ReloOlogy Inspection Management Services, LLC
501 Cambria Avenue
Bensalem, PA 19020
215.604.1580

Home Inspection - MCI



Inspection Date: 7/9/2026

Inspection Completed for:
Graebel Companies - CO
(770) 325-4790
16346 Airport Circle
Aurora, CO 80011
APROA660834

Transferee / Property Information:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Worldwide ERC® Relocation Property Assessment

IMPORTANT INFORMATION: Please Read Carefully

This document is a Property Assessment. It is not a buyer's home inspection.

This document should not be used in place of nor be mistaken for a general home inspection or specialty type inspection performed by a licensed or trades professional (e.g., professional home inspector, engineer, pest control operator, electrician, plumber, roofer or HVAC specialist, pool/spa specialist, etc.). This Property Assessment was prepared exclusively and for the sole use of the Client identified below (the "Client") under an established business-to-business relationship for the specific purposes of assisting with the relocation of an employee. It is not intended for use, nor is it to be relied upon, by any party other than the Client, including, but not limited to, buyers, sellers, lenders, real estate brokers/agents, and/or appraisers.

The Client may be required to provide this Property Assessment to other parties in order to comply with disclosure obligations under applicable federal, state and/or local law(s); however, no disclosure of this Property Assessment to other parties, including prospective buyers, shall be deemed to create or give rise to a duty of care or performance on the part of the Property Assessment Provider identified below or the Client toward such other parties. Accordingly, no party other than the Client may rely upon or be influenced by this Property Assessment when considering the property. The Property Assessment Provider prepared this Property Assessment in accordance with Client directives and based it on findings gathered at the property address identified below and other property information sources.

1. GENERAL INFORMATION

File #: APROA660834 Client: Graebel Companies - CO

Contact: Louise Bartosak Phone: Confidential Information Fax: Confidential Information

E-mail Address: louise.bartosak@graebel.com

Client Address: 2009 Paris Ln

City/State/Postal Code: Cottage Grove, WI 53527

Transferee(s): Shane Sipiorski

Transferee Property Address: 2009 Paris Ln

City/State/Postal Code: Cottage Grove, WI 53527

Property Assessment Provider: ReloOlogy Inspection Management Services Job/File #: 123300

Provider Address: 501 Cambria Avenue

City/State/Postal Code: Bensalem, PA 19020

Contact: Amanda Higgins Phone: Fax:

E-mail Address: Amanda.Higgins@Reloology.com

Date: 7/9/2026 Time: 1:00 pm Weather: Clear Temp: 85° F Estimated Age of Main Dwelling (yrs): 2

Parties Present at Time of Assessment: Homeowner Occupied: ■ Yes ☐ No

Additions/Modifications: Yes Were Permits Obtained: Unknown Explain: Unknown

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2. PURPOSE AND SCOPE OF THE RELOCATION PROPERTY ASSESSMENT

To provide a professional opinion of a relocating employee's main dwelling and its immediate surrounding area in its "as is" condition, as of the date of assessment, limited to the definitions and guidelines as established by the Client and within this Property Assessment document.

3. OBJECTIVE OF THE RELOCATION PROPERTY ASSESSMENT

To provide the Client with data about a relocating employee's main dwelling and its immediate surrounding area, based on a visual assessment of items identified by category in this Property Assessment document.

4. DEFINITION OF THE RELOCATION PROPERTY ASSESSMENT

A visual, non-invasive evaluation and status of the items identified by category on the ensuing pages. The reporting of apparent defects (not cosmetic deficiencies) that call for corrective action is limited to three categories: 1) structure; 2) unsafe or hazardous conditions; and 3) inoperative systems or appliances.

1. Structure: A load-bearing member of a building (including, but not limited to, footings, foundation walls, posts, beams, floor joists, bearing walls, or roof framings) is to be reported as defective if it has one or more of these characteristics:

- Abnormal cracking or splitting;
- Unusual settlement;
- Deterioration such as rot or pest infestation damage;
- Improper alignment or structural integrity compromised by modification or abuse; or
- Other characteristics that affect the building's structural integrity.

