

ANOTHER B-I-G INSPECTION



CONFIDENTIAL INSPECTION REPORT

PREPARED FOR:

JOHN Q. PUBLIC

PROPERTY LOCATION:	1313 Mockingbird Lane	S/D:	DRESDEN MANOR
CITY, STATE, ZIP:	Atlanta, GA 30345		
DATE OF INSPECTION:	December, 18, 2013 [TH]	TIME OF INSPECTION:	~9:00 AM
STYLE OF DWELLING:	Ranch on Basement	AGE OF PROPERTY:	~52 YEARS
WEATHER CONDITIONS DURING INSPECTION:	Sunny 53°F		
PEOPLE PRESENT DURING INSPECTION:	Inspector Only		

PREPARED BY:

The Building Inspectors
OF GEORGIA
HOME INSPECTION SERVICES

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INSPECTOR: MIKE SYLVESTER
INTERNATIONAL CODE COUNCIL CERTIFIED
NO. 5228859-R5

THE BUILDING INSPECTORS OF GEORGIA

PRE-INSPECTION AGREEMENT & LIABILITY LIMITS

PURPOSE OF REPORT...

* To provide a professional non-biased opinion of a real estate property in it's "as is" condition, as of the date of the inspection, limited to the definitions, limitations and guidelines established in this report.

OBJECTIVE OF REPORT...

* To provide the purchaser with an analysis of a real estate property, consisting of a series of visual inspections of items contained in pages four through ten of this report, which the purchaser may disclose to other interested parties.

DEFINITION OF REPORT...

* A visual examination and status report of the items listed on pages four through ten. The reporting of apparent defects (not cosmetic related) that require corrective action is limited to three categories:

1) **STRUCTURE:** A load bearing member of a building (including, but not limited to, footings, foundation walls, posts, beams, floor joists, bearing walls, or roof framing), is defective if it has one or more of these characteristics:

- a) abnormal cracking or splitting;
- b) unusual settling or erosion;
- c) deterioration such as rot, excessive weathering, or pest infestation damage; any of which might pose a threat to the safety and/or stability of any portion of the structure.
- d) improper alignment or structural integrity compromised by modification or abuse;
- e) other stated characteristics that might affect the building's structural integrity.

2) **UNSAFE OR HAZARDOUS CONDITIONS:** Any item that is defined as a safety defect or hazard, the presence or absence of which would be dangerous. (Suspected, visible, "friable" asbestos is to be reported. The reporting of the possible presence of lead paint, UFFI, radon gas, electromagnetic radiation, toxic wastes, and other indoor pollutants is outside the scope of this report, unless specifically requested to be tested for).

3) **INOPERATIVE SYSTEMS AND APPLIANCES:** Any installed systems or built-in appliances that do not operate properly or perform their intended function in response to normal use. (Excluding refrigerators, stand alone ice makers, security systems, sprinkler systems or any other system or appliance that in the inspectors opinion is not standard or common to most homes).

LIMITATIONS OF REPORT...

* The information contained in this report does not imply, guarantee or warrant any future conditions of any component(s) of the property described. This report is limited to only the components that are clearly visible at the time of the inspection and will not require the inspector to remove any of the component's fixed coverings (such as electrical outlet covers, carpets, wall boards and coverings, etc.) to inspect underlying components. The item statuses included in this report are based on the physical conditions visible to the inspector at the time of inspection. They are not based on representations by third parties, opinions as to the adequacy or appropriateness of the design, code compliance, cosmetic or aesthetic considerations. Such issues cannot be addressed within the scope of a general property inspection. When appropriate, the inspector may recommend engaging the services of a qualified professional specializing in the specific area of expertise.

* When there are numerous similar items to be inspected, such as electrical outlets, windows, etc., a representative number, such as one per room, will be checked unless there is reason to believe substantial differences or deficiencies are likely to exist.

* The information contained in this report is for the exclusive use of the persons or parties listed on the front page of the report and cannot be transferred to any other persons or parties without the expressed written consent of The Building Inspectors of Georgia

* In the event of any implied errors and/or omissions dispute, The Building Inspectors of GA reserves the right to re-inspect any item(s) in question, in a timely manner, **before** any corrective action is taken or settlement is agreed upon!

