

PLUMBING SYSTEM

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The following are **NOT** included in this inspection unless pre-arranged per Pre-Inspection Agreement : fuel storage tanks that are buried or partially buried, lawn sprinkler systems, fire sprinklers, hot tubs, swimming pools & related equipment, steam baths, saunas, buried plumbing, water purity, water quantity, well equip., water treatment systems and the proper functioning of the septic system.

Water off at Time of Inspection Water System has been Winterized

SATISFACTORY
 MARGINAL
 UNSATISFACTORY
 MAINTENANCE
 NOT APPLICABLE
 NOT INSPECTED
 NOTES

MAIN SUPPLY	<input type="checkbox"/> Lead See Note "O" <input checked="" type="checkbox"/> Copper <input type="checkbox"/> Galv. Steel <input type="checkbox"/> Plastic <input type="checkbox"/> See Note "A"				
MAIN SHUTOFF	<input checked="" type="checkbox"/> Basement <input type="checkbox"/> Crawl Space <input type="checkbox"/> _____				B
SUPPLY PIPES	<input checked="" type="checkbox"/> Copper <input type="checkbox"/> Galvanized <input type="checkbox"/> Plastic <input type="checkbox"/> _____				
WASTE/VENT PIPES	<input type="checkbox"/> Copper <input type="checkbox"/> Cast Iron <input checked="" type="checkbox"/> P.V.C. / ABS <input type="checkbox"/> Galv. Stl. <input type="checkbox"/> _____				
OUTSIDE SPIGOTS	<input checked="" type="checkbox"/> Some/All were off at time of inspection				X
EJECTOR PUMP					
WATER HEATERS	Mfg. #1 <u>Kenmore</u> Size #1 _____ gals. Mfg. Date #1 <u>2003</u>				
	Mfg. #2 _____ Size #2 _____ gals. Mfg. Date #2 _____	X			①
	<input type="checkbox"/> Water Off <input type="checkbox"/> Gas Off <input type="checkbox"/> Electric Off				
WATER HEATER FUEL	<input checked="" type="checkbox"/> Gas <input type="checkbox"/> L.P. <input type="checkbox"/> Electric <input type="checkbox"/> Oil <input type="checkbox"/> _____	X			
FLUE PIPE	<input checked="" type="checkbox"/> Single Wall <input type="checkbox"/> Double Wall <input type="checkbox"/> Plastic <input type="checkbox"/> Damaged	X			
GAS PIPING	<input checked="" type="checkbox"/> Shut-off Valve Present <input type="checkbox"/> Shut-off Valve Missing, Should Be Added	X			B
TEMP/PRESSURE RELIEF VALVE & PIPE	<input type="checkbox"/> Pipe Short <input type="checkbox"/> Pipe Wrong Size <input checked="" type="checkbox"/> Pipe Missing <input checked="" type="checkbox"/> A 3/4" pipe should extend within 6" of the floor		X		
COLD WATER VALVE	<input checked="" type="checkbox"/> Present <input type="checkbox"/> Missing	X			B
BLDG. FUEL TYPE	<input checked="" type="checkbox"/> Natural Gas <input type="checkbox"/> LP Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> _____	X			
SUPPLY PIPING	<input type="checkbox"/> Gas Leak _____	X			②
STORAGE TANKS	<input type="checkbox"/> Fully Exposed Outside <input type="checkbox"/> Fully Exposed Inside <input type="checkbox"/> Partially or Fully Buried See Note "N" <input type="checkbox"/> Not Fully Visible			X	
MAIN SHUT-OFF	<input checked="" type="checkbox"/> Basement <input type="checkbox"/> Outside <input type="checkbox"/> At Tank <input type="checkbox"/> _____	X			B

SEE OPPOSITE PAGE FOR REFERENCE NOTES ↑

Remarks: ① Water heater was installed less than 2 years ago - however the 3/4" pipe for the pressure relief valve should be installed by a qualified plumber.

② Supply piping for water heater and furnace were checked with a TIF 880 A gas detector. do not detect any leaks at the time of this inspection.