2. Unsafe or Hazardous Conditions: Any item that is identified as a safety defect or a hazard, the presence or absence of which would be dangerous. Unless directed by the Client, the reporting of the possible presence of lead based paint, asbestos, ureaformaldehyde foam insulation, radon, electromagnetic radiation, toxic wastes, molds or fungus, and other environmental or indoor air pollutants are outside the scope of this Property Assessment.

3. Inoperative Systems and Appliances: Any installed systems or built-in appliances that do not operate properly or perform their intended function in response to normal use.

Unless directed by the Client, the following areas are outside the scope of this assessment: (i) cosmetic deficiencies; (ii) deferred maintenance items; (iii) the condition of on-site waste and water systems; (iv) the condition of underground fuel storage tanks; (v) the quality of the water supply; (vi) geological hazards such as floods, erosion, earthquakes, landslides, mudslides and volcanoes; and (vii) governmental or lender requirements. Furthermore, this Property Assessment is not a representation of compliance or noncompliance with federal, state, or local government regulations and codes (e.g., building codes, zoning ordinances, energy efficiency ratings, addition or remodeling permits, etc.).

Estimated costs to correct items identified in this Property Assessment as defective and/or items that may require attention are not bids and do not give rise to performance obligations on the part of the Property Assessment Provider. The Property Assessment Provider is not engaged in the business of providing repair; renovation or improvement services; as such, the Property Assessment Provider has not and cannot determine the actual cost of any repairs, renovations or improvements that may be advised or desired. The cost estimates reflect national, state and/or local cost averages as derived from the review of cost estimator manuals and other information sources by the Property Assessment Provider; all cost estimates should be followed by firm quotes or bids from qualified, reputable contractors.

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5. STATUS DEFINITIONS

For each category, when applicable, rate the status of each item by checking the box as follows:

Acceptable: The item is performing its intended function as of the date of the assessment.
Not Present: The item does not exist in the structure being assessed.
Not Assessed: The item was not assessed because of inaccessibility or seasonal impediments.
Defective: The item is either: structurally unsound; unsafe or hazardous; or inoperative, as defined in Section 4 above.

Please include comments in the corresponding "Remarks" column for those items rated as Defective or Not Assessed.

	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks
LOTS & GROUNDS (LG)						
1	☐	☐	☐	☐	Walks	
2	☐	☐	☐	☐	Stoops / Steps	
3	☐	☐	■	☐	Patio	
4	☐	■	☐	☐	Deck / Balcony	
5	☐	■	☐	☐	Porch	
6	☐	■	☐	☐	Retaining Walls	
7					SURFACE WATER CONTROL	
8	☐	☐	☐	☐	Grading	
9	☐	☐	■	☐	Swales	
10	☐	■	☐	☐	Basement Stairwell Drain	
11	■	☐	☐	☐	Window Wells	
12	☐	☐	■	☐	Exterior Surface Drain	

ROOF (R)						
1					METHOD OF ASSESSMENT: Walked	
2	■	☐	☐	☐	#1 **Asphalt Shingles**	Approx. Age: **2** Design Life: **0**
3	☐	■	☐	☐	#2	Approx. Age: Design Life:
4	☐	■	☐	☐	#3	Approx. Age: Design Life:
5	☐	■	☐	☐	#4	Approx. Age: Design Life:
6	☐	■	☐	☐	#5	Approx. Age: Design Life:
7	■	☐	☐	☐	Flashing	
8	☐	■	☐	☐	Skylights	
9	■	☐	☐	☐	Chimney	
10					ROOF WATER CONTROL	
11	■	☐	☐	☐	Gutters	
12	■	☐	☐	☐	Downspouts and Extensions	

EXTERIOR SURFACES (ES)					
1	■	☐	☐	☐	#1 Vinyl Siding
2	☐	☐	■	☐	#2 Manufactured Stone Veneer
3	☐	■	☐	☐	#3
4	☐	☐	■	☐	Trim
5	☐	☐	■	☐	Fascia
6	☐	☐	■	☐	Soffitts
7	■	☐	☐	☐	Windows