* It is understood and agreed upon by the undersigned client and any other persons relying on this report or any subsequent reports pursuant to it that, should The Building Inspectors of GA or any of its' agents, representatives or employees, be found liable, whether as a result of breach of contract, negligence, violation of statutory rights or otherwise, for any loss or damage resulting from either a failure to perform or a failure to properly perform any part of this basic comprehensive inspection, the liability of The Building Inspectors of GA, such agents or representatives shall be limited to the amounts paid by the client to The Building Inspectors of GA for any inspection services outlined in this report. It is further understood and agreed that, under no circumstances, will The Building Inspectors of GA be liable for consequential damages of any sort.

*** It is also agreed that in the absence of the client's signature on this agreement, usage of and/or compensation for this inspection report by the client or the client's representative(s), will be the same as agreeing to the terms herein.**

* This agreement is the entire agreement between the parties and neither party is relying on representations by the other. This be amended except in writing and agreed to by all parties. This agreement is made under the laws of the state of Georgia.

Acceptance and understanding of this agreement is here by acknowledged:

The Building Inspectors of Georgia



Inspector

Date

Date

Amount Rec'd:

Date

***Checks payable to: B-I-G**

e-mail:

The Building Inspectors of Georgia is a Sylvester Home Inspections, LLC company.

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STATUS DEFINITIONS...

- AC = ACCEPTABLE: THE ITEM IS PERFORMING IT'S INTENDED FUNCTION AT THE TIME OF THE INSPECTION, MODIFIED BY AGE AND NORMAL WEAR WITHIN REASON.
- NP = NOT PRESENT: THE ITEM DOES NOT EXIST IN THE PROPERTY BEING INSPECTED, OR THE ITEM IS COMPLETELY HIDDEN FROM VIEW.
- NI = NOT INSPECTED: THE ITEM WAS NOT INSPECTED DUE TO INACCESSIBILITY, SEASONAL IMPEDIMENTS, OR OTHER STATED REASON.
- DE = DEFECTIVE: THE ITEM IS EITHER: STRUCTURALLY UNSOUND, UNSAFE, HAZARDOUS, OR INOPERATIVE, AS DEFINED ON PAGE 2.
- MR = MARGINAL: PERFORMING, BUT WITH SIGNIFICANTLY REDUCED PERFORMANCE OR SIGNS INDICATING IMMINENT FAILURE OR UNACCEPTABLE EFFECT ON OTHER COMPONENTS OF THE PROPERTY. CORRECTION, REPAIR OR REPLACEMENT IN THE NEAR FUTURE IS NEEDED OR ADVISABLE.
- SC = SEE COMMENTS: AN EXPLANATION, QUALIFICATION OR RECOMMENDATION IS INCLUDED IN THE COMMENTS SECTION.

STATUS

ITEMS

LOTS & GROUNDS (LG)

LINE	AC	NP	NI	DE	MR	SC	ITEMS
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WALKS: MASONRY WOOD GRAVEL
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FENCES: CHAINLINK WOOD WIRE STEEL
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DRIVEWAY: MASONRY ASPHALT GRAVEL
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	STAIRWAYS / STEPS: MASONRY WOOD STEEL
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PATIOS / PORCHES: MASONRY WOOD OTHER:
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DECKS / BALCONIES: MASONRY WOOD OTHER:
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	RETAINING WALLS: MASONRY WOOD RR TIES
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GRADING / DRAINAGE / LANDSCAPING / TREES
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BASEMENT WINDOW WELLS; CRAWL VENTS / VENT WELLS
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EXTERIOR SURFACE DRAINS
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BASEMENT STAIRWELL DRAIN

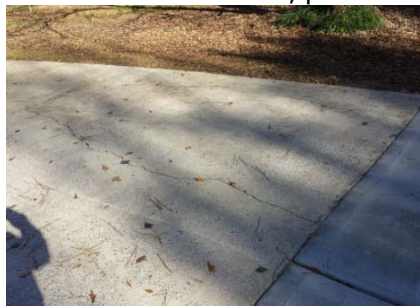
ROOF (R)

LINE	AC	NP	NI	DE	MR	SC	INSPECT METHOD:	WALKED ROOF	BINOCULARS	FROM LADDER/WINDOWS
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SURFACE SHINGLES:	ASPHALT	WOOD	OTHER:
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FLASHING:	GALVANIZED	ALUMINUM	
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PENETRATIONS:	VENT PIPING	DUCT HOODS	OTHER:
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CHIMNEY:	MASONRY	SIDING	METAL
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SKYLIGHTS / ROOF WINDOWS / DORMERS			
							ROOF WATER CONTROL			
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GUTTER SYSTEM:	GALVANIZED	ALUMINUM	OTHER:
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DOWNSPOUTS / SPLASHPANS / EXTENSION TUBES			

LINE ITEM(S):

COMMENTS...

