

Home Inspection Report

35 Moreland Street
Somerville, MA 02145

Prepared for:
Kevin Slattery



Prepared by:
Frank van den Elzen, MA Lic.# 546

This report is the exclusive property of the inspection company and the client whose name appears herewith and its use by any unauthorized persons is prohibited.



Our Rating System Is As Follows:

A: Item is functioning as originally intended.

B: This item is not functioning as originally intended. Maintenance, repair and upgrade required.

C: This item is not functioning at time of inspection. Maintenance, repair and upgrade required

NR: Not Inspected, not readily accessible or not present. No rating.

D: Further consultation with a contractor is advised.

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AN AGREEMENT

Congratulations on your expected purchase! You have made a wise decision in having your prospective home inspected. Our inspector will present you with an objective, general evaluation of the home, consistent with the professional practices and standards of the home inspection industry. To understand the report, you should read the entire document including all pre-printed and hand-written materials. Also, please read the Important Information and General Information section on each page. Each of these areas provides critical information. Please note that this inspection is limited in time and scope and not all repairs or defects may be discoverable at the time of this inspection.

Our inspectors present observations that are based on the visual examination of accessible areas of the property on the day of inspection. There is no destructive testing, probing or dismantling of any components. We cannot predict the future life expectancy or sudden failure of any component. This report is not an engineering study, or a substitute for an insurance policy, Home Warranty package, or a Manufacturer's Warranty.

You can certainly understand that we cannot see through walls, remove insulation or suspended ceiling tiles, nor enter crawl spaces that are less than 3 feet. We cannot enter attics that are not specifically designed for safe pass through. This report does not warranty the absence of wood-destroying insects. It is, however, a visual, non-destructive investigation for indications of previous or ongoing activity in readily accessible areas. Future repairs or renovations may reveal defects or wood-destroying insect activity that were not discoverable during the inspection. Tiger is not responsible for damage which is concealed or not readily accessible at the time of the inspection. If wood-destroying insect activity is discovered during the interior or exterior inspection, that activity will be documented on the report.

No evaluation has been made regarding air, soil, lead, water, waste disposal or sewage systems, asbestos, urea formaldehyde, lead paint, molds, radon, piping outside the foundation, natural or propane gas fittings or regulations, swimming pools, wood stoves, telephone systems, alarm systems or out-buildings unless otherwise noted. This report does not include the detection of rodents or general pests. We do not make an assessment of compliance with building codes. Tiger is not responsible for pointing out repairs needed to bring the home in compliance with current building codes or other regulations, and we do not report on whether the property may be lawfully used for rental, business or any other purpose. Intl.

Please be aware that only those components specifically mentioned in this report have been inspected and those components not included are not part of this report. We do not make any representation, implied or otherwise, concerning the condition of non-inspected areas. You should evaluate concerns about specific components with a qualified specialist and act upon any comments or recommendations before continuing with your purchase. **It is important that you further evaluate those areas not included in this report as well as those items recorded as B, C, or NR prior to continuing on with your purchase. Tiger is not responsible for repairs on any component rated B, C, or NR. This report will not necessarily reveal all defects on the property and should not be used for negotiations.** Intl.

In the event that you believe the condition of a component has not been accurately disclosed or that a particular component has been omitted from the report, it is your responsibility to notify Tiger and permit us to investigate and evaluate the situation before you make any corrective action. It is agreed that Tiger is not responsible for costs associated with repairs made prior to Tiger's investigation.

If you or anybody on your behalf chooses to initiate any type of civil action or law suit against Tiger or its inspector as a result of this inspection, in which Tiger prevails, you agree to indemnify and reimburse Tiger for its attorney fees, costs and expenses. This inspection is for your use and benefit only it may not be assigned or relied upon by any other party without written consent from Tiger. You also agree to indemnify and hold harmless Tiger for any subrogation action filed by an insurance company or any other third party as a result of this inspection.

