	✓			<b>Location</b> <u>Please see the map on page 7</u>	Maximum amps rated <u>U/K</u>	Volts <u>120 / 240</u>				
				<input checked="" type="checkbox"/> Breakers	<input checked="" type="checkbox"/> Appears grounded	<input type="checkbox"/> Panel not accessible				
307	✓			<b>Branch wire</b> <u>To the sub panels Aluminum</u>	<input type="checkbox"/> Copper	<input type="checkbox"/> Not visible				
				<input type="checkbox"/> Conduit	<input type="checkbox"/> Knob & tube	<input type="checkbox"/> Romex	<input type="checkbox"/> Double tapping	<input type="checkbox"/> Undersized wire		
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						
308	na			<b>GFCI breaker</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated	<input type="checkbox"/> Does not operate	<input checked="" type="checkbox"/> None		
309	✓			<b>Main wire</b>	<input type="checkbox"/> Aluminum	<input checked="" type="checkbox"/> Copper	<input type="checkbox"/> Not visible			

**Electrical sub panel #1**  None apparent

310			✓	<b>Location</b> <u>Rear hallway / JJ's</u>	Maximum amps rated <u>125</u>				✓	
				<input type="checkbox"/> Not evaluated	<input checked="" type="checkbox"/> Missing breakers/blank caps	<input checked="" type="checkbox"/> Circuits labeled				
311	✓			<b>Branch wire</b>	<input type="checkbox"/> Aluminum	<input checked="" type="checkbox"/> Copper	<input type="checkbox"/> Copper clad aluminum	<input type="checkbox"/> Not visible		
				<input type="checkbox"/> Conduit	<input type="checkbox"/> Knob & tube	<input type="checkbox"/> Romex	<input type="checkbox"/> Double tapping	<input type="checkbox"/> Undersized wire		
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						
312	na			<b>GFCI breaker</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated	<input type="checkbox"/> Does not operate	<input checked="" type="checkbox"/> None		
313	✓			<b>Main wire</b> <u>From the meter panel Aluminum</u>	<input type="checkbox"/> Copper	<input type="checkbox"/> Not visible				
314	✓			<b>Neutral/ground separated</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						

**Electrical sub panel #2**  None apparent

315	✓			<b>Location</b> <u>Rear hallway / Corky's</u>	Maximum amps rated <u>100</u>					
				<input type="checkbox"/> Not evaluated	<input type="checkbox"/> Panel not accessible	<input checked="" type="checkbox"/> Circuits labeled				
316	✓			<b>Branch wire</b>	<input type="checkbox"/> Aluminum	<input checked="" type="checkbox"/> Copper	<input type="checkbox"/> Copper clad aluminum	<input type="checkbox"/> Not visible		
				<input type="checkbox"/> Conduit	<input type="checkbox"/> Knob & tube	<input type="checkbox"/> Romex	<input type="checkbox"/> Double tapping	<input type="checkbox"/> Undersized wire		
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						
317	na			<b>GFCI breaker</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated	<input type="checkbox"/> Does not operate	<input checked="" type="checkbox"/> None		
318	✓			<b>Main wire</b> <u>From the meter panel Aluminum</u>	<input type="checkbox"/> Copper	<input type="checkbox"/> Not visible				
319	✓			<b>Neutral/ground separated</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						

**Electrical sub panel #3**  None apparent

320	✓			<b>Location</b> <u>Rear hallway / Smoke Shop</u>	Maximum amps rated <u>100</u>					
				<input type="checkbox"/> Not evaluated	<input type="checkbox"/> Panel not accessible	<input checked="" type="checkbox"/> Circuits labeled				
321	✓			<b>Branch wire</b>	<input type="checkbox"/> Aluminum	<input checked="" type="checkbox"/> Copper	<input type="checkbox"/> Copper clad aluminum	<input type="checkbox"/> Not visible		
				<input type="checkbox"/> Conduit	<input type="checkbox"/> Knob & tube	<input type="checkbox"/> Romex	<input type="checkbox"/> Double tapping	<input type="checkbox"/> Undersized wire		
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						
322	na			<b>GFCI breaker</b>	<input type="checkbox"/> Operated	<input type="checkbox"/> Not operated	<input type="checkbox"/> Does not operate	<input checked="" type="checkbox"/> None		
323	✓			<b>Main wire</b> <u>From the meter panel Aluminum</u>	<input type="checkbox"/> Copper	<input type="checkbox"/> Not visible				
324	✓			<b>Neutral/ground separated</b>	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No				
				<b>Recommend a qualified electrician to re-evaluate/repair</b>						