LG-3..... * There is visible deterioration and cracking in and on the surface of the driveway that appears to be from age, erosion and poor construction methods common to the area. The present condition does not pose a threat to the structure of the house. However, potential trip hazards may exist.



LG-9..... * While there are foundation vents they are unnecessary due to the concrete floor in the area that appears to have been a crawl space. The openings can be filled with insulation to prevent drafts.

LG-5..... * The rear tile patio is cracked and deteriorated and will most likely need to be replaced with a concrete slab patio.



R-6,7..... * The gutters and down spouts need to be cleared, repaired and extended to carry roof water away from the base of the foundation of the home.



STATUS

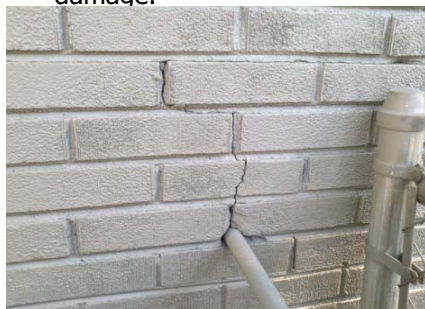
ITEMS

LINE	AC	NP	NI	DE	MR	SC	EXTERIOR SURFACE (ES)
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WALLS: <input checked="" type="checkbox"/> BRICK <input type="checkbox"/> SYN-STUCCO <input type="checkbox"/> STUCCO <input type="checkbox"/> STONE <input type="checkbox"/> CEMENT FIBER SIDING: <input type="checkbox"/> CEDAR <input type="checkbox"/> MASONITE <input type="checkbox"/> WAFFERWOOD <input type="checkbox"/> VINYL <input checked="" type="checkbox"/> WOOD PLANK
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EAVES: <input checked="" type="checkbox"/> SOFFITS <input checked="" type="checkbox"/> FASCIA <input checked="" type="checkbox"/> VENTS
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WOOD TRIM: <input type="checkbox"/> WINDOWS <input type="checkbox"/> CHIMNEY <input checked="" type="checkbox"/> EXTERIOR WALLS
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXT. DOORS: <input checked="" type="checkbox"/> FRAME/TRIM <input checked="" type="checkbox"/> HARDWARE <input checked="" type="checkbox"/> WEATHERSTRIPS
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EXT. WINDOWS: <input type="checkbox"/> STORM <input type="checkbox"/> DOUBLE PANE <input type="checkbox"/> SINGLE PANE
LINE	AC	NP	NI	DE	MR	SC	GARAGE / CARPORT (G/C)
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> GARAGE <input checked="" type="checkbox"/> CARPORT <input type="checkbox"/> DETACHED
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	OVERHEAD DOOR(S) CONDITION & OPERATION
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	AUTOMATIC DOOR OPENER(S) / AUTO REVERSE: MFG: N/A
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CONDITION: (STRUCTURAL, ROOF, ELECTRICAL, FLOOR, ETC.)
LINE	AC	NP	NI	DE	MR	SC	STRUCTURE (S)
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FOUNDATION: <input checked="" type="checkbox"/> BASEMENT <input type="checkbox"/> CRAWL <input type="checkbox"/> SLAB
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	STRUCTURAL WALLS: <input checked="" type="checkbox"/> CONCRETE <input checked="" type="checkbox"/> BLOCK <input type="checkbox"/> FRAME
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PIERS / POSTS: <input type="checkbox"/> WOOD <input checked="" type="checkbox"/> STEEL <input checked="" type="checkbox"/> MASONRY
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VISIBLE FLOOR JOISTS / TRUSSES
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VISIBLE BEAMS: <input checked="" type="checkbox"/> WOOD <input type="checkbox"/> STEEL
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VISIBLE SUB FLOORING
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT INTERIOR LOAD BEARING AND/OR FRAME WALLS
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT FLOOR: <input checked="" type="checkbox"/> CONCRETE <input checked="" type="checkbox"/> CARPET <input type="checkbox"/> OTHER:
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SUMP PUMP / FRENCH DRAIN
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT/CRAWL CHIMNEY / FIREPLACE
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT WINDOWS & SILLS
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT FINISHED: <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> PARTIALLY
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BASEMENT CEILING: <input checked="" type="checkbox"/> EXPOSED <input type="checkbox"/> TILE <input checked="" type="checkbox"/> DRYWALL
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	EVIDENCE OF CHRONIC MOISTURE PENETRATION <input type="checkbox"/> YES <input type="checkbox"/> NO

LINE ITEM(S):

COMMENTS...

