

PROPERTY INSPECTION REPORT

Prepared For: SAHA

(Name of Client)

Concerning: 1006 NW 27th San Antonio, TX 78237

(Address or Other Identification of Inspected Property)

By: Jon Krauss 4255 02/27/08

(Name and License Number of Inspector) (Date)

(Name, License Number and Signature of Sponsoring Inspector, if required)

The inspection of the property listed above must be performed in compliance with the rules of the Texas Real Estate Commission (TREC).

The inspection is of conditions which are present and visible at the time of the inspection, and all of the equipment is operated in normal modes. The inspector must indicate which items are in need of repair or are not functioning and will report on all applicable items required by TREC rules.

This report is intended to provide you with information concerning the condition of the property at the time of inspection. Please read the report carefully. If any item is unclear, you should request the inspector to provide clarification.

It is recommended that you obtain as much history as is available concerning this property. This historical information may include copies of any seller's disclosures, previous inspection or engineering reports, reports performed for or by relocation companies, municipal inspection departments, lenders, insurers, and appraisers. You should attempt to determine whether repairs, renovation, remodeling, additions or other such activities have taken place at this property.

Property conditions change with time and use. Since this report is provided for the specific benefit of the client(s), secondary readers of this information should hire a licensed inspector to perform an inspection to meet their specific needs and to obtain current information concerning this property.

ADDITIONAL INFORMATION PROVIDED BY INSPECTOR

Report Number: 20080242042 Phone Number: _____
Date of Inspection: 02/27/08 Fax Number: _____
Time of Inspection: _____
Client Mailing Address: _____
City/State/Zip: _____

SPECIAL NOTES:

Reinspection done 09/15/08. Notes are in report.

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

A. Foundations (If all crawl space areas are not inspected, provide an explanation.)
Comments (An opinion on performance is mandatory.):

FOUNDATION TYPE- Concrete slab on grade.
 CONCRETE FOUNDATION OBSERVATIONS- Foundation appears to be functioning normally at time of inspection.

B. Grading and Drainage
Comments
 Structure is on a slightly sloped lot. Grade at foundation appears adequate at time of inspection

C. Roof Covering (If the roof is inaccessible, report the method used to inspect.)
Comments
 METHOD USED TO INSPECT ROOF- The following was observed upon walking on the roof.
 DESCRIPTION OF MATERIALS- Composition and/or fiberglass shingles. Note: Average life expectancy under normal installation/conditions is between 10 -14 years.
 ROOF COVERING OBSERVATIONS- Roof covering observed showing normal wear for age.
 Starter strip around perimeter edge of roof improperly installed, not sealed down.
Repaired 09/15/08.
 Seal all exposed fasteners at ridge caps, flashings on roof. Repaired 09/15/08.
 Damaged edge of roof at right front area and exposed plywood observed Repaired 09/15/08.
 Shingle at right rear corner lifting Repaired 09/15/08.
 Nails exposed around perimeter edge of roof in need of repairs Repaired 09/15/08.
 Damaged, patching noted at rear center roof Repaired 09/15/08.

D. Roof Structure and Attic (If the attic is inaccessible, report the method used to inspect.)
Comments
 ACCESS METHOD/LIMITATIONS- Full access
 ATTIC OBSERVATIONS- Truss framing
 Upper vents not fully trimmed out. Trim decking for full venting Repaired 09/15/08.
 ROOF STRUCTURE OBSERVATIONS- No problems observed during this inspection period.
 INSULATION OBSERVATIONS- Blown type insulation (either fiberglass or rock wool) present. The insulation layer is approximately, 5 to 8 inches thick.

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair	Inspection Item
I	NI	NP	R			

Add insulation throughout to 9.6" minimum for R30 value. **Repaired 09/15/08.**

E. Walls (Interior and Exterior)

Comments

INTERIOR WALL OBSERVATIONS- INTERIOR WALLS ARE COVERED WITH THE FOLLOWING MATERIAL(S)- Drywall.

EXTERIOR WALL OBSERVATIONS- EXTERIOR WALLS ARE CONSTRUCTED OF THE FOLLOWING MATERIALS- Brick and/or block (stone) veneer over wood framing.

Cement Fiber type siding. Soffit(s), eave(s), and/or trim are painted wood. Aluminum/vinyl siding.

OBSERVATIONS- Paint, seal base of wood trim at corners, around perimeter of house **Repaired 09/15/08.**

Damaged fascia trim at rear right corner. **Repaired 09/15/08.**

F. Ceilings and Floors

Comments

CEILING COVERING(S)- CEILING OBSERVATIONS- No problems observed during this inspection period.

G. Doors (Interior and Exterior)

Comments

INTERIOR DOOR OBSERVATIONS-rear bedroom door not latching

EXTERIOR DOOR OBSERVATIONS- Moisture related deterioration is present in door(s) and/or related trim in the following area(s). --- breakfast door . Repair damage, reseal exterior and consider cover to protect from elements. **Repaired 09/15/08.**

Front door loose hinge, **Repaired 09/15/08.** not fully sealed when closed

H. Windows

Comments

OBSERVATIONS-missing flashing at rear master window
Cracked glass at master bedroom window

I. Fireplace/Chimney

Comments

Not Present

J. Porches, Decks and Carports (Attached)

Comments

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair	Inspection Item
I	NI	NP	R			

PORCH OBSERVATIONS- No problems observed during inspection period.