**Electrical sub panel #4**       None apparent

310a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Location</b> <u>Rear room of Wild Ginger</u> Maximum amps rated <u>125</u> <input type="checkbox"/> Not evaluated <input type="checkbox"/> Panel not accessible <input checked="" type="checkbox"/> Circuits partially labeled
311a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Branch wire</b> <input type="checkbox"/> Aluminum <input checked="" type="checkbox"/> Copper <input type="checkbox"/> Copper clad aluminum <input type="checkbox"/> Not visible <input type="checkbox"/> Conduit <input type="checkbox"/> Knob & tube <input type="checkbox"/> Romex <input type="checkbox"/> Double tapping <input type="checkbox"/> Undersized wire <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>
312a	na	<input type="checkbox"/>	<b>GFCI breaker</b> <input type="checkbox"/> Operated <input type="checkbox"/> Not operated <input type="checkbox"/> Does not operate <input checked="" type="checkbox"/> None
313a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Main wire</b> <u>From the meter panel Aluminum</u> <input type="checkbox"/> Copper <input type="checkbox"/> Not visible
314a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Neutral/ground separated</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>

**Electrical sub panel #5**       None apparent

315a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Location</b> <u>Sea Green/left side display room</u> Maximum amps rated <u>100</u> <input type="checkbox"/> Not evaluated <input type="checkbox"/> Panel not accessible <input checked="" type="checkbox"/> Circuits labeled
316a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Branch wire</b> <input type="checkbox"/> Aluminum <input checked="" type="checkbox"/> Copper <input type="checkbox"/> Copper clad aluminum <input type="checkbox"/> Not visible <input type="checkbox"/> Conduit <input type="checkbox"/> Knob & tube <input type="checkbox"/> Romex <input type="checkbox"/> Double tapping <input type="checkbox"/> Undersized wire <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>
317a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>GFCI breaker</b> <u>(1)</u> Operated <input type="checkbox"/> Not operated <input type="checkbox"/> Does not operate <input type="checkbox"/> None
318a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Main wire</b> <u>From the meter panel Aluminum</u> <input type="checkbox"/> Copper <input type="checkbox"/> Not visible
319a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Neutral/ground separated</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>

**Electrical sub panel #6**       None apparent

320a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Location</b> _____      Maximum amps rated _____ <input type="checkbox"/> Not evaluated <input type="checkbox"/> Panel not accessible <input type="checkbox"/> Circuits labeled
321a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Branch wire</b> <input type="checkbox"/> Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> Copper clad aluminum <input type="checkbox"/> Not visible <input type="checkbox"/> Conduit <input type="checkbox"/> Knob & tube <input type="checkbox"/> Romex <input type="checkbox"/> Double tapping <input type="checkbox"/> Undersized wire <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>
322a	<input type="checkbox"/>	<input type="checkbox"/>	<b>GFCI breaker</b> <input type="checkbox"/> Operated <input type="checkbox"/> Not operated <input type="checkbox"/> Does not operate <input type="checkbox"/> None
323a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Main wire</b> <input type="checkbox"/> Aluminum <input type="checkbox"/> Copper <input type="checkbox"/> Copper clad aluminum <input type="checkbox"/> Not visible
324a	<input type="checkbox"/>	<input type="checkbox"/>	<b>Neutral/ground separated</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> <b>Recommend a qualified electrician to re-evaluate/repair</b>