Tiger reserves the right to retain the Inspection Report if the fee is not paid for at the time of the inspection. If the Inspector is requested to go back to the property after the inspection to check a component that was turned off, not accessible, or rated NR, there will be a \$125.00 charge.

Now that you have read and understand our Agreement and wish to proceed please sign below.

This is a duplicate of the AGREEMENT that was signed by you or your representative at the time of inspection and issued at that time.

Client: Kevin Slattery

Inspection Address: 35 Moreland Street, Somerville, MA 02145

Inspector: Frank van den Elzen, MA Lic.# 546

Inspection Date: 02/14/2015

TOTAL AMOUNT DUE: \$425.00 (Paid in Cash)



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Inspection Information

Inspection Address: 35 Moreland Street
Somerville, MA 02145.

Inspection Date: 02/14/2015.

Client Name: Kevin Slattery.

Client Email: kevinpslattery@yahoo.com.

Inspector: Frank van den Elzen, MA Lic.# 546.

Individuals Present: Owner.

Outside Temperature: 20F.

Ground Conditions: Snow Covered.

Current Weather Conditions: Overcast.

Past Day Weather Conditions: Mostly Clear.

Inspection Conditions: Fully Furnished Property, Snow Covered Conditions, Locked Front Bedroom.

Inspection Start Time: 12:00.

Inspection Finish Time: 1:40.

Inspection Type and Cost: Single Family Home Inspection: \$425.00.

Radon Test: None.

Other Services Provided: None.

TOTAL AMOUNT DUE: \$425.00 (Paid in Cash)

For a Home Maintenance Manual and other information for home buyers visit:
<http://www.tigerhomeinspection.com/en/info-for-home-buyers/resources/>



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Exterior

General Comments:

-Various items in this report are rated "NR" due to access limitations caused by snow. There is no and/or limited access to roof, gutters, grading, exterior outlets, walkways, driveway and foundation.
 -An exterior re-inspection at the inspector's convenience is part of this inspection. However, during prolonged snow conditions and due to schedules, we can not guarantee when this re-inspection will take place. If you need your inspection completed before a certain date, it is advised to make arrangements with our office to schedule a re-inspection when snow cover is gone. In this case a re-inspection fee will apply.

Roof System:

Structure Type: Pitched, Low Pitch.
 Surface Type: Asphalt Shingles.
 How inspected: Binoculars, fr. Window (partially)
 Roof Penetrations: Chimney, Vent Stack, Attic Fans.

	A	B	C	NR	D	
<u>Condition of Roof Structure:</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Evidence of rafter spread noted. Typical visual signs of rafter spread are bowing out walls. This condition generally occurs due to improper alterations to the roof framing. Consult contractor to further assess roof framing.
<u>Condition of Roof Surface:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Rear addition roof does not have proper pitch (less than 2/12) for asphalt shingle application. Area shows signs of prior leaking and has been covered with a tarp. Advise installation of a continuous roofing material like rubber roofing or rolled asphalt. -Condition of visual asphalt shingles is reflective of age, with signs of weathering and curling. Anticipate future roof upgrade. It appears the roof has multiple layers of asphalt shingles. It is advised to have no more than two layers of roofing. The roof will need to be stripped when re-roofing.
<u>Condition of Exposed Flashings:</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Monitor tar patched chimney and waste vent flashings and reseal or upgrade as needed. Water stains noted in vicinity of the chimney.

Exterior Chimneys (Flue Liners not included):

Condition of Masonry Chimney: ☐ ☐ ☒ ☐ ☒ Location: Center
 Components: No Cricket, Cleanout or Weather Cap present.
 How Inspected: Binoculars
 -Chimney is too short and should be at least 2ft taller than anything within 10ft. Consult mason.
 -The condition of the flue liners or determining whether they are present is not part of this inspection.



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Siding:

	A	B	C	NR	D	
Type and Condition:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Vinyl.