RELOCATION PROPERTY ASSESSMENT
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Buyer's Initials: _____ / _____

	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks
GARAGE/CARPORTS (G/C)						
1					■ Garage ☐ Carport ■ Attached ☐ Detached	
2	☐	☐	■	☐	Door Operation	
3	☐	☐	■	☐	Automatic Door Opener	
4	■	☐	☐	☐	Condition	
STRUCTURES (S)						
1	■	☐	☐	☐	Foundation: **Poured Concrete**	
2	■	☐	☐	☐	Beams	
3	■	☐	☐	☐	Bearing Walls	
4	■	☐	☐	☐	Joists / Trusses	
5	■	☐	☐	☐	Piers / Posts	
6	☐	☐	■	☐	Floor / Slab	
7	■	☐	☐	☐	Hand Rails	
ATTIC (A)						
1					METHOD OF ASSESSMENT: At Access	
2	■	☐	☐	☐	Roof Framing	
3	■	☐	☐	☐	Sheathing	
4	☐	☐	■	☐	Ventilation	
5	☐	■	☐	☐	Attic Fan	
6	☐	■	☐	☐	Whole House Fan	
3	Evidence of water penetration? ☐ Yes ■ No					

Client: Graebel Companies - CO Client File #: APROA660834

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	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks
BASEMENT (B)						
1	■	☐	☐	☐	Sump Pump	
2	☐	☐	■	☐	Floor	
3	☐	☐	■	☐	Heat	
4	Evidence of water penetration? ☐ Yes ■ No					
CRAWL SPACE (CS)						
1	☐	■	☐	☐	Moisture	
2	☐	■	☐	☐	Access	
3	Evidence of water penetration? ☐ Yes ☐ No					
ELECTRICAL (E)						
1	Amps: **200** Volts: **120/240**					
2	■	☐	☐	☐	Service Cable	
3	■	☐	☐	☐	Panel	
4	■	☐	☐	☐	Branch Circuits	
5	■	☐	☐	☐	Ground	
6	■	☐	☐	☐	Wire Conductor	
7	■	☐	☐	☐	GFI	
8	■	☐	☐	☐	Smoke Detector	
9	Electrical service adequately meets the needs of the dwelling? ■ Yes ☐ No					

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	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks	
HEATING SYSTEMS (HS)							
1	■	□	□	□	Primary: **Forced Air**	Approx. Age: **2**	Design Life: **0**
2	□	■	□	□	Additional:	Approx. Age:	Design Life:
3	□	□	□	□	Fuel(s): **Natural Gas**		
4	■	□	□	□	Primary Operation		
5	□	□	■	□	Additional Operation		
6	□	□	■	□	Draft Control		
7	■	□	□	□	Exhaust System		
8	■	□	□	□	Distribution		
9	■	□	□	□	Fuel Tank/Lines		
10	□	□	■	□	Thermostat		
11	■	□	□	□	Blower		
12	□	■	□	□	Humidifier		
13	□	□	■	□	Heat Exchanger		
14	□	■	□	□	Pressure Relief Valve(s)		
15	□	■	□	□	Circulator Pump		

AIR CONDITIONING SYSTEM (AC)				
1		Type: **Central**	Fuel: **Electric**	
		Approx. Age: **2**	Design Life: **0**	
1a	■	□	□	□	System #1 Operation		