**ITEMS OF CONCERN... THESE ITEMS WILL NEED ATTENTION IN THE NEAR FUTURE**

Item #	The item number is in reference to the item of concern from the previous pages
0	<b>Parking lot</b> -Toward the rear of the building, some of the asphalt has ‘alligatored’ (cracked) and settled downward. This is probably caused by larger delivery trucks turning and parking in this area. <b>Please see the photos following the summary items.</b>
13	<b>Deck</b> -There is some wood damage to the step railings up to the deck from the parking lot in front of unit D/Grace and Raven Cosmetology. Please see the pest report for any additional details. <b>Please see the photos following the summary items.</b>
16	<b>Exterior, electrical outlets</b> -The outlet on the store room for JJ’s is damaged (top portion of the outlet is broken) and this outlet and the outlet next to Wild Ginger restroom are not GFCI protected. GFCI <b>protection was not required</b> at this location when this building was built. I recommend having a licensed electrician re-evaluate and install GFCI protection where needed to meet the current building and safety codes. <b>Please see the photo following the summary items.</b>
19	<b>Rain gutters</b> -There are gutters across the rear of the building. There are no gutters off of the lower shed style roof that is over all of the store fronts. There are some dents in the existing gutter at the rear of the building. Gutters are recommended wherever water drains off of the roofing. <b>Please see the photos following the summary items.</b>
20	<b>Water faucets/water pressure</b> -CCSD will required anti-siphon valves on the tips of all exterior faucets (3). <b>Please see the photo following the summary items for an example of an anti-siphon valve.</b>
23	<b>Siding</b> -Mainly at the Wild Ginger end of the building, there is some damage to the lower sections of the wood siding. Please see the pest report for any additional details. <b>Please see the photos following the summary items.</b>
26	<b>Exterior trim</b> -There is some wood damage to the exterior trim, but the most damage is on the fire sprinkler shed next to unit G/Wild Ginger. Please see the pest report for any additional details. <b>Please see the photos following the summary items.</b>
28	<b>Roof, plumbing vents</b> -On the roof and above unit A/Sea and Green heater, the vent and rain cap has detached from the vent pipe. This will allow any storm water down into the heater or water heater in unit A, below. This vent/rain cap needs to be re-installed. <b>Please see the photo following the summary items.</b>
29	<b>Roof</b> -The upper flat section of roofing material is a ‘Torch’ material (flat composite sheets heated/sealed down). This material is somewhat aged and may need to be replaced within the next five (5) years. Some of the seams have been re-sealed with a roofing adhesive. At least one of the Torch sheets has been replaced/repared in the recent past. I walked the entire roof and I did not detect any damaged wood or soft spots under the roofing material. I recommend having a roofing professional re-evaluate this roof and when it is time to replace this roofing material, remove all of the existing material and replace the water proof paper/felt, composite sheets, metal edge flashing, roof jacks (caulk all of the jacks to pipe connections) and replace any damaged wood (sheathing) that could be under the roofing material. <b>Please see the photos following the summary items.</b>
68	<b>Unit B/JJ’s kitchen, electrical outlets</b> -The outlets operate as originally intended, but the outlet across from the sink is not GFCI protected. <b>GFCI protection was not required at this location</b> when this building was built. I recommend having a licensed electrician re-evaluate and install GFCI protection where needed to meet the current building and safety codes.
72	<b>Unit B/JJ’s kitchen, floor</b> -There are some cracked tiles, various locations of the kitchen floor. There is no separation at any of the cracks, but I do recommend replacing any cracked tiles as needed. <b>Please see the photos following the summary items.</b>
88a	<b>#3 water heater (behind Wild Ginger)</b> -There is a pressure relief valve (PRV) on top/side of the heater tank. An extension is required from the PRV to within 6” of the floor or to the exterior and within 6” of the ground, in case of a sudden relief of pressure from the tank and if someone was near the PRV. <b>Please see the photo following the summary items.</b>
139	<b>Hallway bathroom for units BCD (Grace &amp; Raven/Corky’s/Smoke Shop), sink faucet</b> -CCSD will require a <b>low flow 0.5 gpm aerator</b> to meet the requirements for their low flow retrofit program ( <b>currently 1.2 gpm</b> ).
154	<b>Unit B/JJ’s bathroom, toilet</b> -CCSD will require a <b>low flow dual flush, 1.28 gpf toilet or equivalent</b> , to meet the requirements for their low flow retrofit program ( <b>currently 1.6 gpf</b> ).
<b>Continued on page 17</b>	