Trim: Eaves/Soffits/Cornerboard/Window

	A	B	C	NR	D	
Type and Condition:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Aluminum Wrap, Vinyl Trim, Wood Trim.

Gutters and Downspouts:

	A	B	C	NR	D	
Type and Condition	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Aluminum Gutters with Aluminum Downspouts.

Perimeter Drainage and Grading:

	A	B	C	NR	D	
Grading/Drainage Conditions:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Grade not visible due to snow coverage.

Basement Windows:

	A	B	C	NR	D	
Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No access to windows due to snow.

Exterior Faucets:

	A	B	C	NR	D	
Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No access due to snow covered conditions.

Electric Service Entry:

	A	B	C	NR	D	
Type and Condition:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Overhead-Weather Head/Drip Loop with Conduit Drop, No Exterior Meter Service Amperage: Appears 100 Amp.

Exterior Outlets:

	A	B	C	NR	D	
Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No found. Limited access due to snow.

Right Stairs:

	A	B	C	NR	D	
Materials and Condition:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Materials: Wood.

Walkways:

	A	B	C	NR	D	
Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Not Determined. -No access due to snow covered conditions.

Driveways:

	A	B	C	NR	D	
Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Asphalt. -No access due to snow covered conditions.



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Additional Important Information:

- We suggest that you verify the age of the roof with the selling party. Roofing material performance estimates relate to typical conditions, assuming proper installation and maintenance. The actual life of the roofing material can be influenced by external sources like weather extremes, internal attic conditions, roof ventilation, house orientation, conditions caused by trees and vegetation or mechanical damages. It is advised that reserves be set aside for repairs or eventual roof replacement. Advise regular inspection of your roof flashing.
- Due to limited access to the flashing, the findings in this report only apply to the exposed flashing and/or accessible evidence of flashing failure.
- The condition of the flue liners or determining whether they are present is not part of this inspection. It is recommended that you further investigate this component. Local regulations in some communities require the presence of a flue liner when using certain fuels. Consult your local authorities.
- The condition and type of material underneath the exposed siding and trim wrap can not be ascertained during this inspection. These components are covered by a more recent finished surface. The ratings in this report apply to visible course of siding and trim wrap, and installation thereof.
- To prevent water damage to roof, sheathing, walls, ceilings and structural members, gutters and down spouts must be kept clean and clear of debris. It is suggested that you periodically check to ensure that your gutter system works as intended.
- The underside of decks and porches is not accessible at the time of this inspection. It is suggested to make it accessible to check for damage, rot, insect infestation and construction methods. The ratings herein apply to the visible components only.
- Sheds are not part of this inspection.



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Basement

General Comments:

Limited access to structural members during inspection due to inaccessible crawl space, finished walls, furnishings, cluttered conditions, appliances and plumbing. Structural members are rated accordingly.

Foundation:

Type and Condition:

A B C NR D
☐ ☐ ☒ ☐ ☒

Type: Fieldstone, Brick

-Foundation is failing. Evidence of substantial foundation settlement observed. The two foundation side walls are bowing and leaning. This lateral movement has caused various joists to loose their end bearing. Advise further evaluation by foundation specialist or structural engineer. Anticipate installation of a new foundation

-The rear addition is not on a proper foundation and is supported by an insufficient number of wood posts instead. Advise installation of a proper foundation.

Floor:

Type and Condition:

☒ ☐ ☐ ☐ ☐

Type: Concrete.

Crawl Space:

Condition:

☐ ☐ ☒ ☐ ☒

How Viewed: From Opening

-Limited access into crawl space due to height limitations, storage and rubble.

Insulation Type: None

Floor Type: Soil

Vapor Barrier: No vapor barrier present.

-Consider installing one. Ventilation and vapor barriers are necessary to control moisture levels.

Ventilation: No crawl space ventilation present.

-Advise introducing crawl ventilation. Installing louvered vent openings that can be opened during spring and summer and closed in the winter is advised.

