



Building Inspection Report

Building Inspection Professionals Sydney (BIPS) services for your home or building, by qualified experts with international project management experience. Each inspector agrees to comply with and are performance managed against BIPS.expert/Code of Conduct. For further information about your report call 0405 507 619 or for further information on our code of code please visit www.BIPS.expert/code of conduct.



BIPS GROUP

- Building Inspection Professionals Sydney
- Building, Industrial, Property Services

Double Story Building Inspection

Building Inspection Professional Sydney is a national organization that promotes quality building inspections. BIPS engages with trade qualified builders with a minimum off 30 years of residential and commercial building experience to complete property inspections.

Each home and building inspection completed is then detailed in a report that is completed to Australian Standards AS4349.3

You can reach us at our NSW address in: The Rocks, Circular Quay, Sydney NSW 2000 and West Ryde, NSW 2114. BIPS is also proud to service Coffs Harbor, NSW; Adelaide, South Australia, Melbourne, Victoria; Perth, Western Australia and Darwin, Northern Territory.

Address of Property:	Inspection Details
<input type="checkbox"/> Pre-purchased <input type="checkbox"/> Construction Progress <input type="checkbox"/> Dilapidation <input type="checkbox"/> Insurance	Date/ Time of Inspection:
Client Details	<input type="checkbox"/> Hand over <input type="checkbox"/> Expert Witness <input type="checkbox"/> Home Warranty
Name:	Client Account: Present at Inspection: <input type="checkbox"/> Owner, <input type="checkbox"/> Renter <input type="checkbox"/> Builder <input type="checkbox"/> Purchaser <input type="checkbox"/> Agency
Email Address:	
Phone	
Business Address:	
Postal Address:	
Inspector Details	Source of enquiry:
Inspector Name: Mathew Manson	<input type="checkbox"/> Social Media <input type="checkbox"/> Hi Pages <input type="checkbox"/> One Flare <input type="checkbox"/> Referral <input type="checkbox"/> Website
Email Address: hello@bips.expert	

1. Summary of Inspected Property

<p>Approx age of property:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Current Construction (0-1yr-old), <input type="checkbox"/> Newbuild (1-5yr's), <input type="checkbox"/> Existing (5-40yr's) <input type="checkbox"/> Older (40+ yr.'s) <input type="checkbox"/> Heritage <p>Tree of Significance</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No 	<p>Easement</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Gas <input type="checkbox"/> Sewer <input type="checkbox"/> Electricity <input type="checkbox"/> Right of way <input type="checkbox"/> Shared services <input type="checkbox"/> Known <input type="checkbox"/> Possible 	<p>Frontage Inclusions</p> <ul style="list-style-type: none"> <input type="checkbox"/> Veranda <input type="checkbox"/> Porch/Portico <input type="checkbox"/> Pilar/Column <input type="checkbox"/> Quions <ul style="list-style-type: none"> <input type="radio"/> None <input type="radio"/> Stone <input type="radio"/> Render <input type="radio"/> Brick
<p>Property Type:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Unit <input type="checkbox"/> House <input type="checkbox"/> Masonite/ Duplex <input type="checkbox"/> Farm <input type="checkbox"/> Commercial <input type="checkbox"/> Granny Flat <input type="checkbox"/> Cottage <p>Foundation</p> <ul style="list-style-type: none"> <input type="checkbox"/> Strip <input type="checkbox"/> Slab <input type="checkbox"/> Cantier Lever <input type="checkbox"/> Suspended <input type="checkbox"/> Concrete Pad <input type="checkbox"/> Piers <input type="checkbox"/> Pillar <input type="checkbox"/> Timber <input type="checkbox"/> Steele 	<p>Foundation Condition: <i>Poor, Fair, Good</i></p> <p>Compliant:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <p>Construction Type:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Brick/ Veneer <input type="checkbox"/> Concrete <input type="checkbox"/> Mixed construction <input type="checkbox"/> SIP <input type="checkbox"/> Cladding <ul style="list-style-type: none"> <input type="radio"/> metal, <input type="radio"/> board <input type="radio"/> timber <input type="radio"/> hebel <input type="radio"/> foam <input type="radio"/> other 	<p>Construction Condition: <i>Poor, Fair, Good</i></p> <p>Type of Carpark/spaces</p> <ul style="list-style-type: none"> <input type="checkbox"/> Carport <input type="checkbox"/> Garage <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Three plus <input type="checkbox"/> Open air off street <input type="checkbox"/> Street parking <p>General Condition: <i>Poor Fair Good</i></p> <p>No. of parking spaces:</p>

Image of front vista of property

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3. Inspection Agreement

AS 439.1 -2007 requires that an inspection agreement be entered into between the inspector and the client prior to the conduct of the inspection. This agreement sets out specific limitations on the scope of the inspection and on the limits that apply in carrying it out. Where specific state of territory requirements applies in addition to the scope in this agreement. It is assumed that the existing use of the building will continue.

AS 4349.01 -2007 requires that the basis for comparison is a building of similar age and similar type to the subject building and which is in reasonable condition, having been adequately maintained over the life of the building. This means that building being inspected may not comply with the Australian Standards, building regulations or specific state or territory requirements applicable at the time of the inspection.

Purpose of inspection:	
The purpose of the inspection is to provide advice regarding the condition of the property at the time of the inspection.	
The property at the time of inspection:	
Yes/No	Note:
	<p>Areas where reasonable entry is denied to the inspector or where reasonable access is not available are excluded from and do not form part of the inspection.</p> <p>Access limitations may include the right of entry, locked doors, security systems, pets, furniture, or other obstructions. Physical access limitations may include height, narrow boundary clearance, thick vegetation, small roof or crawl space and adverse weather conditions. The report shall identify any area or item within the scope of the inspection that was not inspected and the factor that prevented inspection.</p> <p>The extent of accessible areas shall be determined by the inspector at the time of inspection based on the conditions encountered at that time. The inspection shall include only accessible areas and areas that are within the inspector's line of sight and close enough to enable reasonable appraisal.</p> <p>Reasonable access includes a prerequisite that the minimum clearances specified in the table below are safely available.</p> <p>Dimensions for access:</p> <ul style="list-style-type: none"> - Roof interior: 400mm x 500mm access hole, 600mm x 600mm crawl space and accessible from a 3.6m ladder. - Roof exterior: 400mm x 500mm access hole, 600mm x 600mm crawl space and accessible from a 3.6m ladder placed on the ground. <p>Supplementary notes:</p> <ul style="list-style-type: none"> - Reasonable access does not include the cutting of access holes or the removal of screws and bolts or any other fastenings or sealants to access covers. - Sub-floor areas sprayed with chemicals are not to be inspected unless safe to do so.
Conditions	
An inspection may be conditional on:	
<ul style="list-style-type: none"> - Prevailing weather conditions or recent occupancy and use of services that might affect observations. - Information provided by the client or the agents of the client; - Deliberate concealment of defects - Any other relevant factors limiting the inspection 	

4. Particulars of Inspected Property

Main <input type="checkbox"/> Hot Water <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> Solar General condition: <i>Poor, Fair, Good</i>	No. of Solar Panels Solar with Battery <input type="checkbox"/> Yes <input type="checkbox"/> No Battery Location: Solar Hot Water Unit: <input type="checkbox"/> Yes <input type="checkbox"/> No General condition: <i>Poor, Fair, Good</i>	Fireplaces <input type="checkbox"/> Yes No#: <input type="checkbox"/> No Location: Chimney: <input type="checkbox"/> Closed <input type="checkbox"/> Functional General condition: <i>Poor, Fair, Good</i>	TV Antenna <input type="checkbox"/> Yes <input type="checkbox"/> No Satellite Dish <input type="checkbox"/> Yes <input type="checkbox"/> No Ventilation Pipe <input type="checkbox"/> Yes <input type="checkbox"/> No General condition: <i>Poor, Fair, Good</i>
Safety Switch: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Approx wall height: <input type="checkbox"/> 2.4 <input type="checkbox"/> 2.7m <input type="checkbox"/> 3m <input type="checkbox"/> Higher/other	Number of Bedrooms: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	Number of Bathrooms: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3	Extra toilet <input type="checkbox"/> 1 <input type="checkbox"/> 2
Bathroom Type: <input type="checkbox"/> Ensuite <input type="checkbox"/> Main common <input type="checkbox"/> Extra toilet <input type="checkbox"/> Mud room. General condition: <i>Poor, Fair, Good</i>	Laundry: <input type="checkbox"/> Separate room <input type="checkbox"/> Common area <input type="checkbox"/> Cupboard facility General condition: <i>Poor, Fair, Good</i>	Hallway <input type="checkbox"/> Ground floor. <input type="checkbox"/> First Floor General condition: <i>Poor, Fair, Good</i>	Smoke Alarm Number: 1, 2, 3, 4 <input type="checkbox"/> Hard wired <input type="checkbox"/> Battery General condition: <i>Poor, Fair, Good</i>
Stairs			
Stairs <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> External <input type="checkbox"/> Internal Tread height. <input type="checkbox"/> Compliant <input type="checkbox"/> Irregular	Construction <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Steel <input type="checkbox"/> Glass <input type="checkbox"/> Other General condition: <i>Poor, Fair, Good</i>	Type: <input type="checkbox"/> Spiral <input type="checkbox"/> Conventional <input type="checkbox"/> Floating <input type="checkbox"/> Carpeted <input type="checkbox"/> Timber <input type="checkbox"/> Tiled	Landing: <input type="checkbox"/> No <input type="checkbox"/> Yes Handrail Balustrade <input type="checkbox"/> Yes <input type="checkbox"/> No Chair Lift <input type="checkbox"/> Yes <input type="checkbox"/> No
Ability Features? Yes. No.			
Ramps: <input type="checkbox"/> No <input type="checkbox"/> Yes Entrance <input type="checkbox"/> No <input type="checkbox"/> Yes Exit <input type="checkbox"/> No <input type="checkbox"/> Yes	Door Ramps: <input type="checkbox"/> No <input type="checkbox"/> Yes Shower Area <input type="checkbox"/> Accessible Shower <input type="checkbox"/> Grab Rails <input type="checkbox"/> Second Shower <input type="checkbox"/> Handset <input type="checkbox"/> Ability Bath	Toilet Grab Rail <input type="checkbox"/> No <input type="checkbox"/> Yes Handrails in other rooms: <input type="checkbox"/> No <input type="checkbox"/> Yes	Ability Lifter <input type="checkbox"/> Yes <input type="checkbox"/> No Other Areas Modified <input type="checkbox"/> Lift <input type="checkbox"/> Kitchen <input type="checkbox"/> Doorways <input type="checkbox"/> External handrails
Decorative Features? Yes. No.		Balconies? Yes. No.	
Wainscoting <input type="checkbox"/> Yes <input type="checkbox"/> No Picture Rails <input type="checkbox"/> Yes <input type="checkbox"/> No	Chair Rails <input type="checkbox"/> Yes <input type="checkbox"/> No Ceiling Roses <input type="checkbox"/> Yes <input type="checkbox"/> No General condition: <i>Poor, Fair, Good</i>	Balustrade Type: <input type="checkbox"/> Glass <input type="checkbox"/> Timber <input type="checkbox"/> Steel <input type="checkbox"/> Brick block concrete	<input type="checkbox"/> Rendered <input type="checkbox"/> Plain Balustrade Compliant: <input type="checkbox"/> Yes <input type="checkbox"/> No General condition: <i>Poor, Fair, Good</i>

