

REAL ESTATE INSPECTION FORM

Name: _____ Account No: _____

Inspection Date: _____ Time: _____

Address of Property: _____

Volume _____ Folio _____ Telephone #s: _____

Directions to Property: _____

ENVIRONMENT REVIEW

Road Condition _____

Neighbourhood Cleanliness _____

Accessibility _____

Occupation (Legal or Illegal Sitings) _____

Domestic or Commercial Aspects _____

Noise Nuisance _____

PROPERTY REVIEW

Land Only () Residential Building () Commercial Building ()

Utilities _____

State of Completion _____

No: of Bedrooms _____ Size (m) _____ No: of Bathrooms _____ Size (m) _____

General Cleanliness _____

Bungalow () Two (2) Floors () Three (3) Floors () Other ()

Roof Type _____

STRUCTURE

Prefab () Wooden () Concrete Nog () Re-enforced ()

Fixtures _____

Inspectors' Comments _____

Inspected By: 1) _____

Name Title Signature Date

2) _____

Name Title Signature Date