ES-1..... * There is visible cracking in the exterior brick walls from past settling that should have been patched and sealed prior to painting. While the cracking is not a threat to the structure moisture could seep into the cracks and cause further damage.



ES-4..... * The exterior door to the unfinished shop in the rear corner of the basement is very old and has ineffective or missing weather strips and thresholds. Repairs will be required.



INSPECTION REPORT FOR:

FOLSE @ 2895 APPLING CIRCLE ATLANTA, GA 30341 12/19/2013

CONTINUED FROM PAGE 5...

LINE ITEM(S):

COMMENTS

- S-1,8,12, * The basement of this home is said to be finished and there are two rooms with carpeting and an acceptable ceiling height, electrical outlets and windows to be considered living spaces however there is no visible insulation installed to define the living envelope. While the exterior walls could not be verified the interior frame walls and doors separating the living from non-living spaces are not insulated and in the doors have no weather stripping. Additionally the exposed ceilings in the unfinished areas need to be insulated to R-19 and the exposed frame walls in the front basement need to be insulated to R-13. The laundry area would have to be isolated from the rear unfinished shop in the rear corner as the exterior walls of this area are not finished and there are no electrical outlets in the large area further making in a non-living area.



- ES-4..... * There is water damaged and rotted wood trim at the exterior doors of the basement and to the rear deck that will require repair, caulk and paint.



- S-2,14..... * There are several significant patches of the block foundation walls and there is a professionally installed water control system along the exterior walls the result of settling and moisture penetration into the basement of this home. Repairs were professionally done and a warranty should be included for the system and work. Recommend monitoring for additional cracking and any possible moisture penetration.



INSPECTION REPORT FOR:

FOLSE @ 2895 APPLING CIRCLE ATLANTA, GA 30341 12/19/2013

CONTINUED FROM PAGE 5A...

LINE ITEM(S):

COMMENTS

S-4,6.....* There is some light surface mold visible on the floor joists and sub flooring in the front basement area that will need to be cleaned with a bleach solution and dried out for health and welfare.



S-11.....* There is a window in the basement on the side exterior wall toward the front of the basement that has hardware that does not line up and latch closed.