-There is insufficient support under the girder in the crawl space. Advise installing a support column on a proper footing to cut the girder span in half.

Girder(s):

Type and Condition:

☐ ☒ ☐ ☐ ☒

Type: Wood.

-Main support beam shows evidence of sagging. This has resulted in floor deflections throughout property.



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Support Columns:

	A	B	C	NR	D	
Type and Condition:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Steel Lally, Adjustable Jacks, Wood -Suggest replacing wood posts and adjustable jacks with steel lally columns on proper footings. Timbers are subject to shrinkage and deterioration and adjustable jacks are considered a temporary support.

Sill:

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Wood.
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Subfloor:

Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Floor Type: Wood Plank.
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Joists:

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Wood. -Insufficient end bearing observed. The joist end bearing has been affected by lateral foundation movement. The joist tails are pulling away from the sill pockets. See Foundation above. Consult contractor for evaluation and repair.
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Chimneys (Flue Liners not included):

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Brick Components: No cleanout in place. -Consult mason to parge spalling masonry chimney. Spalling is deterioration/erosion of the brick surface.
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Basement Entrance:

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: None Present.
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Water Penetration and Dampness:

Comments: Evidence of water penetration and dampness noted at time of inspection. Efflorescence observed on foundation walls. The source and amount of water penetration may not be observable at the time of inspection.
 Sump Pump: Sump pump in place.
 -Installation of sump pump system is not to professional standards. Correct sump pump that is improperly discharging into town sewer. Also observed improvised sump and no check valve.
 French Drain: Not Present.
 Dehumidifier: None Observed.

Addition Important Information:

-A separate Wood Boring Insect report is provided with your inspection, either on site or by mail. Please review and follow through on directions as needed.
 -Examination of structural members, wiring, piping, etc., cannot be conducted in full due to inaccessible crawl space areas. No destructive probing or removal of permanent or non-permanent partitions or flooring is performed.



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Plumbing System

Supply Plumbing Information:

Water Service: The water source is municipal. Verified by observation.
Shut Off Location: The main shut off valve is located in basement, at front right.

Waste Plumbing Information:

Waste Service: The waste system is municipal. Verified by observation.

Accessible Water Supply Lines:

	A	B	C	NR	D	
<i>Type and Condition:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Type:</i> Copper -Aged valves appear corroded and caked. Suggest upgrade to ball valves. Note: Mineralization, corrosion and general wear may cause leaking when operating aged valves. -Corrosion noted due to flux not wiped off solder joints. Clean pipes joints to halt decay.

Accessible Drain/Waste Lines:

<i>Type and Condition:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<i>Type:</i> Cast Iron, PVC -Anticipate upgrades and repairs of worn cast iron waste lines. Observed corrosion, evidence of pitting, rust blisters and signs of weeping. -Sump pump is improperly discharging into waste system. No trap present.
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Main Vent Stack:

<i>Condition:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Waste venting system is sealed inside walls and not accessible for inspection.
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Water Heater:

<i>Type and Condition:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>Manufacturer:</i> GE <i>System Type:</i> Individual tank water heater. <i>Fuel Type:</i> Natural Gas <i>Tank Size:</i> 30 gallon <i>System Components:</i> P&T Relief Valve, Vacuum Breaker <i>Thimble:</i> No thimble in place at chimney entry point. -Add proper discharge extension to P&T valve. This extension should terminate 6" to 12" above floor surface.
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Washer/Dryer Connections:

<i>Washer Connections:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Add cover to washer outlet.
<i>Dryer Connections:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	-Plastic dryer duct present. Advise upgrade to a rigid, or semi-rigid metal dryer duct. -Clean out lint and maintain your dryer and dryer duct periodically to ensure safe operation and proper performance.