5. Roof, Balcony and Garage

Roof	
<p>ROOF TYPES</p>	<p>Roof Material</p> <ul style="list-style-type: none"> <input type="checkbox"/> Tiled <input type="checkbox"/> (Slate) <input type="checkbox"/> (Concrete) <input type="checkbox"/> (Terracotta) <input type="checkbox"/> Iron Colourbond <input type="checkbox"/> Iron Zincalume <input type="checkbox"/> Expanda Deck <input type="checkbox"/> SIP <input type="checkbox"/> Other <p>General Condition: <i>Poor Fair Good</i></p>
	<p>Gutter Type</p> <ul style="list-style-type: none"> <input type="checkbox"/> Colourbond <input type="checkbox"/> High profile <input type="checkbox"/> Low profile <input type="checkbox"/> Box Gutter <input type="checkbox"/> Downpipe <input type="checkbox"/> None <p>General Condition: Poor Fair Good</p> <p>Gutter/leaf Guard?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Y <input type="checkbox"/> N
Common Eave Faults	
<ul style="list-style-type: none"> <input type="checkbox"/> Gaps <input type="checkbox"/> Raw timber present <input type="checkbox"/> Poor paintwork <input type="checkbox"/> Damage <input type="checkbox"/> Sagging/ not level <input type="checkbox"/> Nail holes visible 	<ul style="list-style-type: none"> <input type="checkbox"/> Missing components <input type="checkbox"/> Wrong product <input type="checkbox"/> Over painting on surrounding walls/surfaces <input type="checkbox"/> Workmanship issues ✓ See comments or photos
Common Roofing Faults	
<ul style="list-style-type: none"> <input type="checkbox"/> Ridge Capping Issues <input type="checkbox"/> Valley Issues <input type="checkbox"/> Rain-head Issues <input type="checkbox"/> Water Pooling in gutters <input type="checkbox"/> Gutter straps <input type="checkbox"/> Flashing Installation <input type="checkbox"/> Downpipe Issue <input type="checkbox"/> Inadequate Downpipes <input type="checkbox"/> Spreader Issue <input type="checkbox"/> Wrong product <input type="checkbox"/> Gable Issue 	<ul style="list-style-type: none"> <input type="checkbox"/> Water Direction Change <input type="checkbox"/> Sarking Issue <input type="checkbox"/> Screw or Fixing Issue <input type="checkbox"/> Capping Issue <input type="checkbox"/> Vegetation/moss growth <input type="checkbox"/> Poor patch or patching <input type="checkbox"/> Damaged/missing roof tiles <input type="checkbox"/> Paint work issues <input type="checkbox"/> Workmanship Issue ✓ See comments or photos

5. Roof, Balcony & Garage

Balcony		
Floor	Condition	Comments
<input type="checkbox"/> Tiled <input type="checkbox"/> Timber deck <input type="checkbox"/> Cement or cement board <input type="checkbox"/> Painted	<i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i>	<input type="checkbox"/> Marked <input type="checkbox"/> Chipped <input type="checkbox"/> Stained
Walls	Condition	Comments
<input type="checkbox"/> Paint work <input type="checkbox"/> Brick work <input type="checkbox"/> Render	<i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i>	
Balustrade	Condition	
<input type="checkbox"/> Timber <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Stainless steel <input type="checkbox"/> Render wall <input type="checkbox"/> Brick wall	<i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i>	Balustrade Height: Comments:
Floor Drainage	Compliant?	Comments:
<input type="checkbox"/> Floor <input type="checkbox"/> Side <input type="checkbox"/> Front	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Water Proofing Issue?	Compliant?	Comments
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

5. Roof, Balcony & Garage

Garage		
<input type="checkbox"/> Separate	<input type="checkbox"/> Single <input type="checkbox"/> Under main roof	<input type="checkbox"/> Double
Floor	<i>Condition: Poor, Fair, Good</i>	Comments
<input type="checkbox"/> Raw concrete	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Marked
<input type="checkbox"/> Tiled	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Chipped
<input type="checkbox"/> Painted	<i>Poor, Fair, Good</i> <i>Poor, Fair, Good</i>	<input type="checkbox"/> Stained
Ceiling	<i>Condition: Poor, Fair, Good</i>	
Ceiling Inspection Findings		
<input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Damage/ dints or dents	
<input type="checkbox"/> Gyprock Flushing joints visible	<input type="checkbox"/> Poor workmanship	
<input type="checkbox"/> Cracks in surface	<input type="checkbox"/> Paint runs/drips	
<input type="checkbox"/> Translucent paint/inadequate coverage	<input type="checkbox"/> Missing product	
<input type="checkbox"/> Sagging	<input type="checkbox"/> Unfinished surfaces	
<input type="checkbox"/> Cutting in of paintwork, poor quality	<input type="checkbox"/> Water damage	
<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces	<input type="checkbox"/> Cornice issues	
<input type="checkbox"/> Dirt/grit or hair present in paintwork	<input type="checkbox"/> Marks and smudges	
	✓ See comments or photos	
Walls	<i>Condition: Poor, Fair, Good</i>	
Wall Inspection Findings		
Translucent paint/inadequate coverage	<input type="checkbox"/> Cutting in of paintwork, poor quality	
<input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces	
<input type="checkbox"/> Gyprock Flushing joints visible	<input type="checkbox"/> Dirt/grit or hair present in paintwork	
<input type="checkbox"/> Cracks in surface	<input type="checkbox"/> Marks and smudges	
<input type="checkbox"/> Damage/ dints or dents	<input type="checkbox"/> Unfinished surfaces	
<input type="checkbox"/> Poor workmanship	<input type="checkbox"/> Water damage	
<input type="checkbox"/> Paint runs/drips	✓ See comments or photos	
Type of wall	<i>Condition</i>	Comments
<input type="checkbox"/> Gyprock	<i>Poor, Fair, Good</i>	
<input type="checkbox"/> Brick work	<i>Poor, Fair, Good</i>	
<input type="checkbox"/> Render	<i>Poor, Fair, Good</i>	
<input type="checkbox"/> Paint	<i>Poor, Fair, Good</i>	
Skirting	<i>Condition: Poor, Fair, Good</i>	Comments
Garage Door	<i>Condition:</i>	Comments
<input type="checkbox"/> None	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Door seal broken
<input type="checkbox"/> Electric		<input type="checkbox"/> Dented garage door
<input type="checkbox"/> Manual		<input type="checkbox"/> Damage lock
<input type="checkbox"/> Panel lift		<input type="checkbox"/> Motor not working
<input type="checkbox"/> Roller		<input type="checkbox"/> No remote/untested
Garage Pedestrian Door	<i>Condition: Poor, Fair, Good</i>	Comments:
<input type="checkbox"/> Single access door	Yes No	
<input type="checkbox"/> Security Door	Yes No	
<input type="checkbox"/> Roller	Yes No	
Electrical Fittings	<i>Condition: Poor, fair, good</i>	
		<input type="checkbox"/> Incorrectly fitted
		<input type="checkbox"/> Damaged or cracked

Garage (continued)		
Power points	Condition: <i>Poor, fair, good</i>	Power point Inspection Findings
Number <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> present <input type="checkbox"/> Improper placement <input type="checkbox"/> Missing <input checked="" type="checkbox"/> See comments or photos
Light fittings	Condition: <i>Poor, fair, good</i>	Light Fitting Inspection Findings
Number <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Improper placement <input type="checkbox"/> Missing <input checked="" type="checkbox"/> See comments or photos
Light switches	Condition: <i>Poor, fair, good</i>	Light Switch Inspection Findings
Number <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Improper placement <input type="checkbox"/> Missing <input checked="" type="checkbox"/> See comments or photos

6. Exterior Front Elevation

Garage:		Exterior	
Number of Balconies <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> None <input type="checkbox"/> Under main roof <input type="checkbox"/> Separate <input type="checkbox"/> Workshop <input type="checkbox"/> Retail <input type="checkbox"/> Tool Shed <input type="checkbox"/> Chicken/animal enclosure General condition: <i>Poor, Fair, Good</i>	Eaves: General Condition: <i>Poor, Fair, Good</i> Window General Condition: <i>Poor, Fair, Good</i> Walls: General Condition: <i>Poor, Fair, Good</i> Paint General Condition: <i>Poor, Fair, Good</i> Roof General Condition: <i>Poor, Fair, Good</i> Landscaping General Condition: <i>Poor, Fair, Good</i>	
Building Style		Exterior Wall Finishes	
<input type="checkbox"/> Modern <input type="checkbox"/> Elaborate <input type="checkbox"/> Colonial <input type="checkbox"/> Tudor <input type="checkbox"/> Art Deco <input type="checkbox"/> Architectural <input type="checkbox"/> Other	<input type="checkbox"/> Render <input type="checkbox"/> Brick work <input type="checkbox"/> Cladding <input type="checkbox"/> Tiled <input type="checkbox"/> Steele <input type="checkbox"/> Foam	<input type="checkbox"/> Hebel <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Block work General condition: <i>Poor, Fair, Good</i>	
Doors	Entrance	Windows	Window style
Entry Doors <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Timber <input type="checkbox"/> Timber and Glass <input type="checkbox"/> Metal <input type="checkbox"/> Glass Security Door <input type="checkbox"/> Yes <input type="checkbox"/> No Flyscreen Door <input type="checkbox"/> Yes <input type="checkbox"/> No Locks <input type="checkbox"/> Single entry <input type="checkbox"/> Deadbolt <input type="checkbox"/> Triple Lock Exterior Condition: <i>Poor, fair, good</i>	Entrance <input type="checkbox"/> Veranda <input type="checkbox"/> Porch <input type="checkbox"/> Hallway <input type="checkbox"/> Doorway General condition: <i>Poor, Fair, Good</i> Shutters <input type="checkbox"/> None <input type="checkbox"/> Electronic <input type="checkbox"/> Manual <input type="checkbox"/> Decorative General condition of <i>Poor, Fair, Good</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> More than <input type="checkbox"/> Flyscreen <input type="checkbox"/> Security screen <input type="checkbox"/> Locks	<input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Frameless <input type="checkbox"/> Sliding <input type="checkbox"/> Hinged <input type="checkbox"/> Winder <input type="checkbox"/> Sash Exterior Condition: <i>Poor, fair, good</i>