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HEATING SYSTEM

PRIMARY TYPE	MFG. <u>Bryant</u> Mfg. Date <u>2008</u> ,000 BTU/KW Fuel <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Oil <input type="checkbox"/> Electric <input type="checkbox"/> <input checked="" type="checkbox"/> Forced Air <input type="checkbox"/> Gravity Air <input type="checkbox"/> Hot Water <input type="checkbox"/> Steam <input type="checkbox"/> Baseboard <input type="checkbox"/> Radiant <input type="checkbox"/> See Note or Remark _____	SATISFACTORY	MARGINAL	UNSATISFACTORY	MAINTENANCE	NOT APPLICABLE	NOT INSPECTED	NOTES
HEAT EXCHANGER	Test Performed: <input checked="" type="checkbox"/> N/A - Sealed <input type="checkbox"/> Visual <input type="checkbox"/> Flame/Mirror <input type="checkbox"/> Electronic Sniffer Heat Exchangers are substantially hidden from view and cannot be completely inspected without disassembly.	X						S
DISTRIBUTION SYSTEM	<input type="checkbox"/> Copper Pipe <input type="checkbox"/> Steel Pipes <input type="checkbox"/> Asbestos Suspected See Note "P" <input checked="" type="checkbox"/> Metal Duct <input type="checkbox"/> Insul. Flex Duct <input type="checkbox"/> Duct Board	X						
THERMOSTATS	<input type="checkbox"/> Single <input type="checkbox"/> Multiple _____ <input checked="" type="checkbox"/> Programmable _____	X						
FLUE PIPING	<input type="checkbox"/> Single Wall <input type="checkbox"/> Double Wall <input checked="" type="checkbox"/> Plastic	X						①
BURNERS	<input type="checkbox"/> Need Cleaning & Adjustment	X						
HUMIDIFIER	<input type="checkbox"/> Not Operating <input type="checkbox"/> Evidence of Leaks <input type="checkbox"/> Need Service					X		N
FUEL SUPPLY	<input type="checkbox"/> Leak At <input type="checkbox"/> Shut Off Valve <input type="checkbox"/> Control <input type="checkbox"/> Fittings <input type="checkbox"/> _____	X						
DISCONNECTS	<input checked="" type="checkbox"/> Service Switch <input checked="" type="checkbox"/> Emergency Switch <input type="checkbox"/> Fuse or Breaker	X						
BLOWER	<input type="checkbox"/> Activates Prematurely <input type="checkbox"/> Fails to Shut Off <input type="checkbox"/> _____	X						
FILTER	<input checked="" type="checkbox"/> Disposable <input type="checkbox"/> Washable <input type="checkbox"/> Electronic <input type="checkbox"/> Needs Cleaning <input type="checkbox"/> None	X						
PUMPS / ZONES	<input type="checkbox"/> _____ Pumps <input type="checkbox"/> _____ Zones				X			
EXPANSION TANK	<input type="checkbox"/> Present <input type="checkbox"/> Missing				X			
OP/OT VALVE & PIPE	<input type="checkbox"/> Pipe Attached <input type="checkbox"/> Pipe Short <input type="checkbox"/> Pipe Missing				X			
DISCONNECT SWITCH	<input type="checkbox"/> Blower Door Switch is the only safety switch tested, if installed.	X						
OPERATION	<input type="checkbox"/> Unit is advanced in age and has limited remaining life.	X						

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Remarks: ① High efficiency furnace - exhaust piping is installed but return air return piping is not installed - furnace is drawing air from the basement. If furnace malfunctions, this could cause a serious safety issue (CO) Strongly urge you to contact a qualified heating tech. to properly install return air piping to the outside of the residence Both return air and exhaust should be on the outside of the building.