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Additional Important Information:

- Operation of main valves, individual fixture shut offs and other valves is beyond the scope of a home inspection.
- The type of sewage disposal system as noted above is determined by information provided by either seller, broker or client. It is not a determination of its actual type, design or condition. An optional inspection report is available to offer an opinion of the systems type, effectiveness and condition.
- Supply and waste line information is for reference purposes only. Tiger recommends you confirm this information with the municipality.
- The warranty period for water heaters vary from manufacturer to manufacturer; this should not be confused with the actual life expectancy which could be more or less. Please refer to the warranty for the extent and terms, if any.
- The laundry appliances are not operated during inspection. Observations are for identification purposes only, not determination of proper operation or termination.



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Electric System

System Information:

Supply Voltage: 120/240 Volts.
 Main Disconnect Amperage: 100 Ampere.
 Service Wire Size and Type: AWG #2, AL.
 Over-Current Devices Type: Circuit Breakers, GFCI Breaker.
 Panel Location: Basement.
 Over-Current Devices Off: Observed GFCI circuit in the "off" position.
 CU/AL Compatible: Over-current protection devices are CU/AL rated.
 Anti-Oxidant Present: No anti-oxidant gel present on aluminum wire connections inside panel.

Accessible Wiring:

	A	B	C	NR	D	
Type and Condition:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Copper, Romex, BX Cable, Stranded Aluminum -Installation of wiring is not up to professional standards. Observed loose later installed wiring. Consult electrician for clean up. -Expand electric system. Add more outlets and circuits to bring electric up to current standard.

Service Panel:

Condition:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Consult electrician to eliminate double tapped breakers. Multiple wires/circuits are connected to a single lug on a circuit breaker. -No anti-oxidant present on aluminum wire tips and lugs at main disconnect. Consult electrician to rectify as needed. -The breakers are not labeled as to the circuits or appliances controlled. Suggest proper labeling of panel.
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Ground Terminal Bar:

Condition:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Grounding/Bonding:

Condition:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The system ground is not bonded on both sides of the water meter. Have electrician install a system ground jumper to house side of water meter.
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GFCI Breakers:

Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Number of GFCI breakers in place at the panel: 1 -The tripped GFCI breaker in the panel failed to reset. This indicates a ground fault (GFCI may have tripped due to a wet and snow covered exterior outlet). Consult electrician for further evaluation.
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AFCI Breakers:

Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No AFCI breakers present in the panel.
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Junction Box Covers:

Condition:

A	B	C	NR	D
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Switch/Outlet Covers:

Condition:

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correct missing outlet covers in bedroom, 2nd floor bathroom and laundry area.
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Additional Important Information:

- The decision to upgrade electric service can be influenced by client's need, local regulations and mortgage lending institutions.
- The present main over-current protection capacity is not always an indication of its maximum capacity. Consult with an electrician for Amperage verification.
- Once or twice a year flip circuit breakers off and on to maintain good mechanical contact. Regular testing of the GFCI protected outlets/circuits is advised per manufacturer's recommendation.
- Furnishings and living conditions allow for only random testing of electrical outlets. Light switches and light fixtures are not part of this inspection and are not rated.
- Smoke and CO detectors should be present and approved by the local fire dept. prior to purchase. Tiger makes no representation as to the functionality or installation.



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Central Heating and Cooling

General Information:

System Location:

GAS LEAK! Gas odor noted during inspection. Advise immediate consultation with gas company.

Fuel Source:

Basement.

Natural Gas.

Thermostat(s):

Condition:

A B C NR D
☒ ☐ ☐ ☐ ☐

Location: Living Room.

Exposed Flue/Damper:

Type and Condition:

☒ ☐ ☐ ☐ ☐

Flue Material: Galvanized

Thimble: No thimble in place at chimney entry point. Consult a heating technician or local authorities regarding regulations and requirements.

Burner/Gun:

Condition:

☐ ☐ ☒ ☐ ☒

-There are no signs of recent servicing. Burner is dirty and produces a yellow flame. Advise servicing of heat plant.
 -An annual tune up of your gas fired heat plant is advised.