6. Exterior *Front* Elevation Continued

<p>Swimming Pool</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Private <input type="checkbox"/> Community <input type="checkbox"/> Above Ground <input type="checkbox"/> Inground <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Lined Plastic <input type="checkbox"/> Shipping Container 	<p>Swimming Pool Pool Area</p> <ul style="list-style-type: none"> <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <input type="checkbox"/> Grassed <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>	<p>Pool Fence</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Other <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>	<p>Spa</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Connected to pool <input type="checkbox"/> Separate <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>
Landscaping, Driveway and Paths			
<p>Paths</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Driveway</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Landscaping Planting</p> <ul style="list-style-type: none"> <input type="checkbox"/> Minimal <input type="checkbox"/> Medium <input type="checkbox"/> Elaborate <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Grass</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Real <input type="checkbox"/> Synthetic <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Location</p> <ul style="list-style-type: none"> <input type="checkbox"/> Deck <input type="checkbox"/> Balcony <input type="checkbox"/> Roof top <input type="checkbox"/> Veranda <input type="checkbox"/> Gazebo <input type="checkbox"/> Yard <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>
<p>Fencing</p> <ul style="list-style-type: none"> <input type="checkbox"/> On top of retaining wall <input type="checkbox"/> Stand alone <input type="checkbox"/> None <input type="checkbox"/> Brick <input type="checkbox"/> Timber <input type="checkbox"/> Colourbond <input type="checkbox"/> Other <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Retaining Wall</p> <ul style="list-style-type: none"> <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Other <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> Above 1m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>External Stairs</p> <ul style="list-style-type: none"> <input type="checkbox"/> Timber <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Brick <input type="checkbox"/> Other <input type="checkbox"/> Entrance Stairs <input type="checkbox"/> Garden Stairs <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Bin Location:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Undercover <input type="checkbox"/> Outdoors <input type="checkbox"/> Private 	<p>Gate</p> <ul style="list-style-type: none"> <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Slider <input type="checkbox"/> Manual <input type="checkbox"/> Automatic <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Bin Room General condition: <i>Poor, Fair, Good</i></p>

6. Exterior Right Elevation

Number of Balconies <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		Garage: <input type="checkbox"/> None <input type="checkbox"/> Under main roof <input type="checkbox"/> Separate <input type="checkbox"/> Workshop <input type="checkbox"/> Retail <input type="checkbox"/> Tool Shed <input type="checkbox"/> Chicken/animal enclosure General condition: <i>Poor, Fair, Good</i>		Exterior Eaves: General Condition: <i>Poor, Fair, Good</i> Window General Condition: <i>Poor, Fair, Good</i> Walls: General Condition: <i>Poor, Fair, Good</i> Paint General Condition: <i>Poor, Fair, Good</i> Roof General Condition: <i>Poor, Fair, Good</i> Landscaping General Condition: <i>Poor, Fair, Good</i>		
Building Style <input type="checkbox"/> Modern <input type="checkbox"/> Elaborate <input type="checkbox"/> Colonial <input type="checkbox"/> Tudor <input type="checkbox"/> Art Deco <input type="checkbox"/> Architectural <input type="checkbox"/> Other		Exterior Wall Finishes <input type="checkbox"/> Render <input type="checkbox"/> Brick work <input type="checkbox"/> Cladding <input type="checkbox"/> Tiled <input type="checkbox"/> Steele <input type="checkbox"/> Foam <input type="checkbox"/> Hebel <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Block work General condition: <i>Poor, Fair, Good</i>				
Doors Entry Doors <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Timber <input type="checkbox"/> Timber and Glass <input type="checkbox"/> Metal <input type="checkbox"/> Glass Security Door <input type="checkbox"/> Yes <input type="checkbox"/> No Flyscreen Door <input type="checkbox"/> Yes <input type="checkbox"/> No Locks <input type="checkbox"/> Single entry <input type="checkbox"/> Deadbolt <input type="checkbox"/> Triple Lock Exterior Condition: <i>Poor, fair, good</i>		Entrance Entrance <input type="checkbox"/> Veranda <input type="checkbox"/> Porch <input type="checkbox"/> Hallway <input type="checkbox"/> Doorway General condition: <i>Poor, Fair, Good</i> Shutters <input type="checkbox"/> None <input type="checkbox"/> Electronic <input type="checkbox"/> Manual <input type="checkbox"/> Decorative General condition of <i>Poor, Fair, Good</i>		Windows <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> More than <input type="checkbox"/> Flyscreen <input type="checkbox"/> Security screen <input type="checkbox"/> Locks		Window style <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Frameless <input type="checkbox"/> Sliding <input type="checkbox"/> Hinged <input type="checkbox"/> Winder <input type="checkbox"/> Sash Exterior Condition: <i>Poor, fair, good</i>

6.Exterior Right Elevation Continued

<p>Swimming Pool</p> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Private <input type="checkbox"/> Community <input type="checkbox"/> Above Ground <input type="checkbox"/> Inground <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Lined Plastic <input type="checkbox"/> Shipping Container	<p>Swimming Pool Pool Area</p> <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <input type="checkbox"/> Grassed	<p>Pool Fence</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Other	<p>Spa</p> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Connected to pool <input type="checkbox"/> Separate <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck
<p>Condition: <i>Poor, fair, good</i></p>		<p>Condition: <i>Poor, fair, good</i></p>	
<p>Landscaping, Driveway and Paths</p>			
<p>Paths</p> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn	<p>Driveway</p> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn	<p>Landscaping Planting</p> <input type="checkbox"/> Minimal <input type="checkbox"/> Medium <input type="checkbox"/> Elaborate	<p>Location</p> <input type="checkbox"/> Deck <input type="checkbox"/> Balcony <input type="checkbox"/> Roof top <input type="checkbox"/> Veranda <input type="checkbox"/> Gazebo <input type="checkbox"/> Yard
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
		<p>Grass</p> <input type="checkbox"/> None <input type="checkbox"/> Real <input type="checkbox"/> Synthetic	<p>General condition: <i>Poor, Fair, Good</i></p>
		<p>General condition: <i>Poor, Fair, Good</i></p>	
<p>Fencing</p> <input type="checkbox"/> On top of retaining wall <input type="checkbox"/> Stand alone <input type="checkbox"/> None <input type="checkbox"/> Brick <input type="checkbox"/> Timber <input type="checkbox"/> Colourbond <input type="checkbox"/> Other	<p>Retaining Wall</p> <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Other	<p>External Stairs</p> <input type="checkbox"/> Timber <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Brick <input type="checkbox"/> Other <input type="checkbox"/> Entrance Stairs <input type="checkbox"/> Garden Stairs	<p>Gate</p> <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Slider <input type="checkbox"/> Manual <input type="checkbox"/> Automatic
<p>Height:</p> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m		<p>Height:</p> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m	
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
		<p>Bin Location:</p> <input type="checkbox"/> Undercover <input type="checkbox"/> Outdoors <input type="checkbox"/> Private	<p>General condition: <i>Poor, Fair, Good</i></p>
		<p>General condition: <i>Poor, Fair, Good</i></p>	

6.Exterior *Left* Elevation

	Garage:	Exterior	
Number of Balconies <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> None <input type="checkbox"/> Under main roof <input type="checkbox"/> Separate <input type="checkbox"/> Workshop <input type="checkbox"/> Retail <input type="checkbox"/> Tool Shed <input type="checkbox"/> Chicken/animal enclosure General condition: <i>Poor, Fair, Good</i>	Eaves: General Condition: <i>Poor, Fair, Good</i> Window General Condition: <i>Poor, Fair, Good</i> Walls: General Condition: <i>Poor, Fair, Good</i> Paint General Condition: <i>Poor, Fair, Good</i> Roof General Condition: <i>Poor, Fair, Good</i> Landscaping General Condition: <i>Poor, Fair, Good</i>	
Building Style	Exterior Wall Finishes		
<input type="checkbox"/> Modern <input type="checkbox"/> Elaborate <input type="checkbox"/> Colonial <input type="checkbox"/> Tudor <input type="checkbox"/> Art Deco <input type="checkbox"/> Architectural <input type="checkbox"/> Other	<input type="checkbox"/> Render <input type="checkbox"/> Brick work <input type="checkbox"/> Cladding <input type="checkbox"/> Tiled <input type="checkbox"/> Steele <input type="checkbox"/> Foam	<input type="checkbox"/> Hebel <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Block work General condition: <i>Poor, Fair, Good</i>	
Doors	Entrance	Windows	Window style
Entry Doors <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Timber <input type="checkbox"/> Timber and Glass <input type="checkbox"/> Metal <input type="checkbox"/> Glass Security Door <input type="checkbox"/> Yes <input type="checkbox"/> No Flyscreen Door <input type="checkbox"/> Yes <input type="checkbox"/> No Locks <input type="checkbox"/> Single entry <input type="checkbox"/> Deadbolt <input type="checkbox"/> Triple Lock Exterior Condition: <i>Poor, fair, good</i>	Entrance <input type="checkbox"/> Veranda <input type="checkbox"/> Porch <input type="checkbox"/> Hallway <input type="checkbox"/> Doorway General condition: <i>Poor, Fair, Good</i> Shutters <input type="checkbox"/> None <input type="checkbox"/> Electronic <input type="checkbox"/> Manual <input type="checkbox"/> Decorative General condition of <i>Poor, Fair, Good</i>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> More than <input type="checkbox"/> Flyscreen <input type="checkbox"/> Security screen <input type="checkbox"/> Locks	<input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Frameless <input type="checkbox"/> Sliding <input type="checkbox"/> Hinged <input type="checkbox"/> Winder <input type="checkbox"/> Sash Exterior Condition: <i>Poor, fair, good</i>