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	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks
PLUMBING (P)						
1					Water Source: ■ Public ☐ Private ☐ Undetermined	How Verified?: **Locale**
2					Sewage Service: ■ Public ☐ Private ☐ Undetermined	How Verified?: **Locale**
3					Water Service On?: ■ Yes ☐ No	
4	■	☐	☐	☐	Water Pipes: **Copper**	
5	■	☐	☐	☐	Drain Pipes: **PVC**	
6	☐	☐	■	☐	Vent Pipes	
7	☐	■	☐	☐	Laundry Tub	
8	■	☐	☐	☐	Water Pressure	
9	■	☐	☐	☐	Toilet	
10	■	☐	☐	☐	Tub/Shower	
11	☐	☐	■	☐	Exhaust Fan	
12	☐	☐	■	☐	Sink	
13					WATER HEATER : Approx. Age: **2**	Design Life: **0**
14	■	☐	☐	☐	Water Heater	
15	■	☐	☐	☐	Exhaust System	
16	☐	☐	■	☐	Temperature/Pressure Relief Valve	
ON-SITE SEWAGE DISPOSAL (SD)						
1	☐	■	☐	☐	System Operation	
WELL (W)						
1					☐ Private ☐ Community	
2	☐	■	☐	☐	Pump	
3	☐	■	☐	☐	Shower Pressure (Top Floor)	
4					Water sample sent to the lab?: ☐ Yes ☐ No	
5					Is there minimum flow of 3 gallons per minute (gpm) after 30 minutes?: ☐ Yes ☐ No	

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	Acceptable	Not Present	Not Assessed	Defective	Item	See Summary for Remarks
POOL AND HOT TUB (P/T)						
1					Pool Type: **Not Present**	Hot Tub Type: **Not Present**
2	☐	■	☐	☐	Pool	
3	☐	■	☐	☐	Deck/Apron	
4	☐	■	☐	☐	Heater	
5	☐	■	☐	☐	Pump	
6	☐	■	☐	☐	Filter	
7	☐	■	☐	☐	Fence	
8	☐	■	☐	☐	Hot Tub	
FIREPLACE (F)						
1	■	☐	☐	☐	Fireplace	
2	☐	■	☐	☐	Free-standing Stove	
3	■	☐	☐	☐	Fireplace Insert	
4	☐	☐	■	☐	Flue	
KITCHEN (K)						
1	■	☐	☐	☐	Cooking Appliances	
2	☐	☐	■	☐	Disposal	
3	■	☐	☐	☐	Dishwasher	
4	■	☐	☐	☐	Ventilator	
5	☐	■	☐	☐	Other Built-ins:	
ADDITIONAL COMMENTS						
1	■	☐	☐	☐	Walls / Ceilings	
2	■	☐	☐	☐	Floors	
3	■	☐	☐	☐	Doors	
4	■	☐	☐	☐	Closets	
5	☐	■	☐	☐	Other	

FINAL COMMENTS

Were any other unsafe or hazardous conditions observed during the assessment that are not specifically designated on this Property Assessment document? ☐ Yes ■ No

The Property Assessment Provider identified below hereby certifies adherence to the terms of the assignment as set forth in the Definitions.

Property Assessment Provider Name (Please print or type): Amanda Higgins Date: 7/29/2026

Client: Graebel Companies - CO Client File #: APROA660834

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RELOCATION PROPERTY ASSESSMENT SUMMARY/COST ESTIMATE

Record on this summary page the corrective action(s) required for all items determined to be defective, including the estimated cost of repairs, and explain any items reported as "Not Assessed." As noted in Section 4 above, these estimates are not bids, nor intended to be used as such.

Section	Remarks
Exterior Surfaces	Type #2 Condition **Remarks:** Manufactured Stone Veneer (MSV) was observed at the front elevation. A general and visual inspection was performed only. This type of exterior surface requires regular maintenance and is sometimes associated with moisture intrusion problems. No visually accessible defects were observed at the time of the property assessment. However, Home Inspectors are not MSV specialists and are not responsible for identifying installation deficiencies that may not coincide with manufacturer specifications. A detailed and possibly somewhat invasive inspection (i.e. moisture probing) can be conducted by a specialist at the customer's request. Further evaluation is recommended. Contact a MSV specialist to evaluate the manufactured stone veneer installation.
Garage / Carports	Condition **Remarks:** Limited assessment of the garage due to storage (approximately 80% visible).
Structures	Foundation **Remarks:** Limited assessment of the structure due to partially finished basement / storage (approximately 70% visible).
Attic	Roof Framing **Remarks:** Limited assessment of the attic due to design (approximately 90% visible).
Heating Systems	Heat Exchanger **Remarks:** The heat exchanger was not assessed. This part of the unit can not be visually assessed without disassembly of the unit.
Plumbing	Water Pipes **Remarks:** Please note: A water softener was observed in the basement. It appeared to be functioning at the time of the property assessment; however, it is unknown if the unit is functioning properly as that determination is beyond the scope of a property assessment and/or general home inspection. Recommend contacting a water treatment system specialist to determine if the system is functioning properly.
Fireplace	Flue **Remarks:** Please Note: Only visual portions of the flue were assessed due to design.

