



REINSPECTION

AmeriSpec  
mgessner@amerispec.net  
www.amerispec.net/gessner  
(210) 344-1344 S.A.  
(713) 923-2133 Houston  
(512) 804-2637 Austin  
(888) 390-5692 Toll Free

# PROPERTY INSPECTION REPORT

Prepared For: SAHA. \_\_\_\_\_  
 \_\_\_\_\_ (Name of Client)

Concerning: 475 Precious. \_\_\_\_\_  
 \_\_\_\_\_ San Antonio, TX.  
 \_\_\_\_\_ (Address or Other Identification of Inspected Property)

By: Jon Bueche. 7223. 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: 20060738447. \_\_\_\_\_

Fax Number: \_\_\_\_\_

Date of Inspection: 06/11/07. \_\_\_\_\_

Fax Number: \_\_\_\_\_

Time of Inspection: 6:30pm. \_\_\_\_\_

Client Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

SPECIAL NOTES: REINSPECTION PERFORMED 4-5-08.

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**

- |                                     |                          |                          |                                     |  |  |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |  | <p><b>A. Foundations</b> (If all crawl space areas are not inspected, provide and explanation.)<br/> <i>Comments</i> (An opinion on performance is mandatory.):<br/>                     Foundation Type- Concrete slab on grade.<br/>                     OBSERVATIONS- Minor signs of past settlement observed in the form of hair line type fracture cracks to finish surfaces at interior garage floor area.<br/>                     Excessive slope of flooring observed at interior family room measured at 2 1/2" in 10'.<br/>                     Recommend engineer for review and repair recommendations.</p> |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
  
- |                                     |                          |                          |                                     |  |  |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |  | <p><b>B. Grading and Drainage</b><br/> <i>Comments</i><br/>                     Home is built on a slightly sloped lot. Grade at foundation appears inadequate at left of front porch. Add, adjust soil at this area to properly slope away from foundation, to prevent water accumulation and possible stress to structure.</p> |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
  
- |                                     |                          |                          |                                     |  |  |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |  | <p><b>C. Roof Covering</b> (If the roof is inaccessible, report the method used to inspect.)<br/> <i>Comments</i><br/>                     METHOD USED TO INSPECT ROOF- The following was observed upon walking on the roof at lower roof.<br/>                     Upper roof observed from eaves and ground.<br/>                     DESCRIPTION OF MATERIALS- Composition and/or fiberglass shingles. Note: Average life expectancy under normal installation/conditions is between 10 -14 years.<br/>                     Approximate age of this roof covering is believed between 5 to 10 years old.<br/>                     OBSERVATIONS- Roof covering observed showing normal wear for age.<br/>                     Missing flashing extension at front porch left side at joint of roof to siding. NOT REPAIRED 4-5-08.</p> |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
  
- |                                     |                          |                          |                                     |  |   |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |  | <p><b>D. Roof Structure and Attic</b> (If the attic is inaccessible, report the method used to inspect.)<br/> <i>Comments</i><br/>                     ACCESS METHOD/LIMITATIONS- Full access<br/>                     OBSERVATIONS- Truss framing<br/>                     Truss damaged at front of attic access area, in need of repairs<br/>                     INSULATION OBSERVATIONS- Blown type insulation (either fiberglass or rock wool) insulation observed between 9 -10 inches. (around hatchway/access)</p> |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|---|
  
- |                                     |                          |                          |                                     |  |  |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |  | <p><b>E. Walls (Interior and Exterior)</b><br/> <i>Comments</i><br/>                     INTERIOR WALLS- INTERIOR WALLS ARE A COMBINATION OF THE FOLLOWING MATERIALS- Drywall<br/>                     OBSERVATIONS- paint and texture peeling at hall bath tub area. Drywall does not appear to be proper moisture resistant type. REPAIRED 4-5-08.<br/>                     EXTERIOR WALLS- EXTERIOR WALLS ARE A COMBINATION OF THE FOLLOWING MATERIALS- Brick and/or block (stone) veneer over wood framing.<br/>                     Cement based plank type siding.</p> |
|-------------------------------------|--------------------------|--------------------------|-------------------------------------|--|--|

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

Wood trim(s) and vinyl overhangs (soffits).  
 OBSERVATIONS-soil installed too high at base of siding at rear of house, at left side of house. Lower properly at least 6" below base of siding and maintain proper slope away from foundation.  
 Deteriorated wood at rear door trim. REPAIRED 4-5-08.  
 Missing flashings at base of 1x12 trim to hardie siding at front of house.

**F. Ceillings and Floors**  
*Comments*

Old patching at family room ceiling.

