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PROPERTY INSPECTION REPORT

Prepared For: SAHA. _____
(Name of Client)

Concerning: 452 Precious. _____ San Antonio, TX.
(Address or Other Identification of Inspected Property)

By: John Van De Walle. 6035. 06/11/07.
(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 visible and present 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 meet their needs and to obtain current information concerning this property.

ADDITIONAL INFORMATION PROVIDED BY INSPECTOR

Report Number: 20070638. _____

Fax Number: _____

Fax Number: _____

Date of Inspection: 06/11/07. _____

Time of Inspection: _____

Client Mailing Address: _____

City/State/Zip: _____

SPECIAL NOTES: Reinspection Done - 3/11/08

Additional pages may be attached to this report. Read them very carefully. This report may not be complete without the attachment. 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
I	NI	NP	R

I. STRUCTURAL SYSTEMS

- A. Foundations** (If all crawl space areas are not inspected, provide and explanation.)
Comments (An opinion on performance is mandatory.):
 Foundation Type- Concrete slab on grade.
 Foundation appears to be functioning normally.

- B. Grading and Drainage**
Comments
 Home is built on a slightly sloped lot. Grade at foundation appears adequate. Repaired

- 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.
 Approximate age of this roof covering is believed between 5 to 10 years old.
 OBSERVATIONS-starter strip around perimeter edge of roof improperly installed, not sealed down as per manufacturer instructions. Not repaired
 Roof covering observed showing normal wear for age.
 GUTTER DAMAGE/DEFECTS NOTED-Missing bottom elbow on gutter downspout at front center. Repaired
 Debris in gutter needs removal to restore good drainage. Debris may have restricted full viewing at some areas. Repaired

- D. Roof Structure and Attic** (If the attic is inaccessible, report the method used to inspect.)
Comments
 ACCESS METHOD/LIMITATIONS- Full access
 OBSERVATIONS- Truss framing
 Ventilation blocked/minimal at upper vents in attic. Trim decking under vents for full air flow. Not Repaired
 INSULATION OBSERVATIONS- Blown type insulation (either fiberglass or rock wool) insulation observed
 As per tag in attic, minimum insulation should be 9.6" for R30 value.
 Only 5" of insulation present at front attic, at center attic, at rear attic areas.
 Only 6" of insulation present at left attic, at right attic. Add properly throughout. Repaired

- E. Walls (Interior and Exterior)**
Comments
 INTERIOR WALLS- INTERIOR WALLS ARE A COMBINATION OF THE FOLLOWING MATERIALS- Drywall,
 OBSERVATIONS- bowed drywall at washer in utility area Repaired
 Fungal type staining observed at air handler closet walls at interior in need of proper removal
Repaired

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EXTERIOR WALLS- Concrete fiber plank type siding. Wood trim(s) and overhangs (soffits).
 OBSERVATIONS-seal penetrations to exterior at right faucet to wall. Repaired
 Hardie siding bowed in, uneven at left of house. Repaired
 Soil installed too high to siding at all sides of house. Lower at least 6" below base of siding. Repaired

F. Ceillings and Floors
Comments

Cracking on ceiling at hall bath door.

G. Doors (Interior and Exterior)
Comments

INTERIOR DOORS- No problems observed during this inspection period.
 EXTERIOR DOORS- No problems observed at this time.
 note: left exterior door exposed to elements.

H. Windows
Comments

No problems observed at this time.

I. Fireplace/Chimney
Comments

J. Porches, Decks and Carprts (Attached)
Comments

PORCH/DECKS-wood improperly in contact with concrete at front porch base of posts. This increases risk of damage at these areas.

K. Other
Comments

II. ELECTRICAL SYSTEMS

A. Service Entrance and Panels
Comments:

SERVICE- Underground, 110/220 Volt, Aluminum (220 volt OK)
 FEEDERS- Copper, Aluminum (220 volt OK)
 Main panel located at left exterior.