Boiler:

Type and Condition:

☐ ☒ ☐ ☐ ☒

Boiler Type: Gravity Hot Water Boiler

Components Include: Expansion Tank, Auto Feed Valve, Pressure Relief Valve

System Pressure: Not Determined

System Temperature: Not Determined

-Consider upgrade of fully depreciated, outdated and slow gravity hot water boiler system.

Circulator Pump(s):

Condition:

☐ ☐ ☐ ☒ ☐

Number of Circulator Pumps: 0.

Accessible Distribution Pipes/Plumbing:

Type and Condition:

☐ ☒ ☐ ☐ ☐

Distribution Piping Type: Black Iron

Cooling System (Ducted Systems):

Type and Condition:

☐ ☐ ☐ ☒ ☐

Type: Not Present.



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- D: Further consultation with a contractor is advised.

Additional Important Information:

- This report indicates the condition of the heat plant on the day of the inspection without regard to life expectancy. We suggest that you obtain a major service policy for the heat plant from a dealer or HVAC contractor, which should include annual servicing, adjustments, efficiency testing, warranty and emergency service.
- Relief valves, valves, gauges, control components, switches, and other safety devices can not be tested. They are listed on the report to denote that they were observed in place in the system.
- Identification of asbestos containing materials is beyond the scope of a home inspection. Further evaluation by a licensed specialist is suggested if potentially asbestos containing materials were noted at accessible areas during your inspection.
- Gas piping and meters are not part of this inspection. Consult a licensed contractor or gas provider for evaluation.



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Kitchen and Interior Accessories

Kitchen:

	A	B	C	NR	D	
Sink:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temp: 120F.
Counters:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wear and tear noted.
Cabinets:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wear and tear noted on cabinets.
Ceiling:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Metal.
Walls:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Paneling.
Floor:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Vinyl. -Substandard vinyl floor tile installation noted.
Windows:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Suggest upgrade or refurbishing of worn window.
Electrical Outlets:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Advise upgrade to GFCI protected kitchen counter outlets. All counter outlets and all outlets within 6 ft. of a wet location need to be GFCI protected.
Heat Source:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: None.

Appliances:

Stove:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fuel Type: Gas -Stove has not been secured as required by manufacturer's installation instructions. Properly secure stove using an anti tip bracket.
Ventilation:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Note: The exhaust vent is a re-circulating filter type.
Dishwasher:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Unit is not properly secured. Correct as needed.
Waste Disposal:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Not Present.



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Interior Accessories:

	A	B	C	NR	D	
Main Door:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Side Door:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Basement Stairway/Railings:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Properly secure loose handrail.
Interior Stairway/Railings:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	The handrail is incomplete and does not extend covering the full path of the stairs. Correct as needed.
Hallways:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Correct reversed polarity at hallway outlet. -Water damaged ceiling area observed at side entry hallway. Further investigation and repair is recommended.
Skylight(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No skylights present.
Fireplace:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	No fireplace present.

Additional Important Information:

-Unless otherwise noted, all appliances listed are working on the day of the inspection. Tiger Home Inspection, Inc. does not represent a guarantee or warranty of the continuous operation of the appliances. Self-cleaning features, oven convection systems, timers, clocks, thermostats, gasket or seal performance and cosmetic blemishes are not part of this inspection report. Fridges, microwaves, laundry machines, dryers, trash compactors and central vacuum systems are not included.



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Bathrooms

Half Bath:

	A	B	C	NR	D	
Sink:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Temp: 120F.
Toilet:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cracked flush tank lid observed. Suggest upgrade.
Ceiling:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Gypsum.
Walls:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Paneling.
Floor:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Tile.
Windows:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Correct broken/disconnected window springs.
Door(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Outlet(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No bathroom outlet present. Advise installing GFCI outlet.
Ventilation Fan:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Not Present.
Heat Source:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: None.