Section	Remarks
Additional Comments	Other **Remarks:** Please note: The inspection and this report are provided solely for the purpose of evaluating the physical condition and/or functionality of the property and/or related systems or components at the time of inspection. This inspection does not determine, guarantee, or imply the insurability of the property or any of its components. Insurance companies may have their own underwriting requirements, risk assessments, or restrictions regarding certain materials, systems, or conditions, which are beyond the scope of this inspection. The inspector makes no representation as to whether the property will qualify for insurance coverage, the cost of such coverage, or the availability of coverage. Customers, buyers, etc. are advised to consult directly with their insurance provider regarding any concerns related to coverage, insurability, or policy limitations. Neither the inspector nor the inspection management company shall be held responsible for future insurability decisions made by insurance carriers or other third parties.

Transferee(s):	Shane Sipiorski
Transferee Property Address:	2009 Paris Ln
City/State/Postal Code:	Cottage Grove, WI 53527

*Estimated cost to correct items identified in this Property Assessment as defective and/or items that may require attention are NOT bids and do not give rise to performance obligations on the part of the ReloOlogy Inspection Management Services, LLC. Estimates are not provided in localities where prohibited.

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Attn: Louise Bartosak
Date Inspected: 7/9/2026

Transferee:
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2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****



Front Elevation



Rear Elevation



Left Elevation



Right Elevation

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Right Elevation



Roof



Roof



Roof

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Roof


Roof


Roof


Roof

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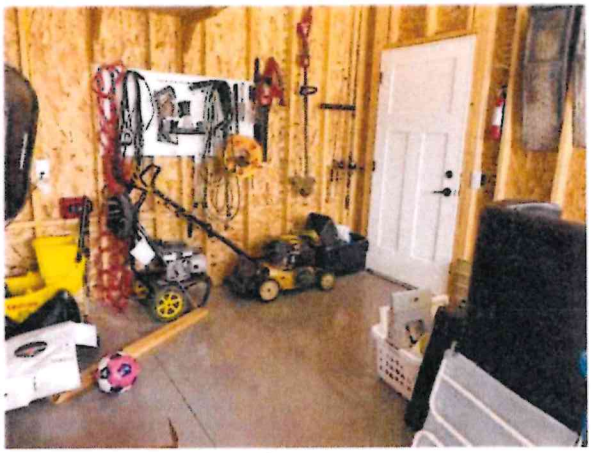
Roof



Chimney



Garage



Garage

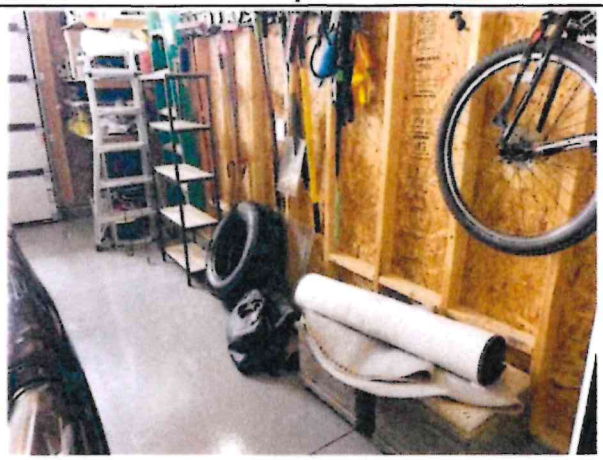
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Garage