K. Other
Comments
 Not Present

II. ELECTRICAL SYSTEMS

A. Service Entrance and Panels
Comments:

SERVICE COMMENTS: Under Ground
 MAIN PANEL COMMENTS: LOCATION- Exterior of house
 PREDOMINANT OVERLOAD PROTECTION DEVICES- Circuit breakers are provided.
 MAIN ELECTRICAL PANEL OBSERVATIONS- White wires used as hot legs in panel but not properly marked as hot legs. **Repaired 09/15/08.**
 Loose conduit at base of meter and exposed wiring in need of repair **Repaired 09/15/08.**

SUB-PANEL COMMENTS: LOCATION- Garage
 SUB-ELECTRICAL PANEL OBSERVATIONS- No problem(s) noted at the time of inspection.

B. Branch Circuits - Connected Devices and Fixtures (Report as in need of repair the lack of ground fault circuit protection where required.):
Comments:

FEEDERS- Copper, Aluminum (220 volt OK)
 VISIBLE BRANCH WIRING TYPE- Grounded type branch wiring present. Copper
 BRANCH WIRING OBSERVATIONS- No problems observed during this inspection period.

III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS

A. Heating Equipment #1:
Type/Energy Source: System Type- Electric Forced Air Heat Pump.
Comments:

Unit is located in, closet
 Heating System- The heating system operated correctly at the time of the inspection.
 Note: exterior is Payne unit and interior is Trane. Most manufacturers recommend against mixing components on heat pump systems.

B. Cooling Equipment #1:
Type/Energy Source: Electric.
Comments:

Exterior unit missing. Est. Size: 2 1/2 ton

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair	Inspection Item
I	NI	NP	R			

Cooling System- - Central, - Split System.

AIR TEMPERATURE DIFFERENTIAL- Temperature drop/differential observed between 15 - 20 degrees. (taken between interior return and supply air) This is considered a normal operating range.

C. Ducts and Vents

Comments:

DUCTWORK TYPE- Fiberglass duct board and/or flexible type ducts were primarily used for distribution/return system throughout.

Ductwork, Air Chase and/or Plenum Observations- Openings observed at ducts and/or at blower unit allowing air to escape from the system. Reseal all connections. **Repaired 09/15/08.**

Seal return off from hall bath tub piping. **Repaired 09/15/08.**

IV. PLUMBING SYSTEM

A. Water Supply System and Fixtures

Comments:

The potable water supply source is- Municipal service is primary water source.

SUPPLY PIPING TYPE- Copper

POTABLE WATER LINE OBSERVATIONS- Appears serviceable.

Kitchen

KITCHEN SINK PLUMBING-leaking at disposal connections.

B. Drains, Wastes, Vents

Comments:

DRAIN/WASTE & VENT PIPING TYPE- PVC plastic

SEWER PIPE OBSERVATIONS- No problems observed during this inspection period.

C. Water Heating Equipment #1: (Report as in need of repair those conditions specifically listed as recognized hazards by TREC rules.)

Energy Source: Electrically operated.

Comments:

Location/Coverage: Closet, Hallway.

State 40 gallon unit.

leaking, drip at supply valve to unit in need of repairs **Repaired 09/15/08.**

D. Hydro Therapy Equipment

Comments:

Not Present

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair
I	NI	NP	R	Inspection Item	

V. APPLIANCES

- | | | | | |
|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A. Dishwasher
<i>Comments:</i>
No problems observed during limited test run of appliance. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | B. Food Waste Disposer
<i>Comments:</i>
No problems observed during limited test run of appliance. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | C. Range Hood
<i>Comments:</i>
No problems observed during limited test run of appliance. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | D. Ranges/Ovens/Cooktops
<i>Comments:</i>
Oven present, Electric. No problems observed during this inspection period. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | E. Microwave Cooking Equipment
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | F. Trash Compactor
<i>Comments:</i>
Not Present |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | G. Bathroom Exhaust Fans and/or Heaters
<i>Comments:</i>
Vent unit present. No problems observed during limited test run of appliance. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | H. Whole House Vacuum Systems
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | I. Garage Door Operators
<i>Comments:</i>
Not Present |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | J. Door Bell and Chimes
<i>Comments:</i> |

I=Inspected		NI=Not Inspected		NP=Not Present	R=Not Functioning or in Need of Repair	Inspection Item
I	NI	NP	R			

No problems observed.

K. Dryer Vents
Comments:

No problems noted.

L. Other Built-in Appliances
Comments:

Not Present

VI. OPTIONAL SYSTEMS

A. Lawn Sprinklers
Comments:

Not Present

B. Swimming Pools and Equipment
Comments:

Not Present

C. Outbuildings
Comments:

Not Present

D. Outdoor Cooking Equipment
Energy Source:
Comments:

Not Present

E. Gas Lines
Comments:

Not Present

F. Water Wells (A coliform analysis is recommended.)
Type of Pump:

Type of Storage Equipment:

Comments:

Not Present

G. Septic Systems
Comments:

I=Inspected NI=Not Inspected NP=Not Present R=Not Functioning or in Need of Repair

I	NI	NP	R	Inspection Item
---	----	----	---	-----------------

Not Present

H. Security Systems

Comments:

security testing is not part of this inspection

I. Fire Protection Equipment

Comments:

Not Present