STATUS

ITEMS

LINE	ELECTRICAL (E)														
1	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	PANEL RATING AMPS: 200 VOLTS: 120 / 240 SINGLE PHASE		
2	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	SERVICE CABLE:	<input checked="" type="checkbox"/> ALUMINUM <input type="checkbox"/> COPPER	
3	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	SERVICE CABLE:	<input checked="" type="checkbox"/> OVERHEAD <input type="checkbox"/> UNDERGROUND	
4	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	MAIN PANEL:	<input checked="" type="checkbox"/> FUSES <input type="checkbox"/> BREAKERS	
5	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	PANEL LOCATION:	BASEMENT	
6	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input checked="" type="checkbox"/>	SC	GROUND FAULT INTERRUPTER BREAKERS / ARC FAULT INTERRUPTER BREAKERS		
7	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	BRANCH CIRCUIT BREAKERS / FUSES	MFG: SIEMENS	
8	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	240 VOLT CIRCUITS:	#3 <input checked="" type="checkbox"/> COPPER <input type="checkbox"/> ALUMINUM <input checked="" type="checkbox"/> ROMEX	
9	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input checked="" type="checkbox"/>	SC	120 VOLT CIRCUITS:	#14 <input checked="" type="checkbox"/> COPPER <input type="checkbox"/> ALUMINUM <input checked="" type="checkbox"/> ROMEX	
10	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	GROUND SYSTEM:	<input checked="" type="checkbox"/> COMMON <input type="checkbox"/> ISOLATED	
11	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input checked="" type="checkbox"/>	SC	MISC. ELECTRICAL. (OUTLETS, FIXTURES, SWITCHES, ETC.)		
LINE	HEATING / AIR CONDITIONING (H/A)														
1	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input checked="" type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input checked="" type="checkbox"/>	SC	PRIMARY:	MFG: LENNOX 88,000 BTU - ELECTRONIC ZONING	APPROX. AGE: 1
2	<input type="checkbox"/>	AC	<input checked="" type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	SECONDARY:	MFG:	APPROX. AGE:
3	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	HEAT TYPE:	<input checked="" type="checkbox"/> GAS FURNACE <input type="checkbox"/> HEAT PUMP <input type="checkbox"/> ELECTRIC	
4	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	HEAT EXCHANGERS / BURNERS / GAS LINES / CONTROL VALVE / FLUES		
5	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	FILTER(S)	<input checked="" type="checkbox"/> FIBER <input type="checkbox"/> ELECTRONIC	SIZE: 16 X 25 X 1
6	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	EXTERIOR COMPRESSOR(S)	MFG: GOODMAN 2.5 TON	APPROX. AGE: <1
7	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input checked="" type="checkbox"/>	SC	AC COOLANT LINES & LINE INSULATION		
8	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	EXTERIOR DISCONNECT SWITCH(ES)		
9	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	CONDENSATION LINES / PUMP(S) / DRIP PANS		
10	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	DUCTS / DUCT INSULATION		
11	<input checked="" type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	AIR HANDLER(S) / BLOWER MOTOR(S)		
12	<input type="checkbox"/>	AC	<input type="checkbox"/>	NP	<input type="checkbox"/>	NI	<input checked="" type="checkbox"/>	DE	<input type="checkbox"/>	MR	<input type="checkbox"/>	SC	THERMOSTAT(S)	<input type="checkbox"/> Mechanical <input type="checkbox"/> Electronic/Programmable	

LINE ITEM(S):

COMMENTS...

E-6..... * While there have been two Arc-Fault Breakers installed in the main panel for what is labeled "kitchen porch" and "smoke family foyer hall bath master" current code requires this type of breaker on all outlet circuits in the home, this code upgrade is incomplete and does not comply with current code.



E-9,10,11... * Current code require all electrical outlets in the home to have safety grounds attached to a three prong outlet protected in the main panel with an Arc-Fault breaker. While most all of the electrical wiring have grounds attached in the main panel there are only ungrounded outlets in the main living spaces that had only cosmetic renovation. The one outlet opened had no ground wire in the box. Recommend evaluation by a qualified electrical contractor on options to ground outlets as ungrounded outlets will not protect attached equipment.



E-11..... * There is an open electrical outlet box and an outlet that is not GFCI protected, although grounded< outlet in the unfinished forward basement. The box needs a blank cover plate and the outlet must be GFCI protected to meet 1991 codes.



INSPECTION REPORT FOR:

FOLSE @ 2895 APPLING CIRCLE ATLANTA, GA 30341 12/19/2013

CONTINUED FROM PAGE 6...

LINE ITEM(S):

COMMENTS

- E-11.....** * There is no light switch in the front unfinished basement, lights are operated with switched at the laundry room and unfinished shop area at the rear basement which is a code and safety violation.
- H/A-1,12..** * Temperature in the house upon arrival was 81° with both thermostats well below that setting but the system still operating. It was determined the electronic zone control is ending conditioned air upstairs under the command of the lower level thermostat and the downstairs under the command of the downstairs thermostat explaining the high temperature upon arrival. The zone control needs to be properly wired prior to closing and as soon as possible to control energy bills, system was left on heat with both thermostats set to 60°.
- H/A-7.....** * There is an open gap in the AC coolant line visible in the front unfinished basement that will need to be sealed to prevent condensation from dripping off the line in the cooling mode.



