

Focused exterior and site condition survey.

10 items in 5 areas. Tick one rating per item; write what you see, and number any photo you take next to the item it belongs to.

PROPERTY _____

INSPECTED BY _____

DATE _____

Scale: ☐ Good ☐ Fair ☐ Poor ☐ N/A · Fair and Poor items become work orders in the app

ROOF

Shingles / membrane _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Gutters & downspouts _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Flashing & penetrations _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

WALLS

Siding / paint & trim _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Caulking & sealants _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

WINDOWS & DOORS

Seals, glass & screens _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

GROUNDS

Landscaping & irrigation _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Drainage & grading _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

Walkways & fencing _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

LIGHTING

Exterior & security lighting _____ ☐ Good ☐ Fair ☐ Poor ☐ N/A

SUMMARY AND ACTION ITEMS

SIGNATURES

Inspector

Resident / client

Date