Attic



Attic



Attic

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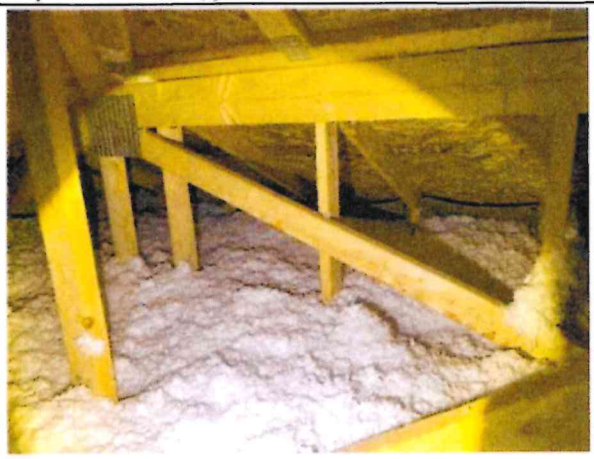
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Attic



Attic



Attic



Attic

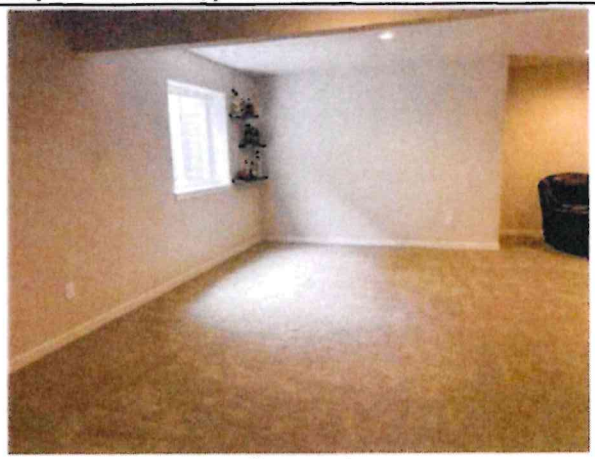
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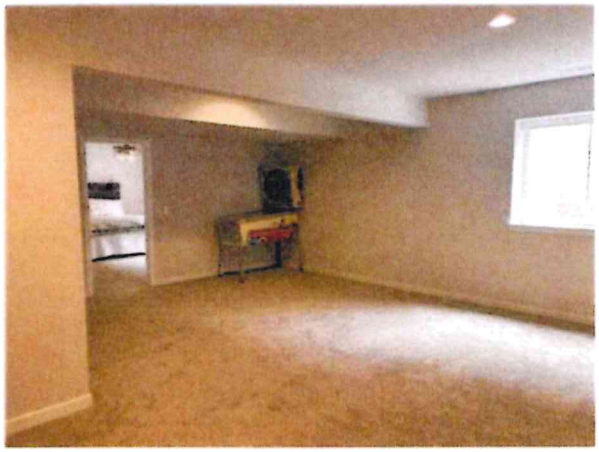
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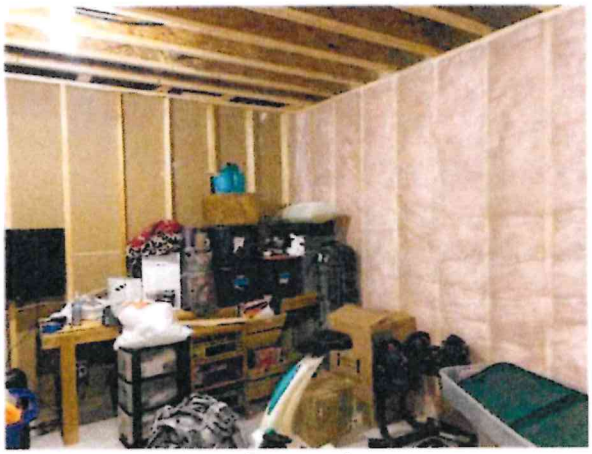
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Attic