STATUS

ITEMS

PLUMBING (P)

LINE	AC	NP	NI	DE	MR	SC	ITEMS
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER SUPPLY: <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> WELL
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SEWAGE SERVICE: <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> SEPTIC
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER PIPING: <input checked="" type="checkbox"/> COPPER <input type="checkbox"/> POLY-B <input type="checkbox"/> C-PVC <input type="checkbox"/> PLASTIC TUBING
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DRAIN / WASTE PIPING: <input checked="" type="checkbox"/> PVC <input type="checkbox"/> CAST IRON
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER PRESSURE <input checked="" type="checkbox"/> ~65 PSIG
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER HEATER: MFG: <input checked="" type="checkbox"/> A.O. SMITH AGE: <input checked="" type="checkbox"/> 5
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER HEATER: CAPACITY: <input checked="" type="checkbox"/> 40 (U.S. Gal.) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> TANKLESS
6A	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER HEATER: MFG: <input checked="" type="checkbox"/> AGE: <input checked="" type="checkbox"/>
7A	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WATER HEATER: CAPACITY: <input checked="" type="checkbox"/> (U.S. Gal.) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> TANKLESS
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TEMPERATURE / PRESSURE RELIEF VALVE & DISCHARGE LINE
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BURNER / EXHAUST FLUE / GAS LINES / TEMPERATURE CONTROL VALVE
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LAUNDRY ROOM / LAUNDRY TUB / SINK / DRYER EXHAUST
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PLUMBING CONNECTIONS; MISC. PLUMBING; EXTERIOR PLUMBING

LINE	AC	NP	NI	DE	MR	SC	ITEMS
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	POOL TYPE: <input type="checkbox"/> IN GROUND <input type="checkbox"/> ABOVE GROUND
2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DECK / APRON: <input type="checkbox"/> WOOD <input type="checkbox"/> MASONRY
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HEATER: <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PUMP / ELECTRICAL (Wiring, Lights, G.F.I.)
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FILTER / LINES & PIPING
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LINER: <input type="checkbox"/> VINYL <input type="checkbox"/> MASONRY (Gunnite)
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HOT TUB / SPA: <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> MASONRY <input type="checkbox"/> WOOD

LINE ITEM(S):

C O M M E N T S...

P-3..... * While the copper water piping does appear to be grounded there needs to be visible jumpers between the cold and hot water piping and a jumper around the pressure regulating valve for safety and code. Additionally where the piping is outside the insulated living envelope or against exterior masonry walls the pipe should be insulated.



P-4..... * The majority of the main drain system is the original cast iron that fails from inside out corroding and clogging drain lines and rusting through in spots, as the piping fails it is replaced with PVC piping such as what was used for the laundry drain lines.

LINE	AC	NP	NI	DE	MR	SC	MASTER
1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SINKS / FAUCETS / DRAINS / VANITIES
2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BATH TUB: <input type="checkbox"/> JETTED STYLE GFCI PROTECTED? <input type="checkbox"/> No <input type="checkbox"/> Yes
3	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TOILET
4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SHOWER: <input checked="" type="checkbox"/> TILE <input type="checkbox"/> FIBERGLASS <input type="checkbox"/> GLASS <input type="checkbox"/> CULTURED MARBLE
5	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VENTILATION: <input checked="" type="checkbox"/> EXHAUST FAN <input checked="" type="checkbox"/> WINDOW
6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FLOOR: <input checked="" type="checkbox"/> TILE <input type="checkbox"/> LINOLEUM <input type="checkbox"/> CARPET <input type="checkbox"/> HARDWOOD <input type="checkbox"/> VINYL TILE
7	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WALLS & CEILING
8	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CAULKING & GROUTING
LINE							UPSTAIRS: HALL
9	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SINKS / FAUCETS / DRAINS / VANITIES
10	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BATHTUB / SHOWER
11	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TOILET
12	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VENTILATION: <input checked="" type="checkbox"/> EXHAUST FAN <input type="checkbox"/> WINDOW
13	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FLOOR: <input checked="" type="checkbox"/> TILE <input type="checkbox"/> LINOLEUM <input type="checkbox"/> CARPET <input type="checkbox"/> HARDWOOD <input type="checkbox"/> VINYL TILE
14	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WALLS & CEILING
15	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CAULKING & GROUTING
LINE							ADDITIONAL BATHROOMS:
16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	SINKS / FAUCETS / DRAINS / VANITIES
17	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	BATHTUBS / SHOWERS
18	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	TOILETS
19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	VENTILATION: <input type="checkbox"/> EXHAUST FANS <input type="checkbox"/> WINDOWS
20	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	FLOORS: <input type="checkbox"/> TILE <input type="checkbox"/> LINOLEUM <input type="checkbox"/> CARPET <input type="checkbox"/> HARDWOOD <input type="checkbox"/> VINYL TILE
21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WALLS & CEILINGS
22	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	CAULKING & GROUTING
23	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	GFCI PROTECTION FOR ALL BATHROOMS OUTLETS

LINE ITEM(S):

COMMENTS...

