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PROPERTY INSPECTION REPORT

Prepared For: SAHA

(Name of Client)

Concerning: 428 Matthews San Antonio, TX 78237

(Address or Other Identification of Inspected Property)

By: Gary Armstrong 9604 01/12/08

(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: 20080141389 Phone Number: _____
Date of Inspection: 01/12/08 Fax Number: _____
Time of Inspection: 12:00 noon
Client Mailing Address: _____
City/State/Zip: _____

SPECIAL NOTES:

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.
 Minor signs of past settlement observed in the form of hair line type cracking to finished surfaces, at left exterior garage.

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 from either eave level and/or ground level using binoculars.
 DESCRIPTION OF MATERIALS- Rolled composition roofing. Note: Average life expectancy under normal conditions/installation is between 6 - 8 years.
 Approximate age of roof. Approximate age of this roof covering is believed to be between 5 and 10 years old.
 ROOF COVERING OBSERVATIONS- Starter strip around perimeter edge of roof improperly installed, not sealed down as per manufacturer installation instructions.
 Torn, missing shingles at front roof slope in need of repair
 Remove wood at front roof flashing area

GUTTERING OBSERVATIONS- DAMAGE/DEFECTS NOTED- Gutter(s) are filled with debris. (Leaves, sticks, and/or aggregate.) Debris may have restricted full viewing at some areas.

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
 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, 10 - 16 inches thick.

E. Walls (Interior and Exterior)
Comments

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INTERIOR WALL OBSERVATIONS- INTERIOR WALLS ARE COVERED WITH THE FOLLOWING MATERIAL(S)- Drywall.
 OBSERVATIONS- cracking noted at corner door at upper front left bedroom
 Cracking at corner of wall at top of stairs, at front right bedroom
 Loose railing at interior stairs
 Stored items or furnishings prevent full inspection.

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.
 OBSERVATIONS-excessive spacing of weep holes in masonry siding base of walls, over doors, windows. Add properly every 33".
 Reseal lap siding joints at right, at left, at rear
 Damaged right exterior garage vent in wall.
 Deteriorated wood trim at garage door jambs.

F. Ceilings and Floors
Comments

FLOOR COVERING(S)-cracked tiles at upper right hall
 Some unlevel areas noted at upper floor.

G. Doors (Interior and Exterior)
Comments

INTERIOR DOOR OBSERVATIONS-upper hall closet door sticking in jamb.
 Upper rear right master bedroom door sticking in jamb.
 Doors not latching at utility room, at front left bedroom closet

EXTERIOR DOOR OBSERVATIONS- Moisture related deterioration is present in door(s) and/or related trim in the following area(s). --- rear door . Repair damage, reseal exterior and consider cover to protect from elements.
 Damaged door at garage observed
 Missing/damaged weatherstrip at front door.

H. Windows
Comments

OBSERVATIONS-Missing screens at upper floor windows.
 Several torn screens at lower floor windows.
 Note: new paint at interior lower windows.

I. Fireplace/Chimney
Comments

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Not Present

- J. Porches, Decks and Carports (Attached)
Comments

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 at right side.
 MAIN ELECTRICAL PANEL OBSERVATIONS-panel locked. No access to interior of panel.

SUB-PANEL COMMENTS: 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 located at upper hall closet.
 Heating System- The heating system operated correctly at the time of the inspection.

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

Cooling System- - Central, - Split System.
 Trane est 3 ton 2000 unit located at exterior.
 AIR TEMPERATURE DIFFERENTIAL- Temperature drop/differential observed

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between 15 - 20 degrees. (taken between interior return and supply air) This is considered a normal operating range.

EVAPORATOR OBSERVATIONS-debris and fungal type growth observed at interior blower unit in need of proper cleaning/removal

CONDENSER (EXTERIOR UNIT) OBSERVATIONS-replace insulation on refrigerant lines to unit.

-

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-seal all ducts at connections throughout attic, at supply plenum

Strap all ducts properly to remove excessive bends.

Electrical wiring was present in the return air duct work from water heater unit. This is not recommended.

IV. PLUMBING SYSTEM

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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.

-

B. Drains, Wastes, Vents
Comments:

DRAIN/WASTE & VENT PIPING TYPE- PVC plastic

SEWER PIPE OBSERVATIONS-signs of overflow at cleanout at front of house.

Drain cap missing at cleanout at front exterior.

-

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:

State 40 gallon 2001 unit located at upper hall closet.

No problems observed during this inspection period.

Rust observed in drain pan under unit from past moisture.

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D. Hydro Therapy Equipment
Comments:

Not Present

V. APPLIANCES

-

A. Dishwasher
Comments:

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Discharge hose is, **installed without an air gap.** The drain line should be raised to the underside of the counter top.

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

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No problems observed.

- | | | | | |
|-------------------------------------|--------------------------|-------------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | K. Dryer Vents
<i>Comments:</i>
<u>Vent cap is damaged.</u> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | L. Other Built-in Appliances
<i>Comments:</i>
Not Present |

VI. OPTIONAL SYSTEMS

- | | | | | |
|--------------------------|--------------------------|-------------------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | A. Lawn Sprinklers
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | B. Swimming Pools and Equipment
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | C. Outbuildings
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | D. Outdoor Cooking Equipment
<i>Energy Source:</i>
<i>Comments:</i>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | E. Gas Lines
<i>Comments:</i>
Not Present |
| <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>
Not Present |
| <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | G. Septic Systems
<i>Comments:</i> |

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Not Present

H. **Security Systems**
Comments:

security testing is not part of this inspection

I. **Fire Protection Equipment**
Comments:

Not Present