6.Exterior Left Elevation Continued

<p>Swimming Pool</p> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Private <input type="checkbox"/> Community <input type="checkbox"/> Above Ground <input type="checkbox"/> Inground <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Lined Plastic <input type="checkbox"/> Shipping Container	<p>Swimming Pool Pool Area</p> <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <input type="checkbox"/> Grassed	<p>Pool Fence</p> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Other	<p>Spa</p> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Connected to pool <input type="checkbox"/> Separate <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck
<p>Condition: <i>Poor, fair, good</i></p>		<p>Condition: <i>Poor, fair, good</i></p>	
<p>Landscaping, Driveway and Paths</p>			
<p>Paths</p> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn	<p>Driveway</p> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn	<p>Landscaping Planting</p> <input type="checkbox"/> Minimal <input type="checkbox"/> Medium <input type="checkbox"/> Elaborate	<p>Location</p> <input type="checkbox"/> Deck <input type="checkbox"/> Balcony <input type="checkbox"/> Roof top <input type="checkbox"/> Veranda <input type="checkbox"/> Gazebo <input type="checkbox"/> Yard
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
<p>Fencing</p> <input type="checkbox"/> On top of retaining wall <input type="checkbox"/> Stand alone <input type="checkbox"/> None <input type="checkbox"/> Brick <input type="checkbox"/> Timber <input type="checkbox"/> Colourbond <input type="checkbox"/> Other	<p>Retaining Wall</p> <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Other	<p>External Stairs</p> <input type="checkbox"/> Timber <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Brick <input type="checkbox"/> Other <input type="checkbox"/> Entrance Stairs <input type="checkbox"/> Garden Stairs	<p>Gate</p> <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Slider <input type="checkbox"/> Manual <input type="checkbox"/> Automatic
<p>Height: <input type="checkbox"/> 0-1m <input type="checkbox"/> Above 1m</p>		<p>Height: <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m</p>	
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
<p>General condition: <i>Poor, Fair, Good</i></p>		<p>General condition: <i>Poor, Fair, Good</i></p>	
		<p>Bin Location:</p> <input type="checkbox"/> Undercover <input type="checkbox"/> Outdoors <input type="checkbox"/> Private	<p>Bin Room General condition: <i>Poor, Fair, Good</i></p>

6.Exterior Back Elevation

Garage:		Exterior	
Number of Balconies <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> None <input type="checkbox"/> Under main roof <input type="checkbox"/> Separate <input type="checkbox"/> Workshop <input type="checkbox"/> Retail <input type="checkbox"/> Tool Shed <input type="checkbox"/> Chicken/animal enclosure General condition: Poor, Fair, Good	Eaves: General Condition: Poor, Fair, Good Window General Condition: Poor, Fair, Good Walls: General Condition: Poor, Fair, Good Paint General Condition: Poor, Fair, Good Roof General Condition: Poor, Fair, Good Landscaping General Condition: Poor, Fair, Good	
Building Style	Exterior Wall Finishes		
<input type="checkbox"/> Modern <input type="checkbox"/> Elaborate <input type="checkbox"/> Colonial <input type="checkbox"/> Tudor <input type="checkbox"/> Art Deco <input type="checkbox"/> Architectural <input type="checkbox"/> Other	<input type="checkbox"/> Render <input type="checkbox"/> Brick work <input type="checkbox"/> Cladding <input type="checkbox"/> Tiled <input type="checkbox"/> Steele <input type="checkbox"/> Foam	<input type="checkbox"/> Hebel <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Block work General condition: Poor, Fair, Good	
Doors	Entrance	Windows	Window style
Entry Doors <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Timber <input type="checkbox"/> Timber and Glass <input type="checkbox"/> Metal <input type="checkbox"/> Glass Security Door <input type="checkbox"/> Yes <input type="checkbox"/> No Flyscreen Door <input type="checkbox"/> Yes <input type="checkbox"/> No Locks <input type="checkbox"/> Single entry <input type="checkbox"/> Deadbolt <input type="checkbox"/> Triple Lock Exterior Condition: Poor, fair, good	Entrance <input type="checkbox"/> Veranda <input type="checkbox"/> Porch <input type="checkbox"/> Hallway <input type="checkbox"/> Doorway General condition: Poor, Fair, Good Shutters <input type="checkbox"/> None <input type="checkbox"/> Electronic <input type="checkbox"/> Manual <input type="checkbox"/> Decorative General condition of Poor, Fair, Good	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> More than <input type="checkbox"/> Flyscreen <input type="checkbox"/> Security screen <input type="checkbox"/> Locks	<input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Frameless <input type="checkbox"/> Sliding <input type="checkbox"/> Hinged <input type="checkbox"/> Winder <input type="checkbox"/> Sash Exterior Condition: Poor, fair, good

6.Exterior Back Elevation Continued

<p>Swimming Pool</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor <input type="checkbox"/> Private <input type="checkbox"/> Community <input type="checkbox"/> Above Ground <input type="checkbox"/> Inground <input type="checkbox"/> Concrete <input type="checkbox"/> Fiberglass <input type="checkbox"/> Lined Plastic <input type="checkbox"/> Shipping Container 	<p>Swimming Pool Pool Area</p> <ul style="list-style-type: none"> <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <input type="checkbox"/> Grassed <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>	<p>Pool Fence</p> <ul style="list-style-type: none"> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Glass <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Other <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>	<p>Spa</p> <ul style="list-style-type: none"> <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Connected to pool <input type="checkbox"/> Separate <input type="checkbox"/> Paver <input type="checkbox"/> Tiled <input type="checkbox"/> Deck <p style="text-align: center;">Condition: <i>Poor, fair, good</i></p>
Landscaping, Driveway and Paths			
<p>Paths</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Driveway</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Gravel <input type="checkbox"/> Concrete <input type="checkbox"/> Paved <input type="checkbox"/> Lawn <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Landscaping Planting</p> <ul style="list-style-type: none"> <input type="checkbox"/> Minimal <input type="checkbox"/> Medium <input type="checkbox"/> Elaborate <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Grass</p> <ul style="list-style-type: none"> <input type="checkbox"/> None <input type="checkbox"/> Real <input type="checkbox"/> Synthetic <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Location</p> <ul style="list-style-type: none"> <input type="checkbox"/> Deck <input type="checkbox"/> Balcony <input type="checkbox"/> Roof top <input type="checkbox"/> Veranda <input type="checkbox"/> Gazebo <input type="checkbox"/> Yard <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>
<p>Fencing</p> <ul style="list-style-type: none"> <input type="checkbox"/> On top of retaining wall <input type="checkbox"/> Stand alone <input type="checkbox"/> None <input type="checkbox"/> Brick <input type="checkbox"/> Timber <input type="checkbox"/> Colourbond <input type="checkbox"/> Other <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>Retaining Wall</p> <ul style="list-style-type: none"> <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Brick <input type="checkbox"/> Block <input type="checkbox"/> Other <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> Above 1m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p>	<p>External Stairs</p> <ul style="list-style-type: none"> <input type="checkbox"/> Timber <input type="checkbox"/> Metal <input type="checkbox"/> Concrete <input type="checkbox"/> Block <input type="checkbox"/> Brick <input type="checkbox"/> Other <input type="checkbox"/> Entrance Stairs <input type="checkbox"/> Garden Stairs <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Bin Location:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Undercover <input type="checkbox"/> Outdoors <input type="checkbox"/> Private 	<p>Gate</p> <ul style="list-style-type: none"> <input type="checkbox"/> Single <input type="checkbox"/> Double <input type="checkbox"/> Slider <input type="checkbox"/> Manual <input type="checkbox"/> Automatic <p>Height:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 0-1m <input type="checkbox"/> 1m <input type="checkbox"/> 1.6m <input type="checkbox"/> 1.8m <p style="text-align: center;">General condition: <i>Poor, Fair, Good</i></p> <p>Bin Room General condition: <i>Poor, Fair, Good</i></p>

7. Bedrooms

Bedroom One

Description:		Condition:	Comments
Paint	Condition:	<i>Poor, Fair, Good</i>	
	Appropriate Paint Product	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Walls	Condition:	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No	
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	Condition	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			<input type="checkbox"/> <i>Level Surface</i> <input type="checkbox"/> <i>Uneven Surface</i>
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	Condition	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice issues <input type="checkbox"/> Cracks in surface		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips	

Building Inspection Report - Double Story

<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Sagging <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos
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Skirting/ architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type			
<input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood			

Skirting/architraves Inspection Findings

<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint	<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
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Doors	Condition:	<i>Poor, fair, good</i>	
Door Type			
<input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			

Door Inspection Findings

<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product	<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
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Windows	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor 2 ceiling <input type="checkbox"/> Other		<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized	

Window Inspection Findings

<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen	<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA
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Building Inspection Report - Double Story

<input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible	<input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos		
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number	Single/Double	
	<input type="checkbox"/> 1	S D	<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2	S D	<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3	S D	<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4	S D	<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number		
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number		
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested <input type="checkbox"/> Ducted <input type="checkbox"/> Spilt
Ensuite	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Robes:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Other <input type="checkbox"/> Walk through <input type="checkbox"/> Walk in <input type="checkbox"/> Cupboard/ Built in		

7.

Bedroom Two

Description:		Condition:	Comments
Paint	Condition:	<i>Poor, Fair, Good</i>	
	Appropriate Paint Product	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Walls	Condition:	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework:	Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	Condition	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			<input type="checkbox"/> <i>Level Surface</i> <input type="checkbox"/> <i>Uneven Surface</i>
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	Condition	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice issues <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship	

Building Inspection Report - Double Story

<input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Sagging <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Skirting/ architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type			
<input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood			
Skirting/architraves Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint		<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Doors	Condition:	<i>Poor, fair, good</i>	
Door Type			
<input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Windows	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor 2 ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized		
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish	

Building Inspection Report - Double Story

<input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	Power Point Inspection Findings
	<input type="checkbox"/> 1	S D	<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2	S D	<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3	S D	<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4	S D	<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	
	Number		Light Fitting Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	
	Number		Light Switches Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested <input type="checkbox"/> Ducted <input type="checkbox"/> Spilt
Ensuite	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Robes:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Other <input type="checkbox"/> Walk through <input type="checkbox"/> Walk in <input type="checkbox"/> Cupboard/ Built in		

7.

Bedroom Three

Description:		Condition:	Comments
Paint	Condition:	<i>Poor, Fair, Good</i>	
	Appropriate Paint Product	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Walls	Condition:	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework:	Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	Condition	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			<input type="checkbox"/> <i>Level Surface</i> <input type="checkbox"/> <i>Uneven Surface</i>
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	Condition	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice issues <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship	

Building Inspection Report - Double Story

<input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Sagging <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos		
Skirting/ architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Skirting/architraves Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint	<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos		
Doors	Condition:	<i>Poor, fair, good</i>	
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product	<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos		
Windows	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor 2 ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized		
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product	<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish		

Building Inspection Report - Double Story

<input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	Power Point Inspection Findings
	<input type="checkbox"/> 1	S D	<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2	S D	<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3	S D	<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4	S D	<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	
	Number		Light Fitting Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	
	Number		Light Switches Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested <input type="checkbox"/> Ducted <input type="checkbox"/> Spilt
Ensuite	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Robes:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Other <input type="checkbox"/> Walk through <input type="checkbox"/> Walk in <input type="checkbox"/> Cupboard/ Built in		

7.