Item #	Continued from page 16;	Page 17
159	<b>Wild Ginger restroom, walls and door</b> -There are a few cracks in the walls and there is a large gap between the top of the door and the door frame (descending). It appears that this room has settled and may be sloping away from the main building. I recommend having a licensed general contractor or foundation professional re-evaluate and make any necessary adjustments. <b>Please see the photos following the summary items.</b>	
170	<b>Wild Ginger restroom, sink faucet</b> -CCSD will require a <b>low flow 0.5 gpm aerator</b> to meet the requirements for their low flow retrofit program ( <b>currently 1.2 gpm</b> ).	
171	<b>Wild Ginger restroom, toilet</b> -CCSD will require a <b>low flow dual flush, 1.28 gpf toilet or equivalent</b> , to meet the requirements for their low flow retrofit program ( <b>currently 1.6 gpf</b> ).	
178	<b>Sea Green left side restroom, exhaust fan</b> -The exhaust fan does not appear to be operating properly. This fan is required to be operating as intended for exhausting gases and moisture.	
186	<b>Sea Green left side restroom, sink faucet</b> -CCSD will require a <b>low flow 0.5 gpm aerator</b> to meet the requirements for their low flow retrofit program ( <b>currently 2.2 gpm</b> ). <b>In addition</b> , there is no hot water to this faucet.	
187	<b>Sea Green left side restroom, toilet</b> -CCSD will require a <b>low flow dual flush, 1.28 gpf toilet or equivalent</b> , to meet the requirements for their low flow retrofit program ( <b>currently 1.6 gpf</b> ).	
160a	<b>Sea Green right side restroom, electrical outlet</b> -The outlet that is to the right of the sink is not GFCI protected. <b>GFCI protection may not have been required</b> at this location when this building was built. I recommend having a licensed electrician re-evaluate and install GFCI protection where needed to meet the current building and safety codes.	
162a	<b>Sea Green right side restroom, exhaust fan</b> -There is no exhaust fan in this room. An operating exhaust fan or operating window is required in this room for exhausting gases and moisture.	
170a	<b>Sea Green right side restroom, sink faucet</b> -CCSD will require a <b>low flow 0.5 gpm aerator</b> to meet the requirements for their low flow retrofit program ( <b>currently 2.2 gpm</b> ). <b>In addition</b> , there is no hot water to this faucet.	
202	<b>Unit C/Corky's Barber Shop, electrical outlet</b> -The outlet that is to the right of the sink is not GFCI protected. <b>GFCI protection may not have been required</b> at this location when this building was built. I recommend having a licensed electrician re-evaluate and install GFCI protection where needed to meet the current building and safety codes.	
214	<b>Unit B/JJ's eating area, floor</b> -There are a few cracked tiles, various locations of the dining room floor. There is no separation at any of the cracks, but I do recommend replacing any cracked tiles as needed. <b>Please see the photos following the summary items.</b>	
221	<b>Unit E/Smoke Shop, lighting</b> -Toward the rear of the room, an overhead light fixture has been removed and the wires are still hanging down from the ceiling and they have not been terminated safely. <b>Please see the photo following the summary items.</b>	
224	<b>Unit E/Smoke Shop, heat source</b> -There is a newer heater that is suspended from the ceiling, but according to the unit tenant, it is not operating. It appears that The Gas Company has 'locked off' the gas meter. <b>Also</b> , the thermostat for this unit is on the wall behind the cabinets/coolers (not accessible). <b>Please see the photo following the summary items.</b>	
259	<b>Sea Green left side display room, floor</b> -Toward the rear of the room, there are a few large cracks in the concrete floor/foundation and with some separation. The floor is sloping from the middle of the room toward the rear of the building. I recommend having a general contractor or foundation specialist re-evaluate and correct this sloping as or if needed. <b>Please see the photos following the summary items.</b>	
270	<b>Sea Green rear storage room, walls</b> -Above the entry door from the right side display room, there are a few cracks in the wall. This may be associated with the sloping concrete floor at the rear of the building. <b>Please see the photos following the summary items.</b>	
296	<b>Heaters</b> -The heaters in unit #'s A/F, B, C, D and G all operate as intended. The heater in unit E is not operating because the gas meter is 'locked off' by The Gas Company.	
310	<b>JJ's sub electrical breaker panel</b> -There are six (6) missing breakers. I recommend having a licensed electrician re-evaluate and either install breakers or a breaker blank caps to fill the voids so that fingers, tools, etc. cannot get to the high voltage area behind the safety panel. <b>Please see the photo following the summary items.</b>	
310a	<b>Wild Ginger electrical breaker panel</b> -Not all of the breakers are identified as to which circuit they represent. <b>Please see the photo following the summary items.</b>	
Note	<b>Sewer and drain lines</b> -I recommend having a plumbing professional video the sewer lines from the home to the street or septic tank as required to be certain that the drain lines are cleared and operating as intended. I also recommend having the septic tank inspected and cleaned as needed now and then on a regular basis from this time onward.	
<b>64-Photos are on the following pages</b>		