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

Comments:
 PREDOMINANT OVERLOAD PROTECTION DEVICES- Circuit breakers are provided
 VISIBLE WIRING TYPE- Copper

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SUB PANEL OBSERVATIONS- Circuit and wire sizing correct so far as visible
 SWITCH/OUTLET OBSERVATIONS- No significant problems were noted during the course of the inspection.
 DEVICE/FIXTURE OBSERVATIONS- unbalanced ceiling fan at master bedroom.

III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS

- A. Heating Equipment**
Type and Energy Source: Electric - Forced air type heat pump system.
Comments: Unit located at hall closet.
 Unit was operated in emergency heat mode, heat pump mode at time of inspection.
 Unit was functional at time of inspection.
 New unit installed at hall closet. Appears functional.

- B. Cooling Equipment:**
Type and Energy Source: Central, "Split System" -Electric.
Comments: Trane est 2 1/2 ton unit located at rear exterior.
 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.
 CONDENSER (EXTERIOR UNIT) OBSERVATIONS-exterior coils in need of cleaning/servicing.
 EVAPORATOR OBSERVATIONS-interior blower and coils in need of cleaning/servicing.
 American standard est 2.1/2ton 2007 unit installed and is functional. Change breaker from 30 amps to 20 amps on exterior unit as per manufacturer.

- C. Ducts and Vents**
Comments: DUCTWORK TYPE- Fiberglass duct board and/or flexible type ducts were primarily used for distribution/return system throughout.
 OBSERVATIONS-all joints of ducts in attic should be sealed
 FILTER OBSERVATIONS- Filters are dirty and need cleaning or changing.
 Ducts in attic have been replaced and sealed at connections.

IV. PLUMBING SYSTEM

- A. Water Supply System and Fixtures**
Comments:
 SUPPLY PIPING TYPE- Copper, Municipal service is primary water source.
 OBSERVATIONS- Appears serviceable
 SINK OBSERVATIONS-hall bath sink leaking at drainline connection in cabinet
 TOILET OBSERVATIONS- No problems observed during this inspection period
 TUB/SHOWER OBSERVATIONS-hall bath slow drain at tub.
 Master bath slow drain at tub.

- B. Drains, Wastes, Vents**
Comments:
 DRAIN/WASTE & VENT PIPING TYPE- PVC plastic

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OBSERVATIONS- No problems observed during this inspection period.

- C. Water Heating Equipment** (Report as in need of repair those conditions specifically listed as recognized hazards by TREC rules.)
Energy Source: -Electrically operated.
Comments:
 State 40 gallon 2000 unit located at hall closet.
 No problems observed during this inspection period.
New unit installed in garage, functional at reinspection.

- D. Hydro-Therapy Equipment**
Comments:

V. APPLIANCES

- A. Dishwasher**
Comments:
 No problems observed during limited test run of appliance.
- 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:
 Range/Oven is electric.
 Front right burner on cooktop not functional.
 No significant problems noted at this time and date with operation of oven.
- E. Microwave Cooking Equipment**
Comments:
- F. Trash Compactor**
Comments:
- G. Bathroom Exhaust Fans and/or Heaters**
Comments:
 No problems observed during limited test run of appliance.
- H. Whole House Vacuum Systems**
Comments:

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I. **Garage Door Operators**
Comments:

J. **Door Bell and Chimes**
Comments:
 No problems observed.

K. **Dryer Vents**
Comments:
 No problems noted.

L. **Other Built-in Appliances**
Comments:

VI. OPTIONAL SYSTEMS

A. **Lawn Sprinklers**
Comments:

B. **Swimming Pools and Equipment**
Comments:

C. **Outbuildings**
Comments:

D. **Outdoor Cooking Equipment**
Energy Source:
Comments:

E. **Gas Lines**
Comments:

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

G. Septic Systems
Comments:

H. Security Systems
Comments:
security system is not part of this inspection.

I. Fire Protection Equipment
Comments:
fire sprinkler system not present.