Bedroom Four

Description:		Condition:	Comments
Paint	Condition:	<i>Poor, Fair, Good</i>	
	Appropriate Paint Product	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Walls	Condition:	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No	
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	Condition	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite		<input type="checkbox"/> <i>Level Surface</i> <input type="checkbox"/> <i>Uneven Surface</i>	
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	Condition	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice issues <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship	

Building Inspection Report - Double Story

<input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Sagging <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Skirting/ architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type	<input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood		
Skirting/architraves Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint		<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Doors	Condition:	<i>Poor, fair, good</i>	
Door Type	<input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass		
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Windows	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor 2 ceiling <input type="checkbox"/> Other		
	<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized		
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish	

Building Inspection Report - Double Story

<input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	Power Point Inspection Findings
	<input type="checkbox"/> 1	S D	<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2	S D	<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3	S D	<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4	S D	<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	
	Number		Light Fitting Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	
	Number		Light Switches Inspection Findings
	<input type="checkbox"/> 1		<input type="checkbox"/> Damaged or cracked
	<input type="checkbox"/> 2		<input type="checkbox"/> Improper placement
	<input type="checkbox"/> 3		<input type="checkbox"/> Incorrectly fitted
	<input type="checkbox"/> 4		<input type="checkbox"/> Loose or dangerous
			<input type="checkbox"/> Missing
			<input type="checkbox"/> Not functional
			<input type="checkbox"/> Paint over spray present
			<input checked="" type="checkbox"/> See comments or photos
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested <input type="checkbox"/> Ducted <input type="checkbox"/> Spilt
Ensuite	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Robes:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Other <input type="checkbox"/> Walk through <input type="checkbox"/> Walk in <input type="checkbox"/> Cupboard/ Built in		

8. Wet Areas

Laundry		
Description:	Condition:	Comments
Laundry Inspection Findings		
<input type="checkbox"/> Basin/tub issue <input type="checkbox"/> Builder's debris <input type="checkbox"/> Cabinetry issue <input type="checkbox"/> Chipped tiles <input type="checkbox"/> Cracked/damaged mirrors <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Dents and damages <input type="checkbox"/> Fitted furniture issue Missing grout <input type="checkbox"/> Gaps <input type="checkbox"/> Gaps around pipe work		<input type="checkbox"/> Incomplete work <input type="checkbox"/> Missing silicone <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Shower hob/step down issue <input type="checkbox"/> Uneven wall surface <input type="checkbox"/> Uneven floor surface <input type="checkbox"/> Water leak <input type="checkbox"/> Waterproofing Issues <input type="checkbox"/> Poor workmanship <input checked="" type="checkbox"/> See comments or photos
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings		
<input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone or grout issues <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Uneven tile surface <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments and or photos
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite		
Floor Inspection Findings		
<input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Floor drainage <input type="checkbox"/> Floor level issues <input type="checkbox"/> Gaps in product		<input type="checkbox"/> Lifting <input type="checkbox"/> Marked or damaged <input type="checkbox"/> Missing components <input type="checkbox"/> Movement or bouncing Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Transition/surface threshold issue

Building Inspection Report - Double Story

<input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting	<input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	Condition	<i>Poor, Fair, Good</i>
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood		
Ceiling Inspection Findings		
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork Nail or screw holes visible <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product		
<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging <input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos		
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass		
Door Inspection Findings		
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		
<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos		
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		
<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized		
Window Inspection Findings		
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present		
<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched		

Building Inspection Report - Double Story

	<input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input checked="" type="checkbox"/> See comments or photos
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Laundry Cabinetry	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Laundry Tub/sink	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
W/machine Plumbing	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	Plumbing Inspection Findings
Floor Drains	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Open plumbing (wall/floor holes) <input type="checkbox"/> Bent plumbing <input type="checkbox"/> Builders' debris <input checked="" type="checkbox"/> See photos or comments
Ceiling Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

8.

Bathroom One

Description:	Condition:	Comments
Bathroom Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Basin/tub issue <input type="checkbox"/> Bathtub not fitted correctly <input type="checkbox"/> Builder's debris <input type="checkbox"/> Cabinetry issue <input type="checkbox"/> Chipped tiles <input type="checkbox"/> Cracked/damaged mirrors <input type="checkbox"/> Dents and damages <input type="checkbox"/> Fitted furniture issue <input type="checkbox"/> Floor drainage not adequate <input type="checkbox"/> Gaps <input type="checkbox"/> Gaps around pipe work <input type="checkbox"/> Incomplete work 		<ul style="list-style-type: none"> <input type="checkbox"/> Missing grout <input type="checkbox"/> Missing silicone <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Shower hob/step down issue <input type="checkbox"/> Shower screen not fitted correctly <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Toilet not fitted correctly <input type="checkbox"/> Uneven wall surface <input type="checkbox"/> Uneven floor surface <input type="checkbox"/> Water leak <input type="checkbox"/> Waterproofing Issues <input checked="" type="checkbox"/> See photos or comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall Type <ul style="list-style-type: none"> <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass 	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible 		<ul style="list-style-type: none"> <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone or grout issues <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Uneven tile surface <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments and or photos
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor type <ul style="list-style-type: none"> <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite 		
Floor Drain	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product 		<ul style="list-style-type: none"> <input type="checkbox"/> Lifting <input type="checkbox"/> Marked or damaged <input type="checkbox"/> Missing components

Building Inspection Report - Double Story

<input type="checkbox"/> Floor drainage <input type="checkbox"/> Floor level issues <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting	<input type="checkbox"/> Movement or bouncing Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos		
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork Nail or screw holes visible <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging <input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos	
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>	
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present	

Building Inspection Report - Double Story

<input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
			Plumbing Inspection Findings
			<input type="checkbox"/> Open plumbing (wall/floor holes) <input type="checkbox"/> Bent plumbing <input type="checkbox"/> Builders' debris <input checked="" type="checkbox"/> See photos or comments
Basin	Condition	<i>Poor, Fair, Good</i>	
	<input type="checkbox"/> Single <input type="checkbox"/> Double		
Basin Cabinet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Basin Tapware	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Tiles	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Building Inspection Report - Double Story

	<i>Height</i>	<input type="checkbox"/> Skirting <input type="checkbox"/> Mid high <input type="checkbox"/> Ceiling high	
	<i>Grout</i>	<i>Poor, Fair, Good</i>	
Bath	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
	<input type="checkbox"/> Spa <input type="checkbox"/> Bath		
	<input type="checkbox"/> <i>Silicone Functional</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<input type="checkbox"/> <i>Grout</i>	<i>Poor, Fair, Good</i>	
	<input type="checkbox"/> <i>Tiles</i>	<i>Poor, Fair, Good</i>	
Bath Shower-head	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Bath Taps	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Cabinet/Mirror	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Linen Cupboard	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet Roll Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Towel Rail	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Shower	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
	<input type="checkbox"/> Shower within bath <input type="checkbox"/> Freestanding <input type="checkbox"/> Double <input type="checkbox"/> Access Shower		
	<i>Silicone Functional</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	<i>Grout</i>	<i>Poor, Fair, Good</i>	
	<i>Tiles</i>	<i>Poor, Fair, Good</i>	
	<i>Tile Height</i>	<input type="checkbox"/> Screen height <input type="checkbox"/> Ceiling height	
	<i>Shower Screen</i>	<i>Poor, Fair, Good</i>	
	<i>Shower Rose</i>	<i>Poor, Fair, Good</i>	
	<i>Shower Taps</i>	<i>Poor, Fair, Good</i>	
	<i>Shower Recess</i>	<i>Poor, Fair, Good</i>	
	<i>Shower Drain</i>	<i>Poor, Fair, Good</i>	
Sauna	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Heating	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Poor, Fair, Good</i>	

Building Inspection Report - *Double Story*

Ventilation	Condition	<i>Poor, Fair, Good</i>	
Exhaust Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Sample

8.

Bathroom Two

Description:	Condition:	Comments
Bathroom Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Basin/tub issue <input type="checkbox"/> Bathtub not fitted correctly <input type="checkbox"/> Builder's debris <input type="checkbox"/> Cabinetry issue <input type="checkbox"/> Chipped tiles <input type="checkbox"/> Cracked/damaged mirrors <input type="checkbox"/> Dents and damages <input type="checkbox"/> Fitted furniture issue <input type="checkbox"/> Floor drainage not adequate <input type="checkbox"/> Gaps <input type="checkbox"/> Gaps around pipe work <input type="checkbox"/> Incomplete work 		<ul style="list-style-type: none"> <input type="checkbox"/> Missing grout <input type="checkbox"/> Missing silicone <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Shower hob/step down issue <input type="checkbox"/> Shower screen not fitted correctly <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Toilet not fitted correctly <input type="checkbox"/> Uneven wall surface <input type="checkbox"/> Uneven floor surface <input type="checkbox"/> Water leak <input type="checkbox"/> Waterproofing Issues <input checked="" type="checkbox"/> See photos or comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall Type <ul style="list-style-type: none"> <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass 	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible 		<ul style="list-style-type: none"> <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone or grout issues <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Uneven tile surface <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments and or photos
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor type <ul style="list-style-type: none"> <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite 		
Floor Drain	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor Inspection Findings		
<ul style="list-style-type: none"> <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product 		<ul style="list-style-type: none"> <input type="checkbox"/> Lifting <input type="checkbox"/> Marked or damaged <input type="checkbox"/> Missing components

Building Inspection Report - Double Story

<input type="checkbox"/> Floor drainage <input type="checkbox"/> Floor level issues <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting	<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos		
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork Nail or screw holes visible <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging <input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos	
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>	
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present	

Building Inspection Report - Double Story

<input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
			Plumbing Inspection Findings
			<input type="checkbox"/> Open plumbing (wall/floor holes) <input type="checkbox"/> Bent plumbing <input type="checkbox"/> Builders' debris <input checked="" type="checkbox"/> See photos or comments
Basin	Condition	<i>Poor, Fair, Good</i>	
	<input type="checkbox"/> Single <input type="checkbox"/> Double		
Basin Cabinet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Basin Tapware	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Tiles	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Building Inspection Report - Double Story