**Item #0-Parking lot-At the back corner of the parking lot, there are a few areas where the asphalt is cracking and settling**



**Item #0-Parking lot-At the back corner of the parking lot, there are a few areas where the asphalt is cracking and settling**



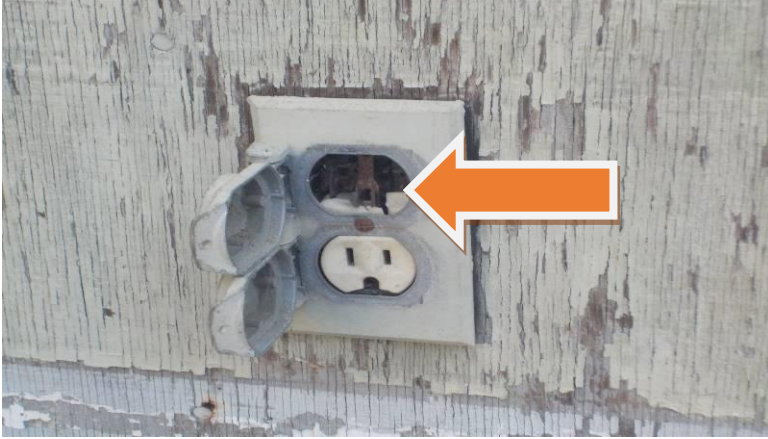
**Item #13-Deck-At the end of the deck near unit D, wood damage to the deck support post**



**Item #13-Deck-At the end of the deck near unit D, wood damage to the deck step railing**



**Item #16-Exterior, electrical outlets-At the outlet for JJ's storage room, the top portion of the outlet is broken/outlets are not GFCI protected**



**Item #19-Rain gutters-There are no rain gutters over the front and side edges of the roof/gutters are recommended**



**Item #19-Rain gutters-There are no rain gutters over the front and side edges of the roof/gutters are recommended**



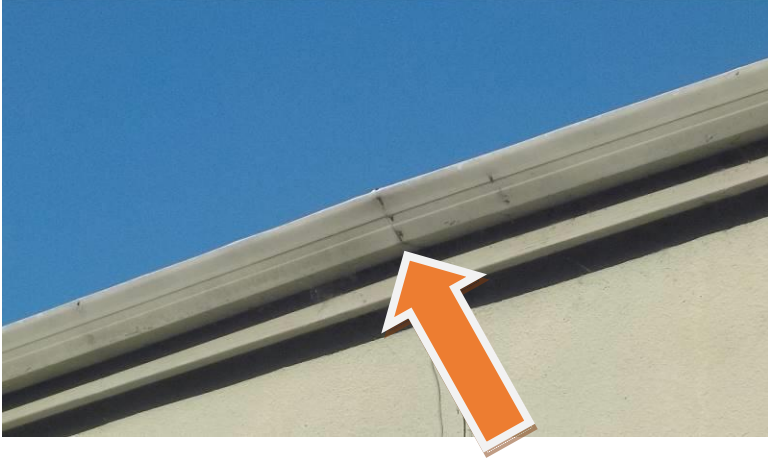
**Item #19-Rain gutters-There are no rain gutters over the front and side edges of the roof/gutters are recommended**



**Item #19-Rain gutters-Across the rear of the building, some of the gutter material is dented**



**Item #19-Rain gutters-Across the rear of the building, some of the gutter material is dented**



**Item #20-Water pressure/faucets-Below is an example of an anti-siphon valve needed for the tip of the exterior water faucets**