Main Bathroom:

Sink:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Temp: 120F -Suggest upgrade of substandard under-sink flex plumbing. Install rigid line. -Add sink stopper as needed.
Toilet:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Tub/Shower:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Tub/Shower Combination -Advise upgrade of leaking, outdated valves. The valve stems are loose. A modern anti-scald mixing valve is preferable.
Tub/Shower Walls:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Fiberglass.
Ceiling:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Gypsum.
Walls:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Paneling.
Floor:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Marble Tile.
Windows:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Upgrade panes with broken thermal seals. Foggy deposit trapped between panes noted. Correct missing screen.
Door(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Outlet(s):	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Correct reversed polarity at outlet and correct missing outlet cover. Advise upgrade to GFCI protected bathroom outlet. Ground Fault Circuit Interrupter protected outlets are advised wherever a user may come in contact with water.
Ventilation Fan:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Not Present.
Heat Source:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Radiator, Temp: 120F.

Additional Important Information:

-Inspection is limited to visual conditions at tub/shower wall. Conditions behind finished surfaces are not accessible (NR). Maintain all caulk and grout seals to prevent negative effects of moisture.



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Interior - Rooms

General Comments:

-Insufficient number of outlets present throughout property. Suggest adding more outlets to bring home up to current standard. Observed excessive use of extension cords. This is not advised.

-No access into front bedroom on 2nd floor. Room was locked during inspection and not part of this inspection.

Living and Dining Room:

	A	B	C	NR	D	
<i>Ceiling:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Gypsum, Suspended.
<i>Walls:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Gypsum, Paneling.
<i>Floor:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Wood.
<i>Windows:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correct missing window screens.
<i>Door(s):</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correct not latching French doors.
<i>Electrical Outlets:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Insufficient number of outlets present. Suggest adding more outlets to bring rooms up to current standard. -Advise upgrade of painted over outlets.
<i>Heat Source:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Radiators, Temp: 110F, None -No temperature increase observed at dining room radiator. Radiator may have been shut off. Further investigation is recommended.

1st Floor Bedroom:

<i>Ceiling:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Gypsum -Water stained ceiling areas observed. There is a blue tarp present on the roof at this location. See Exterior section of this report under Roof. Further evaluation may reveal concealed damage and other related water penetration issues.
<i>Walls:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Paneling.
<i>Floor:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Laminate.
<i>Windows:</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	-Upgrade damaged window crank. -Correct missing window screens.
<i>Door(s):</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Electrical Outlets:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<i>Heat Source:</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Radiator, Temp: 110F.



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2nd Floor Bedroom (Rear Only):

	A	B	C	NR	D	
Ceiling:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Gypsum -Water stained ceiling areas observed near chimney. Further investigation is recommended.
Walls:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Paneling.
Floor:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Type: Wood.
Windows:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Correct missing window screen.
Door(s):	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Electrical Outlets:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have electrician bring outlets up to current standard. Add more outlets, correct reversed polarity outlets and correct loose outlet that is falling out of the wall.
Heat Source:	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Type: Radiator, Temp: 105F -Repair leaking radiator valve.

Additional Important Information:

-Cosmetic defects such as: worn carpets, fading or peeling paint, and holes and blemishes on walls, ceilings, flooring, doors and trim are not reported.

-Hairline cracks are not unusual on interior wall and ceiling surfaces, due to minor shrinkage and settlement.

-Due to the nature of the deficiency, insulated double-pane windows and skylights may have broken thermal seals that may not be detected.



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Attic - Ventilation - Insulation

General Comments:

No attic scuttle found during inspection. No access into overhead and eave attic cavities. This prevents inspection of structural members, insulation, ventilation and evidence of water penetration. Various items are rated accordingly.

Attic Access:

	A	B	C	NR	D	
Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Not Determined.