B-1,9.....* Typically where a sink meets a wall a backsplash is provided to protect the wall from inevitable water damage. There are no back splashes at the bathroom sinks in this home.



B-15..... * There is deterioration in the grouting of the seams of the hall bathroom tub/shower at the corner seams and at the walls and floor outside the tub that will require repair.



STATUS

ITEMS

LINE	ATTIC AREA (A)									
1	<input checked="" type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	ACCESS: <input checked="" type="checkbox"/> PULLDOWN <input type="checkbox"/> SCUTTLE <input type="checkbox"/> STAIRS <input type="checkbox"/> DOOR			
2	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	ROOF FRAMING: <input type="checkbox"/> RAFTERS <input type="checkbox"/> TRUSSES <input type="checkbox"/> OTHER:			
3	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	ROOF SHEATHING: <input type="checkbox"/> PLYWOOD <input type="checkbox"/> WAFFERBOARD <input type="checkbox"/> WOOD PLANKS			
4	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	VENTILATION: <input type="checkbox"/> GABLE <input type="checkbox"/> RIDGE <input type="checkbox"/> SOFFIT <input type="checkbox"/> SURFACE			
5	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	THERMOSTATICALLY CONTROLLED ELECTRIC ROOF FAN(S)			
6	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	WHOLE HOUSE FAN			
7	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	INSULATION TYPE: FIBERGLASS/WOOL - LOOSE FILL APPROX. "R" RATING: 11			
8	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	ATTIC FLOOR JOISTS			
9	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	INTERIOR CHIMNEYS & FLUES			
10	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	EVIDENCE OF CHRONIC MOISTURE PENETRATION? <input type="checkbox"/> YES <input type="checkbox"/> NO			

LINE	MISCELLANEOUS (M)									
1	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	SMOKE DETECTOR (S) MECHANICALLY TESTED			
2	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	WELL / PUMP / WATER STORAGE TANK			
3	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	OTHER:			
4	<input type="checkbox"/> AC	<input type="checkbox"/> NP	<input type="checkbox"/> NI	<input type="checkbox"/> DE	<input type="checkbox"/> MR	<input type="checkbox"/> SC	OTHER:			

WERE THERE ANY AREAS OF THE PROPERTY OBSTRUCTED OR INACCESSIBLE? ☒ YES ☐ NO

OBSTRUCTIONS MAY INCLUDE, BUT ARE NOT LIMITED TO, WALL & FLOOR COVERINGS, FIXED & DROPPED CEILINGS, FURNITURE OR STORED ARTICLES.

LINE	ITEM(S):	COMMENTS...
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A-1..... * The back board of the attic pulldown ladder should have some form of insulation installed, either a styrofoam insulating board or a fiberglass insulation mat. Weather stripping the edge of the back board is also recommended.



A-2,3..... * There is a wide spread mold or fungus visible on the roof framing and sheathing, primarily forward from the front of attic access to the front gable vent. Recommend evaluation and remediation by a qualified Environmental Contractor to identify and remediate the growth.



A-4..... * The ventilation for this attic is insufficient for current construction practices and could cause roof shingles to curl and lift prematurely due to the build up of heat in the attic. A ridge vent would be the best option for this roof type. Recommend adding ridge and more soffit vents when the roof shingles are next replaced which would eliminate the need for the surface and gable vents. There is a loose screen on a gable vent that needs immediate repair.



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LINE ITEM(S):

COMMENTS

A-7.....* Current code requires an insulation blanket in the attic with an R-30 rating which is approximately an average depth of 12 inches on the attic floor. The insulation in this attic, where properly spread may be an R-19 and there are areas where the insulation was moved or removed for work to be completed and was not put back in place. Recommend evaluation by a qualified insulation contractor to determine cost of upgrading this attic to an R-30 insulation rating.



A-7.....* There is evidence of past rodent and/or squirrel activity on the insulation (trails, tunnels, droppings, etc.).



A-9,10.....* There are water stained roof sheathing boards around the roof penetrations from past leaks that should have been repaired when the roof shingles were replaced, the areas should be monitored during heavy storms to ensure leaks are not active as there was no moisture at the time of inspection. Boards may need to be replaced when the shingles are next replaced.



END