**Item #23-Siding-At the storage area near the rear of Wild Ginger, some of the wood siding is damaged**



**Item #23-Siding-At the storage area near the rear of Wild Ginger, some of the wood siding is damaged**



**Item #23-Siding-At the storage area near the rear of Wild Ginger, some of the wood siding is damaged**



**Item #23-Siding-At the fire sprinkler storage room on the side of Wild Ginger, some of the wood siding is damaged**



**Item #26-Exterior trim-At the storage area near the rear of Wild Ginger, some of the wood trim is damaged/missing**





**Item #26-Exterior trim-At the storage area near the rear of Wild Ginger, some of the wood trim is damaged/missing**



**Item #28-Roof, plumbing vents-The exhaust vent over unit A heater is missing the rain/vent cap**



**Item #29-Roof-Some of the roofing material over unit B has been patched and caulked**



**Item #29-Roof-Some of the roofing material over unit B has been patched and caulked**



**Item #29-Roof-Some of the roofing material over unit B has been patched and caulked**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over unit D**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over unit C**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over unit B**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the front half of units B and E**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the rear half of units B and E**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the front half of unit A**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the rear half of unit A**



Continued

**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the front half of units A and F**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the rear half of units A and F**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the front half of unit G**



**Item #29-Roof-The 'Torch' style roofing material is in fair condition/below; over the rear half of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the storage roof for unit B**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front entry of units D and C**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front entry of units C and B**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front entry of unit B**





**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front entry of units A and F**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front entry of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the front corner of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the end of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the end of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the end of unit G**



**Item #29-Roof-The 50-year composite shingle roofing material is in good condition/below; over the end of unit G**

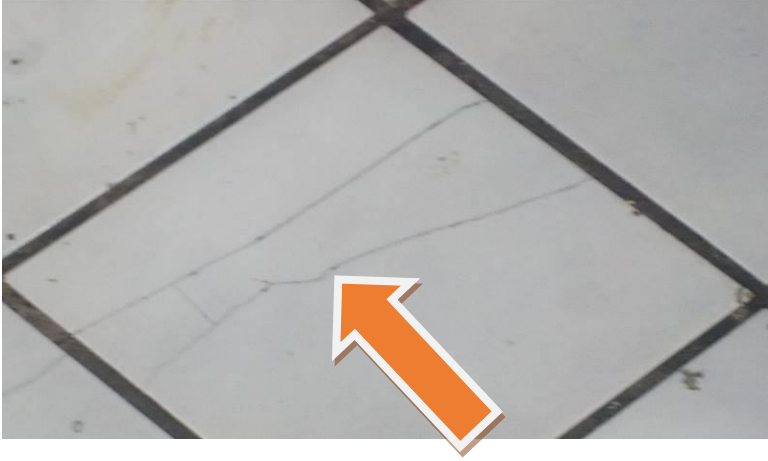


**Item #72-JJ's kitchen, floor-There are a few cracked floor tiles, but with little or no separation, various locations**

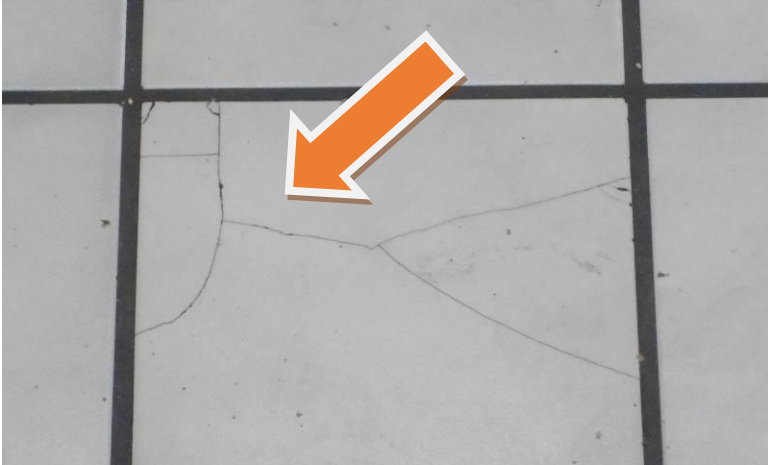




Item #72-JJ's kitchen, floor-There are a few cracked floor tiles, but with little or no separation, various locations