Structural Components:

Roof Framing:	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Support Type: Wood Rafters. -Evidence of rafter spread noted. Typical visual signs of rafter spread are bowing out walls. This condition generally occurs due to improper alterations to the roof framing. Consult contractor to further assess roof framing.
Roof Backing:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Wood Planks.
Ceiling Joists:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Wood Timbers.

Chimneys (flue liners not included):

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Masonry -No access to chimney due to fully finished construction.
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Insulation (attic only):

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Not Determined Depth: Not Determined.
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Ventilation:

Type and Condition:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Type: Two Attic Fans - The existing system does not supply sufficient ventilation of the attic cavity. Suggest installing a ridge and soffit attic ventilation system when re-roofing. A proper roof ventilation system will prevent moisture build up, reduces ice damming and will prolong the life of your roof and roof backing.
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Water Penetration:

Evidence of Water Penetration:	Observed evidence of water penetration on ceilings in 2nd floor bedroom near chimney, 1st floor bedroom and side entry. Consult contractor for further evaluation of these observations and repair as needed. See Exterior section of this report under Roof System and Flashing regarding these observations.
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Additional Important Information:

-During this inspection we can not determine whether noted water penetration evidence has been addressed. Check for history with selling party. Monitor and repair as needed.

-Evidence of discoloration, high moisture and/or water penetration observed. The source/cause and the amount of water penetration may not always be detectable. Tiger recommends you consult the owner or a contractor for a historical perspective regarding this observation. These conditions can be associated with environmental issues. You should consult a qualified specialist if you have any concerns.

-Presence of insulation in the wall cavities can not be determined during this inspection. Be aware that prior to the adoption of federal, state and local codes in the mid-70s, homes were typically built with minimum insulation. Today's home owner, faced with rising energy costs, should consider the return investment of insulation upgrades.

-Attic ventilation is an important factor in the life expectancy of roof sheathing and shingles. Provide maximum air flow to minimize heat buildup in summer and condensation in winter. Do not cover or block vents.

State-Recommended Questions A to K

The Commonwealth of Massachusetts Home Inspection Regulations 266 CMR, Section 6.03 (4) requires the inspector to notify his/her client that answers to the following questions should be ascertained from the seller and/or the seller's representative. It should be understood that the answers may not be readily observable by the Inspector at the time of the inspection, and that there is no legal obligation by the seller and/or the seller's representative to answer them. The Massachusetts Home Inspection Regulation can be viewed at: www.mass.gov/dpl/boards/hi

To the Best of Your Knowledge as the Seller and/or Seller's Representative:

- (a) Does the dwelling have a history of seepage, dampness, and/or water penetration into the basement and/or under-floor crawl space? If so, please explain. _____
- (b) Has a sump pump ever been installed or used in the basement/under-floor crawl space? _____
- (c) Do you use any type of dehumidification in any part of the dwelling? _____
- (d) Are you aware of any mold and/or air quality issues in the dwelling? _____
- (e) Is the dwelling on a private sewage system? _____
 - 1. If the waste system is private, has a Title V inspection been completed, and is the completed Title V Report available for review? _____
 - 2. Has the dwelling ever been inspected and/or treated for insect infestation? _____
 - a. If so, when? _____
 - b. What were the chemicals used? _____
- (f) Has the dwelling ever been tested for radon gas and/or lead paint? _____
 - 1. If so when? _____
 - 2. What were the results? _____
- (g) Has the dwelling ever been inspected by an inspector? _____
 - 1. If so, when? _____
 - 2. Were any problems noted? _____
 - 3. Is a copy of the inspection report available? _____
- (h) Are the seller/seller's representative aware of any structural, mechanical, electrical or other material defects that may exist on the property? _____
- (i) Has there ever been a fire in the dwelling? _____
 - 1. If so, when? _____
 - 2. What areas were involved? _____
 - 3. What chemical cleaners, if any, were used for cleanup? _____
- (j) Has there ever been a hazardous waste spill on the property? _____
- (k) Is there an underground storage tank on the property? _____