Basement


Basement

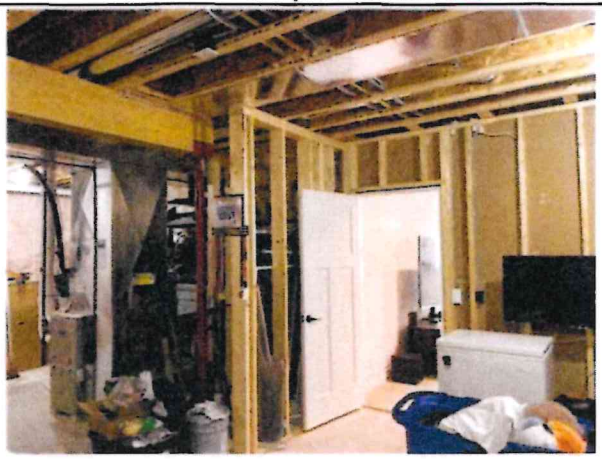

Basement

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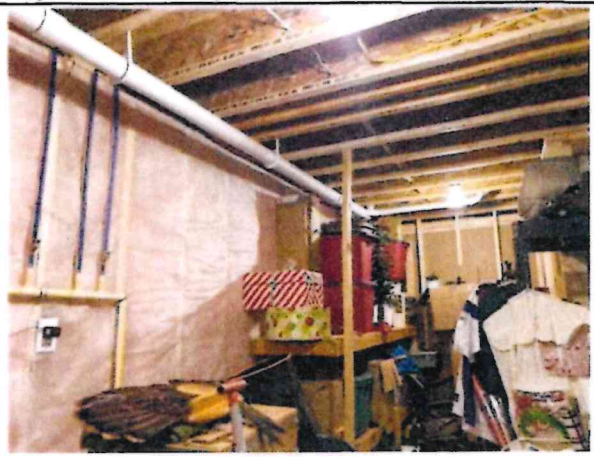
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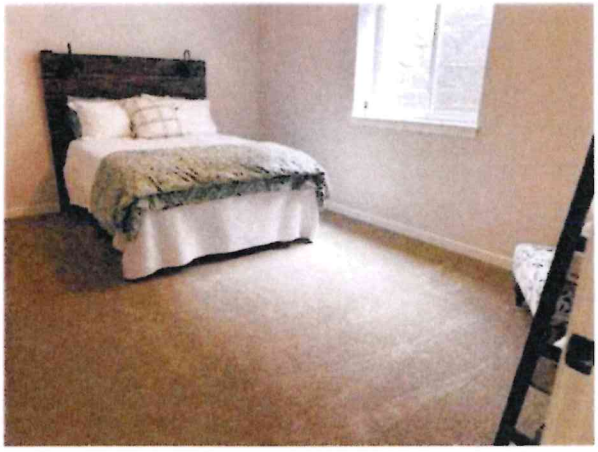
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Basement



