

Additional pages may be attached to this report. Read them very carefully. This report may not be complete without the attachments. If an item is present in the property but is not inspected, the "NI" column will be checked and an explanation is necessary. Comments may be provided by the inspector whether or not an item is deemed in need of repair.

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair	Inspection Item
I	NI	NP	R			
I. STRUCTURAL SYSTEMS						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			A. Foundations (If all crawl space areas are not inspected, provide an explanation.) <i>Comments (An opinion on performance is mandatory.):</i> Foundation is slab-on-grade. There are a few tips of rebar exposed on the foundation. <i>Using some silicon caulk on these would prevent further rust or deterioration.</i> The foundation appears to be functioning as intended.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			B. Grading and Drainage <i>Comments:</i> The downspouts discharge at the foundation.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			C. Roof Covering (If the roof is inaccessible, report the method used to inspect.) <i>Comments:</i> The roof was inspected from the rooftop. Roof covering is composition asphalt shingle. There is some wear and tear. There is some hail damage on the roof.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			D. Roof Structure and Attic (If the attic is inaccessible, report the method used to inspect.) <i>Comments:</i> Method of inspection: Entered attic and performed a visual inspection. The roof rafters are 2x4s. The ceiling joists are 2x4s. Decking type: Plywood Type of Insulation: Loose-fill Approximate depth of insulation: 3 to 4 inches Type of ventilation: Gable-end vents
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			E. Walls (Interior and Exterior) <i>Comments:</i> There are hairline cracks in some walls. There is some water damage on the bottom of the siding on the sunporch. EXTERIOR - There is some minor rot on the sill plate in the green house.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			F. Ceilings and Floors <i>Comments:</i> There are a couple of hairline crack in ceilings.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			G. Doors (Interior and Exterior) <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			H. Windows <i>Comments:</i> Windows are double-paned. There is a window with non-tempered glass in the tub/shower area of the master bathroom.

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<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			J. Porches, Decks, and Carports (Attached) <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			K. Other <i>Comments:</i>
II. ELECTRICAL SYSTEMS						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			A. Service Entrance and Panels <i>Comments:</i> Service size: 200 amps.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			B. Branch Circuits- Connected Devices and Fixtures (Report as in need of repair the lack of ground fault circuit protection where required.) <i>Comments:</i> The electrical system is grounded. Except for one on the front porch, there are no GFCI-protected outlets in the kitchen, bathroom(s), or exterior as required. <i>FYI – GFCIs (Ground Fault Circuit Interrupters) “measure” the amount of current in a circuit and “trip open” if even a small difference in current flow is detected between the hot and the neutral sides. It is assumed that the difference in current is occurring because some current is flowing through a person. The GFCIs trip quickly enough to prevent a person from being shocked.</i> There are splices in the attic that are not in junction boxes.
III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			A. Heating Equipment <i>Type and Energy Source:</i> Heat pump <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			B. Cooling Equipment: <i>Type and Energy Source:</i> Heat pump <i>Comments:</i> The supply temperature was 55 degrees. The return temperature was 70 degrees. The differential of 15 degrees was within the optimal range(14-20 degrees).
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			C. Ducts and Vents <i>Comments:</i>
IV. PLUMBING SYSTEM						
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			A. Water Supply System and Fixtures <i>Comments:</i> The water supply lines are copper. The commode in the master bathroom is loose on the floor.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			B. Drains, Wastes, and Vents <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			C. Water Heating Equipment (Report as in need of repair those conditions specifically listed as recognized hazards by TREC rules.) <i>Comments:</i> Energy source: ELECTRIC

