

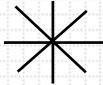
INSURED _____ DATE / TIME _____ Present at Inspection CR and Mr. Ms. Contractor, Other _____

SHINGLE
20yr 25yr 30yr 35yr 40yr
Comp. 3 -tab
Architectural
Other _____
AGE _____
Known/ By appearance
LAYERS 1 2 3 wood?
Drip edge YES NO
DBL PULL Y N
STEEP >7:12 Y N

copyright protected © 2000 Version 4.3 V= vent S/L= skylight XXXXX = damaged gutter DS = downspout
 Visit www.CustomToolBelt.com B= boot C = chimney = test square hits W= wind dmg

NORTH

Circle north



VENTS- damaged items
Turtle _____ # Turbine _____ #
metal
Ridge _____ I.f shingle - over
Flue cap _____ # _____ #
small large
FLASHING damaged items
Valley _____ I.f Step _____ I.f.
Chimney _____ I.f Boot _____ #

Gutter LF

Downspout LF

Damage assessment- Shingle - repairable/non repairable Replace by slope Roof minimum repair Total

ROOFING

Elevation

North
 South
 East
 West

Front
 Right

North
 South
 East
 West

Front
 Right

INTERIOR

Damage occurred at wall ceiling both
Materials; drywall, plaster, wood, other
Flooring carpet, tile, ceramic, wood,
other

Paint -wall ceiling different color? Y N
Ceiling - smooth, texture, popcorn, glitter
Drywall PATCH or R/R _____ s.f.
Insulation Wall _____ s.f. Ceiling _____ s.f.
Trim is it? Stain/finish or Prime/paint
Crown D/R _____ l.f. R/R _____ l.f.
Case D/R _____ l.f. R/R _____ l.f.
Base D/R _____ l.f. R/R _____ l.f.
Wallpaper LW__ SW__ ALL__ w/2__
Wallpaper border PC or _____ l.f.

Notes:

Paneling LW__ SW__ ALL__ w/2__
Notes:

Paint W C WC SW__ LW__
W/2
Seal _____ s.f. Paint 1 _____ s.f. Paint
2 _____ s.f.
Paint Door _____ Window _____
Opening _____
Contents Small Average Large

ROOM _____ FLOOR _____

SIZE _____ X _____ X _____

OFFSET _____ X _____ X _____

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OFFSET _____ X _____ X _____