	<i>Height</i>	<input type="checkbox"/> Skirting <input type="checkbox"/> Mid high <input type="checkbox"/> Ceiling high	
<i>Grout</i>		<i>Poor, Fair, Good</i>	
Bath	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
<input type="checkbox"/> Spa <input type="checkbox"/> Bath			
<input type="checkbox"/> <i>Silicone Functional</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> <i>Grout</i>		<i>Poor, Fair, Good</i>	
<input type="checkbox"/> <i>Tiles</i>		<i>Poor, Fair, Good</i>	
Bath Shower-head	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Bath Taps	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Cabinet/Mirror	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Linen Cupboard	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet Roll Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Towel Rail	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Shower	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
<input type="checkbox"/> Shower within bath <input type="checkbox"/> Freestanding <input type="checkbox"/> Double <input type="checkbox"/> Access Shower			
<i>Silicone Functional</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Grout</i>		<i>Poor, Fair, Good</i>	
<i>Tiles</i>		<i>Poor, Fair, Good</i>	
<i>Tile Height</i>		<input type="checkbox"/> Screen height <input type="checkbox"/> Ceiling height	
<i>Shower Screen</i>		<i>Poor, Fair, Good</i>	
<i>Shower Rose</i>		<i>Poor, Fair, Good</i>	
<i>Shower Taps</i>		<i>Poor, Fair, Good</i>	
<i>Shower Recess</i>		<i>Poor, Fair, Good</i>	
<i>Shower Drain</i>		<i>Poor, Fair, Good</i>	
Sauna	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Heating	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Poor, Fair, Good</i>	

Building Inspection Report - Double Story

Ventilation	Condition	<i>Poor, Fair, Good</i>	
Exhaust Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Sample

8.

Bathroom Three			
Description:	Condition:	Comments	
Bathroom Inspection Findings			
<input type="checkbox"/> Basin/tub issue <input type="checkbox"/> Bathtub not fitted correctly <input type="checkbox"/> Builder's debris <input type="checkbox"/> Cabinetry issue <input type="checkbox"/> Chipped tiles <input type="checkbox"/> Cracked/damaged mirrors <input type="checkbox"/> Dents and damages <input type="checkbox"/> Fitted furniture issue <input type="checkbox"/> Floor drainage not adequate <input type="checkbox"/> Gaps <input type="checkbox"/> Gaps around pipe work <input type="checkbox"/> Incomplete work		<input type="checkbox"/> Missing grout <input type="checkbox"/> Missing silicone <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Shower hob/step down issue <input type="checkbox"/> Shower screen not fitted correctly <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Toilet not fitted correctly <input type="checkbox"/> Uneven wall surface <input type="checkbox"/> Uneven floor surface <input type="checkbox"/> Water leak <input type="checkbox"/> Waterproofing Issues <input checked="" type="checkbox"/> See photos or comments	
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No	
Wall Inspection Findings			
<input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone or grout issues <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Uneven tile surface <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments and or photos	
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			
Floor Drain	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor Inspection Findings			
<input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product		<input type="checkbox"/> Lifting <input type="checkbox"/> Marked or damaged <input type="checkbox"/> Missing components	

Building Inspection Report - Double Story

<input type="checkbox"/> Floor drainage <input type="checkbox"/> Floor level issues <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting	<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos		
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork Nail or screw holes visible <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging <input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos	
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>	
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present	

Building Inspection Report - Double Story

<input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See photos or comments
			Plumbing Inspection Findings
			<input type="checkbox"/> Open plumbing (wall/floor holes) <input type="checkbox"/> Bent plumbing <input type="checkbox"/> Builders' debris <input checked="" type="checkbox"/> See photos or comments
Basin	Condition	<i>Poor, Fair, Good</i>	
	<input type="checkbox"/> Single <input type="checkbox"/> Double		
Basin Cabinet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Basin Tapware	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Tiles	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Building Inspection Report - Double Story

	<i>Height</i>	<input type="checkbox"/> Skirting <input type="checkbox"/> Mid high <input type="checkbox"/> Ceiling high	
<i>Grout</i>		<i>Poor, Fair, Good</i>	
Bath	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
<input type="checkbox"/> Spa <input type="checkbox"/> Bath			
<input type="checkbox"/> <i>Silicone Functional</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> <i>Grout</i>		<i>Poor, Fair, Good</i>	
<input type="checkbox"/> <i>Tiles</i>		<i>Poor, Fair, Good</i>	
Bath Shower-head	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Bath Taps	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Wall Cabinet/Mirror	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Linen Cupboard	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Toilet Roll Holder	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Towel Rail	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Shower	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
<i>Type</i>			
<input type="checkbox"/> Shower within bath <input type="checkbox"/> Freestanding <input type="checkbox"/> Double <input type="checkbox"/> Access Shower			
<i>Silicone Functional</i>		<input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Grout</i>		<i>Poor, Fair, Good</i>	
<i>Tiles</i>		<i>Poor, Fair, Good</i>	
<i>Tile Height</i>		<input type="checkbox"/> Screen height <input type="checkbox"/> Ceiling height	
<i>Shower Screen</i>		<i>Poor, Fair, Good</i>	
<i>Shower Rose</i>		<i>Poor, Fair, Good</i>	
<i>Shower Taps</i>		<i>Poor, Fair, Good</i>	
<i>Shower Recess</i>		<i>Poor, Fair, Good</i>	
<i>Shower Drain</i>		<i>Poor, Fair, Good</i>	
Sauna	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Heating	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<i>Poor, Fair, Good</i>	

Building Inspection Report - Double Story

Ventilation	Condition	<i>Poor, Fair, Good</i>	
Exhaust Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

Sample

9. Dinning, Loungeroom. Family Room

Dining Room

Description:		Condition:	Comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No	
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging	

Building Inspection Report - Double Story

<input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos	
Skirting Boards/ Architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type <input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood			
Skirting Boards/Architraves Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint		<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>	
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product		<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship	

Building Inspection Report - Double Story

<input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1	S D	
	<input type="checkbox"/> 2	S D	
	<input type="checkbox"/> 3	S D	
	<input type="checkbox"/> 4	S D	
Light Fittings	Condition	<i>Poor, fair, good</i>	
	Number		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1		
	<input type="checkbox"/> 2		
	<input type="checkbox"/> 3		
	<input type="checkbox"/> 4		
Light Switches	Condition	<i>Poor, fair, good</i>	
	Number		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1		
	<input type="checkbox"/> 2		
	<input type="checkbox"/> 3		
	<input type="checkbox"/> 4		
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
			<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested
Ceiling Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

9. Dinning, Loungeroom. Family Room

Loungeroom

Description:		Condition:	Comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass		Framework: Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging	

Building Inspection Report - Double Story

<input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos
Skirting Boards/ Architraves <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>
Type <input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood	
Skirting Boards/Architraves Inspection Findings	
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint	<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
Doors <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass	
Door Inspection Findings	
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product	<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
Window <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other	<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>
Window Inspection Findings	
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present	<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship

Building Inspection Report - Double Story

	<input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Point Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested
Ceiling Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	

9. Dinning, Loungeroom. Family Room

Family Room

Description:		Condition:	Comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall Type		Framework:	
<input type="checkbox"/> Gyprock		Vertical plum of walls	Yes /No
<input type="checkbox"/> Brick		Horizontal plum of walls	Yes /No
<input type="checkbox"/> Plaster		Square corners	Yes /No
<input type="checkbox"/> Stone		Bow in wall	Yes /No
<input type="checkbox"/> Glass			
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor type			
<input type="checkbox"/> Tiled			
<input type="checkbox"/> Concrete			
<input type="checkbox"/> Carpet			
<input type="checkbox"/> Vinyl			
<input type="checkbox"/> Timber			
<input type="checkbox"/> Composite			
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Gyprock			
<input type="checkbox"/> Plaster			
<input type="checkbox"/> Timber			
<input type="checkbox"/> Concrete			
<input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging	

Building Inspection Report - Double Story

<input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible	<input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos
Skirting Boards/ Architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Poor, Fair, Good</i>
Type <input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood	
Skirting Boards/Architraves Inspection Findings	
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint	<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Poor, fair, good</i>
Door Type <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass	
Door Inspection Findings	
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product	<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>Poor, Fair, Good</i>
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other	<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>
Window Inspection Findings	
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present	<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship

Building Inspection Report - Double Story

<input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1	S D	
	<input type="checkbox"/> 2	S D	
	<input type="checkbox"/> 3	S D	
	<input type="checkbox"/> 4	S D	
Light Fittings	Condition	<i>Poor, fair, good</i>	
	Number		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1		
	<input type="checkbox"/> 2		
	<input type="checkbox"/> 3		
	<input type="checkbox"/> 4		
Light Switches	Condition	<i>Poor, fair, good</i>	
	Number		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
	<input type="checkbox"/> 1		
	<input type="checkbox"/> 2		
	<input type="checkbox"/> 3		
	<input type="checkbox"/> 4		
A/C	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Ceiling Fan	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
			<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested

10.

Stairs			
Description:		Condition:	Comments
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass		Framework Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings			
<input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Marks and smudges <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite			
Floor Inspection Findings			
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting <input type="checkbox"/> Lifting <input type="checkbox"/> Missing components		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments or photos	
Ceiling	<i>Condition</i>	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork		<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging	

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<input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible		<input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos	
Skirting Boards/ Architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type <input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood			
Skirting Boards/Architraves Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gaps & cracks <input type="checkbox"/> Lifting <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint		<input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos	
Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type: <input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other		<input type="checkbox"/> <i>Painted</i> <input type="checkbox"/> <i>Unpainted</i> <input type="checkbox"/> <i>Stained/varnished</i> <input type="checkbox"/> <i>Anodized</i> <input type="checkbox"/> <i>Coloured aluminum</i>	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	
	Number	Single/Double	Power Point Inspection Findings
	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	S D S D S D S D	<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos

Building Inspection Report - Double Story

Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments or photos

Sample

11.

