

CABIN BRANCH FOREST ASSOCIATION, INC.

P.O. Box 54. Sterling, VA 20167

Home Inspection Checklist

Inspection Date _____

	<u>Corrected/Date</u>
ADDRESS: _____	
Gutters: CLEAN OUTSIDE <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> REMOVE DEBRIS INSIDE GUTTERS	<input type="checkbox"/> _____
REPAIR GUTTER _____ <input type="checkbox"/> FRONT <input type="checkbox"/> REAR	<input type="checkbox"/> _____
Siding: MISSING/REPAIR SIDING <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
POWER WASH SIDING <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
Wood Rot:	
REPLACE ROTTEN WOOD AND REPAINT USING APPROVED COLOR IN THE FOLLOWING AREAS:	
_____	<input type="checkbox"/> _____
_____	<input type="checkbox"/> _____
Landscaping:	
REPLACE MISSING/DEAD SHRUBS <input type="checkbox"/> FRONT	<input type="checkbox"/> _____
TRIM SHRUBS <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE	<input type="checkbox"/> _____
REMOVE WEEDS <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE	<input type="checkbox"/> _____
DEFINE BED EDGES <input type="checkbox"/> REPAIR BED BORDERS or EDGING <input type="checkbox"/>	<input type="checkbox"/> _____
Trees: REMOVE VOLUNTEER TREE OR SHRUB <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE	<input type="checkbox"/> _____
PRUNE TREE <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
REMOVE DEAD/DISEASED TREE/ STUMP <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
Lawn: ESTABLISH GRASS <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
APPLY WEED CONTROL TO YARD <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
RETURN AREA TO GRASS _____ (NOT BEING MAINTAINED)	<input type="checkbox"/> _____
Paint: WINDOWS & TRIM <input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> SIDE	<input type="checkbox"/> _____
SHUTTERS <input type="checkbox"/> FRONT	<input type="checkbox"/> _____
FRONT DOOR <input type="checkbox"/> FRONT DOOR TRIM <input type="checkbox"/>	<input type="checkbox"/> _____
STORM DOOR <input type="checkbox"/>	<input type="checkbox"/> _____
GUTTER BOARD <input type="checkbox"/> FRONT <input type="checkbox"/> REAR FACIA/SOFFITT <input type="checkbox"/> FRONT <input type="checkbox"/> REAR	<input type="checkbox"/> _____
RAKE TRIM <input type="checkbox"/> FR <input type="checkbox"/> FL <input type="checkbox"/> RR <input type="checkbox"/> RL	<input type="checkbox"/> _____
CORNER BOARD <input type="checkbox"/> FR <input type="checkbox"/> FL <input type="checkbox"/> RR <input type="checkbox"/> RL	<input type="checkbox"/> _____
CORRECT WRONG COLOR TRIM <input type="checkbox"/> FRONT <input type="checkbox"/> SIDE <input type="checkbox"/> REAR	<input type="checkbox"/> _____
PAINT ALL WOOD TRIM ON HOUSE <input type="checkbox"/> (use approved color for this unit)	<input type="checkbox"/> _____
PAINT FRONT RAILING <input type="checkbox"/> REPLACE RAILING <input type="checkbox"/>	<input type="checkbox"/> _____
REPAINT GARAGE DOOR <input type="checkbox"/>	<input type="checkbox"/> _____
OTHER _____	<input type="checkbox"/> _____
Doors: REPLACE FRONT DOOR & PAINT <input type="checkbox"/> - must submit application if other than current style	<input type="checkbox"/> _____
REPLACE STORM DOOR <input type="checkbox"/> (MUST BE APPROVED STYLE)	<input type="checkbox"/> _____
REPAIR GARAGE DOOR <input type="checkbox"/>	<input type="checkbox"/> _____
Fence: REPLACE FENCE <input type="checkbox"/> REAR PANEL <input type="checkbox"/> LEFT SIDE PANEL <input type="checkbox"/> RIGHT SIDE PANEL	<input type="checkbox"/> _____
REPLACE MISSING BOARDS <input type="checkbox"/> REPLACE WARPED FENCE BOARDS <input type="checkbox"/>	<input type="checkbox"/> _____
REPAIR GATE <input type="checkbox"/> RESECURE FENCE BOARDS <input type="checkbox"/> REPLACE CAP BOARDS <input type="checkbox"/>	<input type="checkbox"/> _____
POWER WASH <input type="checkbox"/> REMOVE WIRE FENCING <input type="checkbox"/>	<input type="checkbox"/> _____
Decks: REPAIR SPINDLES <input type="checkbox"/> REPAIR STAIRCASE <input type="checkbox"/> REPAIR SCREENING <input type="checkbox"/>	<input type="checkbox"/> _____
POWER WASH <input type="checkbox"/> REMOVE UNAPPROVED PAINT/STAIN <input type="checkbox"/>	<input type="checkbox"/> _____
Rear Yard: CLEAN UP REAR YARD <input type="checkbox"/> REMOVE DEBRIS <input type="checkbox"/> OTHER <input type="checkbox"/>	<input type="checkbox"/> _____

Roof: CLEAN <input type="checkbox"/> REPAIR <input type="checkbox"/> REPLACE <input type="checkbox"/>	<input type="checkbox"/> _____
Satellite Dish: REMOVE UNUSED DISH <input type="checkbox"/> RELOCATE DISH <input type="checkbox"/> CONCEAL CABLING <input type="checkbox"/>	<input type="checkbox"/> _____
House Numbers: MISSING <input type="checkbox"/>	<input type="checkbox"/> _____
Driveway & Walks: REPAIR CRACKS <input type="checkbox"/> RESEAL <input type="checkbox"/> REPLACE <input type="checkbox"/>	<input type="checkbox"/> _____
Mailbox: REPAIR/REPLACE <input type="checkbox"/> _____	<input type="checkbox"/> _____
Notes:	

Inspection completed by: _____ & _____