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PROPERTY INSPECTION REPORT

Prepared For: SAHA
(Name of Client)

Concerning: 455 Precious San Antonio, TX 78237
(Address or Other Identification of Inspected Property)

By: Jon Krauss 4255 02/28/08
(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: 20080242070 Phone Number: _____
Date of Inspection: 02/28/08 Fax Number: _____
Time of Inspection: _____
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**

I	NI	NP	R	Inspection Item

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

☑ ☐ ☐ ☐ **B. Grading and Drainage**
Comments

Structure is on a slightly sloped lot. Grade at foundation appears adequate at time of inspection
Dry soil conditions observed on exterior at left, at rear, at front of house. Regular watering should be done to prevent added stress to structure.

☑ ☐ ☐ ☑ **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.
Seal all exposed fasteners at ridge caps, flashings on roof.
Rear of house roof one shingle trimmed back at diverter flashing.
Add, extend proper kickout type flashing extension at edge of roof to siding front corner.

☑ ☐ ☐ ☑ **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
Trim out under upper roof vents for adequate air flow
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 7 inches thick.
Add insulation throughout to 9.6" minimum for R30 value.

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☑	☐	☐	☑	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 base of trim at corners, around perimeter of house. Brick ledge at front of house has inadequate slope toward house , instead of away from structure. Deteriorated wood trim at right breakfast area Seal gaps at fascia around house Hole at rear right exterior wall.
☑	☐	☐	☐	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- master closet 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. Springs disconnected from overhead garage door, not functional.
☑	☐	☐	☑	H.	**Windows** *Comments* OBSERVATIONS-Missing screens at 1 master windows, two breakfast, two living area. No visible flashing over rear master window Seal exterior trim at left windows note: one master window has been changed to single pane glass
☐	☐	☑	☐	I.	**Fireplace/Chimney** *Comments* **Not Present**

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☑	☐	☐	☐	J.	**Porches, Decks and Carports (Attached)** *Comments* PORCH OBSERVATIONS- No problems observed during inspection period.
☐	☐	☑	☐	K.	**Other** *Comments* **Not Present**

II. ELECTRICAL SYSTEMS

I	NI	NP	R		Inspection Item
☑	☐	☐	☑	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. Conduit pulled loose from meter, in need of repairs. 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- LIGHTING & CEILING FAN DEFICIENCIES- missing two outlet covers at front bedroom light not functional at front exterior, at interior garage, at interior front entry

III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS

I	NI	NP	R		Inspection Item
☑	☐	☐	☑	A.	**Heating Equipment #1:** *Type/Energy Source:* System Type- Electric Forced Air Heat Pump. *Comments:* Unit is located in, closet Heating System- piping cut at exterior, system not functional
☑	☐	☐	☑	B.	**Cooling Equipment #1:** *Type/Energy Source:* *Comments:*

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Electric.

Est. Size: 2 1/2 ton
Cooling System- - Central, - Split System.
CONDENSER (EXTERIOR UNIT) OBSERVATIONS-lines cut on exterior to unit, not functional
Extend condensate drainline away from foundation on exterior
Replace insulation on exterior lines to unit.
Unit out of level on exterior, in need of repairs.

☑ ☐ ☐ ☑ **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 duct connections throughout attic.
Electrical wiring was present in the return air duct work from water heater.

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.
EXTERIOR PLUMBING- No anti-siphon protection observed on one right exterior hose bibs/faucets. This is a basic safety attachment to the end of faucets that will protect from a cross connection or back-flow of water into the house.

☑ ☐ ☐ ☑ **Bathroom #1** HALL BATHROOM:

LAVATORY- missing aerator at faucet
Missing stopper
TOILET PLUMBING- Tank loose from bowl, in need of repairs
TUB/SHOWER PLUMBING- missing stopper at tub
Valve reversed hot/cold at fixture

☑ ☐ ☐ ☑ **Bathroom #2** MASTER BATHROOM:

LAVATORY- No problems observed during this inspection period.
TOILET PLUMBING- Water closet fill valve leaking in tank when flushed. Repair/replace valve.
TUB/SHOWER PLUMBING- stopper disconnected at tub.

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☑	☐	☐	☐	B.	**Drains, Wastes, Vents** *Comments:* DRAIN/WASTE & VENT PIPING TYPE- PVC plastic SEWER PIPE OBSERVATIONS- No problems observed during this inspection period.
☐	☐	☐	☐		**Bathroom #1** HALL BATHROOM:
☐	☐	☐	☐		**Bathroom #2** MASTER BATHROOM:
☑	☐	☐	☐	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. No problems observed during this inspection period.
☐	☐	☑	☐	D.	**Hydro Therapy Equipment** *Comments:* **Not Present**

V. APPLIANCES

☑	☐	☐	☐	A.	**Dishwasher** *Comments:* No problems observed during limited test run of appliance.
☑	☐	☐	☑	B.	**Food Waste Disposer** *Comments:* Deficiencies- Unit failed to operate.
☑	☐	☐	☐	C.	**Range Hood** *Comments:* No problems observed during limited test run of appliance.
☐	☐	☑	☐	D.	**Ranges/Ovens/Cooktops** *Comments:* **Not Present**
☐	☐	☑	☐	E.	**Microwave Cooking Equipment** *Comments:*

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					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:*
					No problems observed.
☑	☐	☐	☑	K.	**Dryer Vents** *Comments:*
					Vent cap is damaged.
☐	☐	☑	☐	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:*

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					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:*
					Not Present
☐	☑	☐	☐	H.	**Security Systems** *Comments:*
					security testing is not part of this inspection
☐	☐	☑	☐	I.	**Fire Protection Equipment** *Comments:*
					Not Present