Kitchen

Description:	Condition:	Comments
Kitchen Inspection Findings		
<input type="checkbox"/> Basin/tub issue <input type="checkbox"/> Builder's debris <input type="checkbox"/> Cabinetry issue <input type="checkbox"/> Chipped tiles <input type="checkbox"/> Dents and damages <input type="checkbox"/> Fitted furniture issue <input type="checkbox"/> Floor drainage not adequate <input type="checkbox"/> Gaps <input type="checkbox"/> Gaps around pipe work <input type="checkbox"/> Incomplete work		<input type="checkbox"/> Missing grout <input type="checkbox"/> Missing silicone <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Uneven wall surface <input type="checkbox"/> Uneven floor surface <input type="checkbox"/> Water leak <input type="checkbox"/> Waterproofing Issues <input checked="" type="checkbox"/> See comments or photos
Paint	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall	<i>Condition</i>	<i>Poor, Fair, Good</i>
Wall Type <input type="checkbox"/> Gyprock <input type="checkbox"/> Brick <input type="checkbox"/> Plaster <input type="checkbox"/> Stone <input type="checkbox"/> Glass	Framework Vertical plum of walls Horizontal plum of walls Square corners Bow in wall	Yes /No Yes /No Yes /No Yes /No
Wall Inspection Findings		
<input type="checkbox"/> Cracks in surface <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Paint overspray/over painting to surrounding surfaces		<input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Nail or screw holes visible <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Uneven tile surface <input type="checkbox"/> Unfinished surfaces <input type="checkbox"/> Water damage <input checked="" type="checkbox"/> See comments and or photos
Flooring	<i>Condition</i>	<i>Poor, Fair, Good</i>
Floor type <input type="checkbox"/> Tiled <input type="checkbox"/> Concrete <input type="checkbox"/> Carpet <input type="checkbox"/> Vinyl <input type="checkbox"/> Timber <input type="checkbox"/> Composite		
Floor Inspection Findings		
<input type="checkbox"/> Broken or damaged <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty product <input type="checkbox"/> Gaps in product <input type="checkbox"/> Grout issues <input type="checkbox"/> Incorrect fitting		<input type="checkbox"/> Movement or bouncing <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone issue <input type="checkbox"/> Stained, scratched or marked <input type="checkbox"/> Transition/surface threshold issue <input type="checkbox"/> Water damage

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<input type="checkbox"/> Lifting <input type="checkbox"/> Missing components	<input checked="" type="checkbox"/> See comments or photos		
Ceiling	Condition	<i>Poor, Fair, Good</i>	
Type:			
<input type="checkbox"/> Gyprock <input type="checkbox"/> Plaster <input type="checkbox"/> Timber <input type="checkbox"/> Concrete <input type="checkbox"/> Hardy Wood			
Ceiling Inspection Findings			
<input type="checkbox"/> Cornice Issue <input type="checkbox"/> Cutting in of paintwork, poor quality <input type="checkbox"/> Cracks in surface <input type="checkbox"/> Damage/ dints or dents <input type="checkbox"/> Dirt/grit or hair present in paintwork <input type="checkbox"/> Gyprock Flushing joints visible <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing product <input type="checkbox"/> Nail or screw holes visible			
<input type="checkbox"/> Paint overspray/over painting to surrounding surfaces <input type="checkbox"/> Paint runs/drips <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Translucent paint/inadequate coverage <input type="checkbox"/> Sagging <input type="checkbox"/> Unfinished surface <input type="checkbox"/> Water damaged <input checked="" type="checkbox"/> See comments or photos			
Skirting Boards/ Architraves	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type			
<input type="checkbox"/> Other <input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood			
Skirting Boards/Architraves Inspection Findings			
<input type="checkbox"/> Cracks <input type="checkbox"/> Chipped or broken tiles <input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Drumming tiles <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps <input type="checkbox"/> Lifting <input type="checkbox"/> Missing paint			
<input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product <input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone, grout Issues <input type="checkbox"/> Translucent paint work or finishes <input type="checkbox"/> Uneven tile surface <input checked="" type="checkbox"/> See comments and or photos			
Doors	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, fair, good</i>	
Door Type			
<input type="checkbox"/> Timber <input type="checkbox"/> MDF <input type="checkbox"/> Hardwood <input type="checkbox"/> Glass			
Door Inspection Findings			
<input type="checkbox"/> Dints, dents, or foreign objects present to surface <input type="checkbox"/> Faulty door furniture <input type="checkbox"/> Gaps and cracks <input type="checkbox"/> Marks and smudges <input type="checkbox"/> Missing paint <input type="checkbox"/> Missing Product			
<input type="checkbox"/> Nail holes or screw fittings visible <input type="checkbox"/> Over painting to surfaces <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Silicone Issues <input type="checkbox"/> Translucent paint work or finishes <input checked="" type="checkbox"/> See comments or photos			

Building Inspection Report - Double Story

Window	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Type:	<input type="checkbox"/> Sliding <input type="checkbox"/> Sash <input type="checkbox"/> Metal <input type="checkbox"/> Timber <input type="checkbox"/> Skylight <input type="checkbox"/> Bay <input type="checkbox"/> Floor to ceiling <input type="checkbox"/> Other	<input type="checkbox"/> Coloured aluminum <input type="checkbox"/> Painted <input type="checkbox"/> Unpainted <input type="checkbox"/> Stained/varnished <input type="checkbox"/> Anodized	
Window Inspection Findings			
<input type="checkbox"/> Chipped, flaking paint or finish <input type="checkbox"/> Damaged flyscreen <input type="checkbox"/> Damaged or factory fault glass <input type="checkbox"/> Dented <input type="checkbox"/> Faulty product <input type="checkbox"/> Flyscreen not present <input type="checkbox"/> Gaps or ill fitted window <input type="checkbox"/> Missing locks or winders <input type="checkbox"/> Nail holes/fixings visible		<input type="checkbox"/> No compliant sticker or manufactures stamp as per BCA <input type="checkbox"/> Not functioning <input type="checkbox"/> Overpainting present <input type="checkbox"/> Poor coverage of paint or varnish <input type="checkbox"/> Poor workmanship <input type="checkbox"/> Scratched <input checked="" type="checkbox"/> See comments or photos	
Electrical Fittings	Condition	<i>Poor, fair, good</i>	
Power Points	Condition	<i>Poor, fair, good</i>	Power Points Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Single/Double S D S D S D S D	<input type="checkbox"/> D Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments and or photos
Light Fittings	Condition	<i>Poor, fair, good</i>	Light Fitting Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments and or photos
Light Switches	Condition	<i>Poor, fair, good</i>	Light Switches Inspection Findings
	Number <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4		<input type="checkbox"/> Damaged or cracked <input type="checkbox"/> Improper placement <input type="checkbox"/> Incorrectly fitted <input type="checkbox"/> Loose or dangerous <input type="checkbox"/> Missing <input type="checkbox"/> Not functional <input type="checkbox"/> Paint over spray present <input checked="" type="checkbox"/> See comments and or photos

Building Inspection Report - Double Story

			Plumbing Inspection Findings
			<input type="checkbox"/> Open plumbing (wall/floor holes) <input type="checkbox"/> Bent plumbing <input type="checkbox"/> Builders' debris <input checked="" type="checkbox"/> See photos or comments
Tiles	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
	<i>Grout</i>	<i>Poor, Fair, Good</i>	
	<i>Silicone Functional?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cupboards	<i>Bench Cupboard Doors</i>	<i>Poor, Fair, Good</i>	
	<i>Benchtop Surface</i>	<i>Poor, Fair, Good</i>	
	<i>Benchtop Cupboard Internal Shelves</i>		<input type="checkbox"/>
	<i>Overhead Cupboard Doors</i>	<i>Poor, Fair, Good</i>	
	<i>Overhead Cupboard Internal Shelves</i>	<i>Poor, Fair, Good</i>	
	<i>Kickboard</i>	<i>Poor, Fair, Good</i>	
	<i>Side panel</i>	<i>Poor, Fair, Good</i>	
	<i>Front panel</i>	<i>Poor, Fair, Good</i>	
	<i>Draws</i>	<i>Poor, Fair, Good</i>	
	<i>Draw faces</i>	<i>Poor, Fair, Good</i>	
	<i>Draw inserts</i>	<i>Poor, Fair, Good</i>	
	<i>Microwave shelf</i>	<i>Poor, Fair, Good</i>	
	<i>Fridge recess</i>	<i>Poor, Fair, Good</i>	
Pantry	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
	<i>Type</i>	<input type="checkbox"/> Walkin <input type="checkbox"/> Cupboard	
	<i>Pantry door</i>	<i>Poor, Fair, Good</i>	
	<i>Pantry shelves</i>	<i>Poor, Fair, Good</i>	
Bulkhead	<input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Poor, Fair, Good</i>	
Sink	<input type="checkbox"/> Single <input type="checkbox"/> Double	<i>Poor, Fair, Good</i>	
Dishwasher	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> New <input type="checkbox"/> Existing	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested
Rangehood	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> New <input type="checkbox"/> Existing	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input type="checkbox"/> Vented outside of the home <input type="checkbox"/> Vented to the ceiling only <input type="checkbox"/> Not vented (room circulation only) <input type="checkbox"/> Fan working yes no <input type="checkbox"/> Lights working..... yes no
Oven	<input type="checkbox"/> Gas <input type="checkbox"/> Electric <input type="checkbox"/> New	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested <input checked="" type="checkbox"/> Untested

	<input type="checkbox"/> Existing		
Hotplate	<input type="checkbox"/> Gas	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested
	<input type="checkbox"/> Electric		<input type="checkbox"/> Untested
A/C	<input type="checkbox"/> Yes	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested
	<input type="checkbox"/> No		<input checked="" type="checkbox"/> Untested
Ceiling Fan	<input type="checkbox"/> Yes	<i>Poor, Fair, Good</i>	<input type="checkbox"/> Tested
	<input type="checkbox"/> No		<input checked="" type="checkbox"/> Untested

12. Major Report Findings:

This Building Inspection summary provides you with a “snapshot “of items the inspector considers of greatest significance for you, in respect of the building only, when considering this property. Please refer to the Definitions and the complete Report for detailed information regarding visible defects. Note that this Summary is not the complete Report and that in the event of an apparent discrepancy the complete Report overrides the Summary information.

Report Summary

Summary:

Major Defects Noted: Yes/ No

A defect of significant magnitude where rectification should be carried out without undue delay to avoid unsafe. Conditions, posing a threat to life or serious injury; loss of utility, whereby the defect is such that the whole of the relevant part of the building can no longer serve its intended function; or further substantial deterioration of the building.

Major Defects

Serious Structural Defects noted: Yes/No

A major defect in any internal or external primary load bearing component of the building seriously affects the structural integrity of the building requiring rectification to be carried out without undue delay to avoid: unsafe conditions, posing a threat to life or serious injury; loss of utility, whereby the defect is such that the whole of the relevant part of the building can no longer serve its intended function; or further substantial deterioration of the building. In case of the cracking, a serious structural defect denotes severe cracking as defined by category 4, Appendix C- Australian Standards AS 2870 2011. Appendix C is attached for your reference.