Item #72-JJ's kitchen, floor-There are a few cracked floor tiles, but with little or no separation, various locations



Item #88a-#3 water heater (Wild Ginger)-At the pressure relief valve, an extension is required to discharge within 6" of the ground



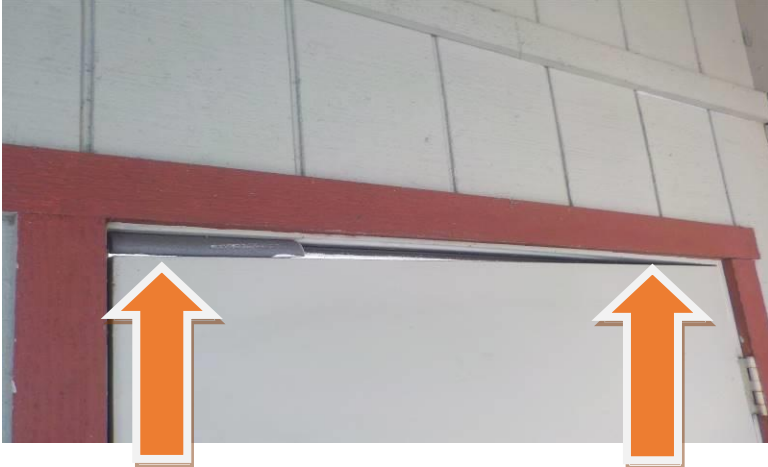
Item #159-Wild Ginger restroom, walls and door-There are a few cracks in the walls/this room and floor appear to be tilting toward the rear



**Item #159-Wild Ginger restroom, walls and door-There are a few cracks in the walls/this room and floor appear to be tilting toward the rear**



**Item #159-Wild Ginger restroom, walls and door-The descending gap at the top of the door to door frame is probably due to the room slanting**



**Item #214-JJ's eating area, floor-There are a few cracked floor tiles, but with no separation at any of the cracks**



**Item #214-JJ's eating area, floor-There are a few cracked floor tiles, but with no separation at any of the cracks**



**Item #221-Unit E, lighting-At the rear of the retail area/Smoke Shop, the light fixture has been removed/the termination of wiring is not safe**



**Item #224-Unit E, heat source-This heating unit in the Smoke Shop is not operating/thermostat is behind the cabinets/not accessible**



**Item #259-Sea Green left side display room, floor-Toward the rear of the room, there are a few cracks, some wider than others/sloping floor**



**Item #259-Sea Green left side display room, floor-Toward the rear of the room, there are a few cracks, some wider than others/sloping floor**



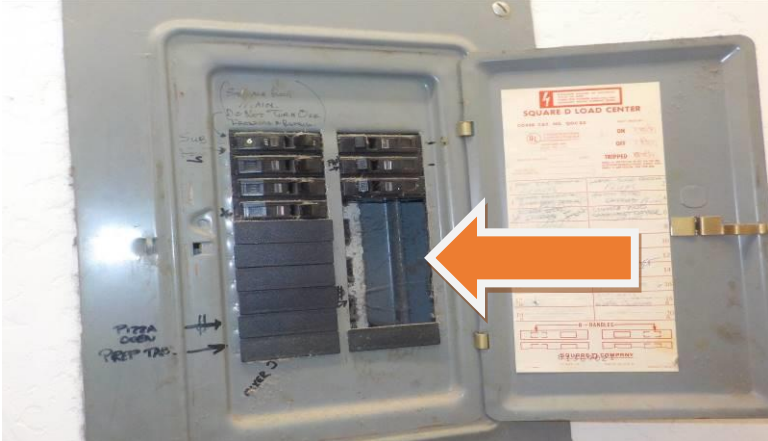
**Item #259-Sea Green left side display room, floor-Toward the rear of the room, there are a few cracks, some wider than others/sloping floor**



**Item #270-Sea Green storage room, walls-At the entry door from the display room, there is a crack in the wall (may be associated with item #259)**



**Item #310-#1 electrical sub panel (For JJ's)-Six (6) breakers are missing/recommend breaker blank caps or breakers to fill the voids**



**Item #310a-Wild Ginger electrical breaker panel-Not all of the breakers are identified as to which circuit they represent**