COOLING SYSTEM

CENTRAL SYSTEM	<input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None <input checked="" type="checkbox"/> Not Tested <input checked="" type="checkbox"/> Outside Temperature Below 65° F See Note "F" <input type="checkbox"/> _____								
AIR COND. ONLY	Approx. Tonnage _____ Manufacturer _____ Mfg. Date _____ Max. Fuse _____ Amps. _____ <input type="checkbox"/> Unable to determine above information								
HEAT PUMP									
COILS & FINS	<input type="checkbox"/> Clean <input type="checkbox"/> Damaged <input type="checkbox"/> Need Cleaning <input type="checkbox"/> See Note "D"								
ELECTRICAL	<input type="checkbox"/> External <input type="checkbox"/> Disconnect <input type="checkbox"/> Missing See Note "C" <input type="checkbox"/> Overfused <input type="checkbox"/> Wire Undersized								
COOLING LINES	<input type="checkbox"/> Insulation Needs Repair <input type="checkbox"/> _____								
CONDENSATE DRAIN	<input type="checkbox"/> Improper Disposal <input type="checkbox"/> See Note "G"								
OPERATION	Temp. Differential _____ ° F								
WALL UNITS	_____ Units Functional <input type="checkbox"/> Not Functional At _____ Window units are not part of this inspection.								

SEE OPPOSITE PAGE FOR REFERENCE NOTES ↑

Remarks:

See Addendum

ELECTRICAL SYSTEM

SERVICE CABLE & PANELS	Only a representative number of switches and receptacles were tested. The Inspector is unable to comment on the condition of BURIED or CONCEALED wires. This is not a code inspection, nor does it include intercoms, remote control devices, alarm systems and low voltage systems.								
SERVICE CABLE	<input type="checkbox"/> Overhead <input checked="" type="checkbox"/> Underground <input checked="" type="checkbox"/> Aluminum <input type="checkbox"/> Copper								
MAIN PANEL	<input checked="" type="checkbox"/> Garage <input type="checkbox"/> Basement <input type="checkbox"/> Rated Amps <u>200</u> <input type="checkbox"/> Access Restricted See Note "S"								
SUB PANELS	Location 1 _____ 2 _____ 3 _____								
110 V. WIRING	<input checked="" type="checkbox"/> Copper <input type="checkbox"/> Knob & Tube <input type="checkbox"/> _____ Aluminum Circuits See Note "I"								
220 V. WIRING	<input checked="" type="checkbox"/> Copper <input type="checkbox"/> Aluminum								
GROUNDING	<input checked="" type="checkbox"/> Water Pipe <input type="checkbox"/> Driven Rod <input type="checkbox"/> Unable to Verify								
CIRCUIT PROTECTION	<input checked="" type="checkbox"/> Breakers <input type="checkbox"/> Fuses <input type="checkbox"/> _____ Overfused <input type="checkbox"/> _____ Double Taps								

SEE OPPOSITE PAGE FOR REFERENCE NOTES ↑

Remarks: Service panel cover is missing 2 screws and is loose - refer to a qualified electrician

* RADON - EVALUATION OF ANY RADON INSTALLATION WILL BE CONDUCTED ONLY IF THE COMPANY IS COMMISSIONED TO CONDUCT A RADON TEST.

MOLD - IF MOLD IS DETECTED IN ANY AREA, WE URGE YOU TO HAVE THE MOLD TESTED AND MITIGATED BY A QUALIFIED COMPANY.

POOL - THE POOL, IF PRESENT, AND ALL POOL RELATED EQUIPMENT WERE NOT INSPECTED AND ARE NOT PART OF THIS REPORT. REFER INSPECTIONS OF THE POOL AND RELATED EQUIPMENT TO A QUALIFIED POOL MAINTENANCE COMPANY.

* Client declined radon testing - see attached waiver

Summary:

The cracking on the EAST side and the detached downspout contribute to excess water buildup. Since the underground cable for the electric service also is present this poses a safety hazard and a future foundation problem.

The attic should be evaluated for proper insulation and distribution for energy efficiency and air circulation -

The skylight is failing and showing signs of leakage - it should be replaced.

The high efficiency furnace needs to be properly vented and a return air vent needs to be installed - this is a safety hazard and it decreases the efficiency of the furnace

Thank you.