Serious Structural Defects

Serious Structural Defects noted:

13. Conclusion

14. What is not included in the Report:

A building inspection Report does not detail with every aspect of the property. Its role is to identify any major problems visible at the time of the inspection. The extent of the problems will be influenced by the age and type of property.

While providing valuable expert advice the Report will generally not include:

- Parts of the property that were not or could not be inspected.
- Matters outside the expertise.
- An estimate of repair costs
- Minor defects
- Termite detection.

The building inspector would not normally check such things as:

- Footings
- Concealed damp proofing
- Electrical wiring and smoke detectors
- Plumbing drainage and gas fitting
- Air conditioning
- Swimming pools and pool equipment
- Fireplace and chimneys
- Alarm and intercom systems
- Carpet and lino
- Appliances such as dishwasher, incinerators, ovens, ducted vacuum systems, hotplates and range hoods.
- Television reception or internet reception or speed.
- Paint coatings
- Hazards
- Every opening window

a. Factors Affecting the Report:

Certain conditions will affect the final report including:

- Problems difficult to detect due to weather or other conditions; such as damp and leaks

- The information you provide to the consultant
- The specific areas of the consultant's expertise "as specified in the report.
- Problems that may have been deliberately covered up to make an area appear problem free.

b. Using the Report for other Purposes:

A Building Inspection Report should not be used as a Certificate of Compliance for any law, warranty, or insurance policy against future problems. It is also not intended as the cost of fixing problems for when "a special purpose "property report is required instead.

c. Ordering a Report

Most consultants need a minimum of the 2-3 days' notice to organise a building inspection. You should get the vendor's permission to have property inspected as early in the sale negotiations as possible. This will help up decide if the property is worth buying. There may be little point in spending money on conveyancing until you know the condition of the property.

d. Inspections done during the cooling-off period.

When you buy property in NSW, there is five business day cooling-off period after you have exchanged contracts. During this period, you may get out of the sale as long as you give written notice. The cooling-off period starts as soon as you exchange and ends at 5pm on the fifth business day.

A cooling-off period does not apply if you buy a property at auction or exchange contracts on the same day as the auction after. it is passed in. Always check with your solicitor or a licensed conveyancer that you have a cooling-off period, and have the process explained to you.

To get a building inspection one during the cooling-off period, give the consultant as much notice as possible. They will have to do an inspection, prepare the report and still give you time to decide and potentially withdraw from the contracts. If you withdraw, you forfeit 0.25 percent of the purchase price.

15. Definitions'

Definitions of terms used to describe the current state of repair for each item inspected

Condition Visually Fine:	When the Inspector has viewed the subject area and sees no major structural defect, no minor defect and there is no repair recommended.
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Building Inspection Report - *Double Story*

General Advice on Item:	The inspector may choose to comment on the subject area, where it doesn't fall into the below categories.
Repair Recommended	A suggestion that the repair of the defect be carried out by a licensed person, trades person or a person of ability, halting further deterioration of the property.
Major structural Defect:	A defect of significant magnitude that a repair must be carried out in order to avoid, unsafe conditions, loss of utility or further deterioration of the property.
Unable to Inspect Due to access:	An area of the site where there is insufficient, unsafe, or unreasonable access.
Not Applicable (N/A):	When the subjected field does not make up any part of the inspected property.
Report Definition	
Shower Recesses':	Tests may be made on the shower recesses to detect leaks (if water is connected). The tests may not reveal leaks or show incorrect water proofing if silicone liquid or masonry sealant has been applied prior to the inspection. Such application is temporary waterproofing measure and may last some months before breaking down. The tests of the shower recesses are limited to running water in the recesses and visually checking for leaks. As showers are often checked for a short period of time, prolonged use may reveal leaks that were not detected at the time of inspection. No evidence of a current leak during inspection does not necessarily mean that the shower does not leak.
Glass Caution:	Glazing in some buildings (built before 1078) may not necessarily comply with current glass safety standards AS1288. In the interests of safety, glass panes in doors and windows, especially in high traffic areas should be replaced with safety glass or have shatterproof film installed.
Stair & Balustrades:	The Australian Building Code 3.9 require that covering stairs, landings and balustrades ensure the safety of all occupants and visitors to a building. Those applied prior to 1996 may not comply with the current standard. You must upgrade all such items.
Swimming Pool	A pool is subject to a special purpose property report and is not applicable in this report.
Rooms Below Ground Level:	Rooms under the house or below ground level (whether they are habitable or not) may be subject to water dampness and water penetration. Drains are not always installed correctly in these areas or could be blocked. It is common to have damp problems and water entry into these spaces, especially during periods of heavy rainfall. And may not be evident on the day of the inspection. These rooms may also not have council approval. The purchaser should make their own enquiries to Council to ascertain if approval was granted.
Owners Corporation:	If the owner is covered by an Owners Corporation (Stat Title) Sydnexpo.com recognizes that an Owners Corporation search be conducted to ascertain their financial position, the level of maintenance afforded and any other relevant information that may impact your future ownership of the property.

16. Terms and Conditions

Sydnexpo Terms & Conditions

1. BIPS has prepared this report in accordance with the guidelines of the Australian Standard 4339.1 – 2007, which covers the minimum requirements of the visual inspection of residential buildings and based on the inspection of the property (Inspected Property) in the administrative cover letter by the inspector named in the administrative building inspection report.
2. The report is prepared for the sole and exclusive use of the person, persons, or body (client) named in the administrative cover letter and cannot be used or acted upon by any other party without the express permission of the BIPS.
3. The client, having been provided with the opportunity to read these Terms and Conditions following making the booking for the property inspection, accepts these Terms and Conditions. The Client acknowledges that these Terms and Conditions are also available via the website: sydnexpo.com and can change without notice. These Terms and Conditions take precedence over any oral or written representations made by BIPS Building Inspections or the Inspector, to the extent of any inconsistency.
4. The Report is based on the conditions of the Inspected Property at the date and time of inspection. While the Report is prepared with due care and diligence, the Report is based upon the prevailing conditions and the safe and reasonable access of the Inspector to the Inspected Property as outlined in the Standard.
5. The report must be read carefully and, in its entirety, to gain a complete understanding of the findings of the Inspector of the Inspected Property. It will help you understand the limitations of the Inspector and why it is not possible to guarantee that a property is free of defects.
6. The report is not a certificate of compliance for the Inspected Property within the requirements of any Act, regulation or ordinance or local law or by-law. The report does not cover the enquiries of councils or other authorities.
7. The report is a subjective assessment of the Inspected Property and therefore outlines the opinion of the Inspector on the general condition of the Inspected Property.
8. The report does not include identification of unauthorized building work or of work not compliant with building regulations. An estimate of costs of rectification is not required in accordance with the standard.
9. The inspection is undertaken, and the Report prepared by the Inspector on the assumption that the existing use of the Inspected Property will continue. As such, the Inspector will not assess the fitness of the Inspected Property for any other purpose. We advise you to verify any proposed change in the use of the Inspected Property with the relevant authorities.
10. This Report is based on a visual assessment of the Inspected Property together with the relevant features of the Inspected Property within the 30m of the building and within boundaries of the site, the prevailing structural, soil and weather conditions at the date and time of the inspection and the Inspector having safe and reasonable access to all areas. Where the Property is a unit or apartment, associated areas may include common areas pertinent and immediately adjacent to the inspected Property, or as specifically instructed by the Client Areas not inspected are noted in the Report.

The Standard provides that “safe and reasonable access “shall be determined by the inspector at the time of the inspection, based on the conditions encountered at the time of Inspection. An inspector shall only inspect areas where safe, unobstructed access is provided and where

minimum clearances are available or, where these clearances are not available, areas within the inspector's unobstructed line of sight and close enough to enable reasonable appraisal. Minimum clearances are defined as at least 600mm vertical and horizontal clearance for roof space and sub floor area access. The interior and exterior roof must be accessible from 3.6-metre-high ladder for reasonable access to be available. Reasonable access does not include removing screws and bolts to access covers. Nor does reasonable access include cutting or making access traps or moving furniture or stored goods.

11. This Report is not a rigorous assessment if all building elements and does not cover all maintenance items. The Report also does not cover defects in inaccessible areas, defects that are not reasonably visible, defects that may only be apparent in certain weather conditions or defects that have not yet arisen due to prolonged periods of wet or dry weather or their subsequent events.
12. As the Report only covers the visual aspects of the Inspected Property, it does not cover any part of the building located beneath the ground surface.
13. The Inspector can only make a comment with regard to the general, visible condition of the electrical wiring and plumbing. We suggest that a licensed tradesperson be contacted for a separate report.
14. The Inspected Property shall be compared with a building that was constructed in accordance to generally accepted practice at the time of construction and which has been maintained such that there has been no significant loss of strength and serviceability.
15. The report does not identify the presence of pests, or any damage caused by pests (e.g., termites, borers, etc.) We suggest that a professional pest inspector should be contacted for a separate report.
16. No assessment or identification is made of asbestos or asbestos related products, toxic mold, or other harmful substances. Asbestos dust is a hazardous material and should not be disturbed. It is vital that asbestos is not sawn, sanded, drilled or water blasted., etc. For more information about the handling and disposing of asbestos contact your local council.
17. Our inspection does not assess the operation of appliances, alarms, security and communication systems, smoke detectors, heating and cooling systems, blinds (internal and external), soft furnishing, telephones, spa and pool equipment, building automation, electrically operated doors, plant and equipment. Any item not specifically noted in this Report is excluded from the inspection, of the Inspected Property. We suggest that a licensed tradesperson be contacted for a separate report in respect to gas or electrical appliances and fittings.
18. No item of furniture or fixtures will be removed, moved, or modified during the inspection and items and conditions covered by such furnishings and fixings are not inspected or considered. Nor do we assess the condition of conspicuous, non-structural items such as carpets, vinyl floor coverings, etc.
19. Any maintenance and general advice items are intended as a helpful guide. The Report is not necessarily an exhaustive list of all maintenance and advice items.
20. You should access legal, and conveyancing matters such as title and ownership to your solicitor or legal representative. Compliance issues in relation to positioning of services, privacy, vehicle access, the siting of buildings, zoning permit, or town planning issues or other legal matters should be directed to the relevant authority or to a solicitor or legal representative.
21. Unless otherwise notified BIPS will make vendor purchased reports available to the prospective purchases of the property.

22. Acceptance of this report and payment by the Client acknowledges acceptance of the inspection and Terms and Conditions.

17. Additional Pictures:

Included as a part of this attachment or a follow up attachment, that includes images from the day of the inspection and taken by the inspector.

Sample

Disclaimer:

Which specific areas do we inspect-

- Exterior roof
- Interior roof
- Under the floor (if applicable)
- Interior/exterior of the property