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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	D. Hydro-Therapy Equipment <i>Comments:</i>	
V. APPLIANCES					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A. Dishwasher <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B. Food Waste Disposer <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C. Range Hood <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	D. Ranges/Ovens/Cooktops <i>Comments:</i> Oven under cooktop - Energy source: ELECTRIC With the temperature knob set at 350 degrees, the actual oven temperature was 348 degrees. Oven under microwave - Energy source: ELECTRIC With the temperature knob set at 350 degrees, the actual oven temperature was 372 degrees.	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	E. Microwave Cooking Equipment <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	F. Trash Compactor <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	G. Bathroom Exhaust Fans and/or Heaters <i>Comments:</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	H. Whole House Vacuum Systems <i>Comments:</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	I. Garage Door Operators <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	J. Door Bell and Chimes <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	K. Dryer Vents <i>Comments:</i>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	L. Other Built-in Appliances <i>Comments:</i>	
VI. OPTIONAL SYSTEMS					
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	A. Lawn Sprinklers <i>Comments:</i> The backflow preventer on the sprinkler system is all taped and may not function properly in that condition.	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B. Swimming Pools and Equipment <i>Comments:</i>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	C. Outbuildings <i>Comments:</i>	

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<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			D. Outdoor Cooking Equipment <i>Energy Source:</i> <i>Comments:</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			E. Gas Lines <i>Comments:</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			F. Water Wells (A coliform analysis is recommended.) <i>Type of Pump:</i> <i>Type of Storage Equipment:</i> <i>Comments:</i>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			G. Septic Systems <i>Comments:</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>			H. Security Systems <i>Comments:</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			I. Fire Protection Equipment <i>Comments:</i>

COMMENTS: Overall, this house appears to be in good condition.

IMPORTANT LIMITATIONS AND DISCLAIMERS

This Inspection Report reports only on the items listed and only on the present condition of those items. This Report reflects only if the items inspected are observed to be “operable” or “inoperable” at the time of the inspection; that is, whether such items at this time are observed to serve the purpose for which they are ordinarily intended. This Report reflects only those items that are reasonably observable at the time of the inspection. NO REPRESENTATION OR COMMENT is made concerning any latent defect(s) not reasonably observable at the time of the inspection or of items that require the removal of major or permanent coverings. For example, but without limitation, recent repairs, painting or covering may conceal prior of present leak damage that is not reasonably observable by the inspector and no representation or comment can be made. NO REPRESENTATION IS MADE CONCERNING ANY OTHER CONDITION OR THE FUTURE PERFORMANCE OF ANY ITEM. NO REPRESENTATION IS MADE AS TO ITEMS NOT SPECIFICALLY COMMENTED UPON. ALL WARRANTIES, EXPRESSED OR IMPLIED, NOT SPECIFICALLY STATED HEREIN ARE EXCLUDED AND DISCLAIMED. If a comment is made concerning the condition of any item, the Buyer is URGED to contact a qualified SPECIALIST to make further inspections or evaluations of that item. Buyer must notify Central Texas Home Inspections in writing of any complaints within seven (7) days of the date of the inspection and must thereafter allow prompt inspections of the item complained of, otherwise all claims for damages arising out of such complaints are waived by the Buyer. If Buyer institutes any legal action concerning this inspection, and fails to prevail on all of the causes of action alleged, Buyer shall be liable to Central Texas Home Inspections for all of its attorney’s fees incurred in such action. Actual damages for any breach of contract or warranty, negligence or otherwise, are limited to the amount of the inspection fee paid. Buyer, by accepting this report, or relying upon it in any way, expressly agrees to these Limitations and Disclaimers.

For more information concerning your rights, contact the Consumer Protection Division of the Attorney General’s office, you local district or county attorney, or the attorney of your choice.

If a dispute arises out of or related to independent inspector’s performance, and if said dispute cannot be settled between the parties to this inspection by state standards themselves, the parties hereto hereby agree to settle the dispute by Binding Arbitration according to the Commercial Arbitration Rules of the American Arbitration Association, and judgment upon the award rendered by the arbitrator(s) may be entered in any event having jurisdiction thereof. The parties hereto further agree that a dispute submitted to one of their arbitrators, at either parties’ option, selected from the panels of arbitrators of the American Arbitration Association and all arbitration administration costs shall be borne equally by all the parties o the dispute.

I FULLY and COMPLETELY understand that this inspection is not a warranty or guarantee. This inspection is essentially visual, it is not technically exhaustive, and it does not imply that every defect will be discovered. It is only a statement of operation and/or condition on this date.