**G. Doors (Interior and Exterior)**  
*Comments*

INTERIOR DOORS- No problems observed during this inspection period.  
 EXTERIOR DOORS-rear door gap in weatherstrip, not fully sealed when closed.  
 REPAIRED 4-5-08.

**H. Windows**  
*Comments*

Water staining at window sills, drywall areas in family room, REPAIRED 4-5-08.at upper center bedroom, at left bedroom. Appears to have been some leakage from exterior.REPAIRED 4-5-08.  
 Water marks, fungal type staining at upper right front bedroom window sill. REPAIRED 4-5-08.

**I. Fireplace/Chimney**  
*Comments*

**J. Porches, Decks and Carprts (Attached)**  
*Comments*

PORCH/DECKS- No problems observed during inspection period.

**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 exterior  
 Conduit pulled loose at base of meter on exterior, wiring exposed. REPAIRED 4-5-08.

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

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p><b>B. Branch Circuits - Connected Devices and Fixtures</b> (Report as in need of repair the lack of ground fault circuit protection where required.):</p> <p><i>Comments:</i>                  PREDOMINANT OVERLOAD PROTECTION DEVICES- Circuit breakers are provided                  VISIBLE WIRING TYPE- Copper                  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- No significant problems were noted during the course of the inspection.</p>
-------------------------------------	--------------------------	--------------------------	--------------------------	--

**III. HEATING, VENTILATION AND AIR CONDITIONING SYSTEMS**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p><b>A. Heating Equipment</b></p> <p><i>Type and Energy Source:</i> Electric - Forced air type heat pump system.</p> <p><i>Comments:</i> Unit located at upper hall closet.                  Unit was operated in emergency heat mode and heat pump mode at time of inspection.                  No problems observed during this inspection period with operation of unit.</p>
-------------------------------------	--------------------------	--------------------------	--------------------------	--

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p><b>B. Cooling Equipment:</b></p> <p><i>Type and Energy Source:</i> Central, "Split System" -Electric.</p> <p><i>Comments:</i> Trane est 3 1/2 ton 2000 unit located at exterior rear                  AIR TEMPERATURE DIFFERENTIAL- Temperature drop/differential observed to be over 20 degrees. This may indicate a dirty evaporator coils, dirty air filter, or air flow restriction. Contact a licensed service company for further evaluation and/or cleaning. NO ELECTRICITY ON 4-5-08 WAS UNABLE TO INSPECT.                  EVAPORATOR OBSERVATIONS-interior blower and coils in need of cleaning/servicing.</p>
-------------------------------------	--------------------------	--------------------------	-------------------------------------	--

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p><b>C. Ducts and Vents</b></p> <p><i>Comments:</i> DUCTWORK TYPE- Fiberglass duct board and/or flexible type ducts were primarily used for distribution/return system throughout.                  OBSERVATIONS-seal all connections of ducts in attic for system. REPAIRED 4-5-08.                  FILTER OBSERVATIONS- Filters are dirty and need cleaning or changing. REPAIRED 4-5-08.</p>
-------------------------------------	--------------------------	--------------------------	-------------------------------------	---

**IV. PLUMBING SYSTEM**

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<p><b>A. Water Supply System and Fixtures</b></p> <p><i>Comments:</i>                  SUPPLY PIPING TYPE- Copper, Municipal service is primary water source.                  OBSERVATIONS-water pressure to house excessive at 95 psi. Recommend plumber for</p>
-------------------------------------	--------------------------	--------------------------	-------------------------------------	--

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

repairs.  
 SINK OBSERVATIONS- No problems observed during this inspection period  
 TOILET OBSERVATIONS- No problems observed during this inspection period  
 TUB/SHOWER OBSERVATIONS-upper master bath dripping at spout constantly in need of repair  
 Upper master bath low flow at shower head.REPAIRED 4-5-08.  
 Upper hall bath restricted flow at tub and sink fixtures in need of repairs. REPAIRED 4-5-08.  
 EXTERIOR FAUCETS-leaking at valve handle at front left hose bibb.

**B. Drains, Wastes, Vents**  
*Comments:*

DRAIN/WASTE & VENT PIPING TYPE- PVC plastic  
 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 upper hall closet.  
 No problems observed during this inspection period with operation of unit.

**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.  
 No significant problems noted at this time and date.

**E. Microwave Cooking Equipment**  
*Comments:*

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

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:*

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:*

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

C. **Outbuildings**  
*Comments:*

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

E. **Gas Lines**  
*Comments:*

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 inspection is outside the scope of this inspection.

I. **Fire Protection Equipment**  
*Comments:*  
 no fire sprinkler system present.