Basement



Basement Bedroom



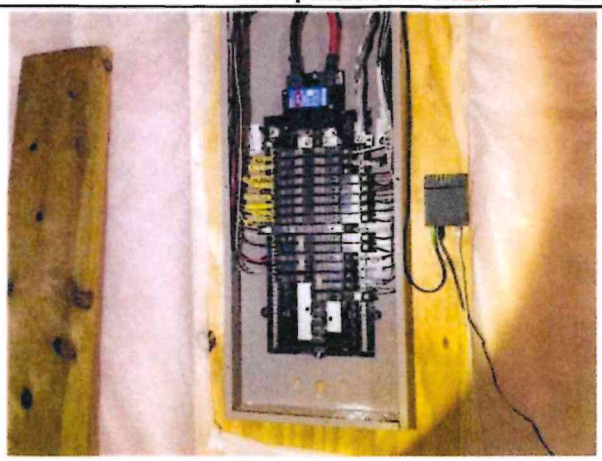
Basement Bathroom

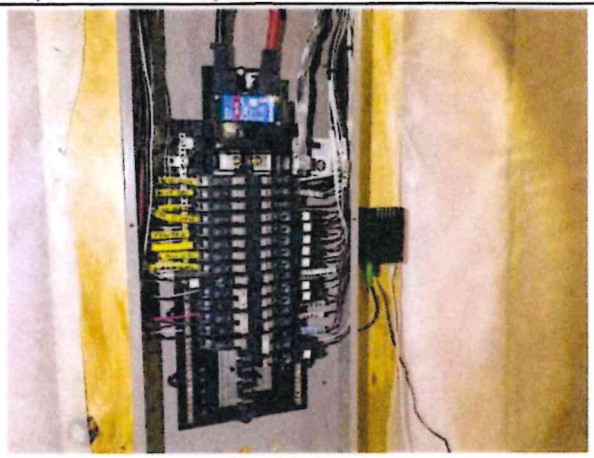
Customer: Graebel Companies - CO
Attn: Louise Bartosak
Date Inspected: 7/9/2026

Transferee:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****


Electric Panel


Electric Panel


Electric Panel

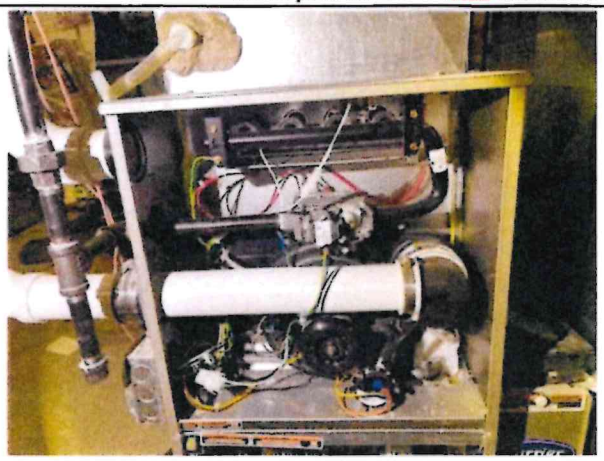

Heating Equipment

Customer: Graebel Companies - CO
Attn: Louise Bartosak
Date Inspected: 7/9/2026

Transferee:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****



Heating Equipment



A/C Unit



Water Heater



Water Heater

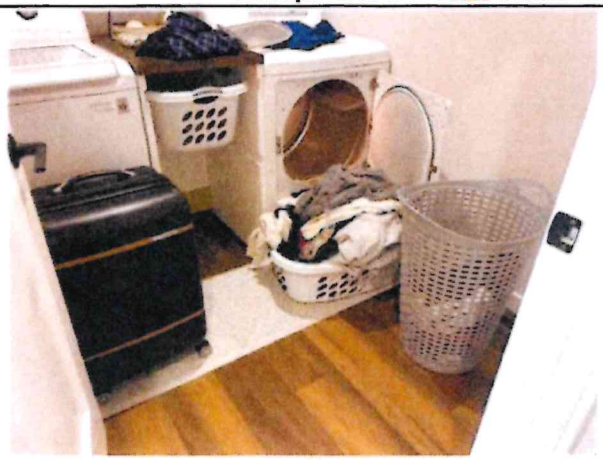
Buyer's Initials: _____ / _____

Customer: Graebel Companies - CO
Attn: Louise Bartosak
Date Inspected: 7/9/2026

Transferee:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****



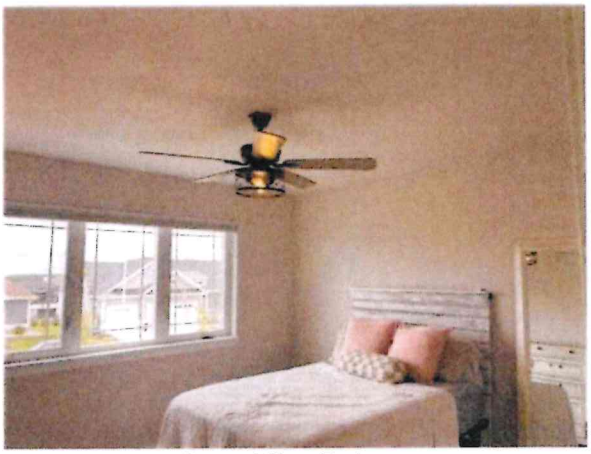
Laundry Room



Dining Room



Master Bedroom



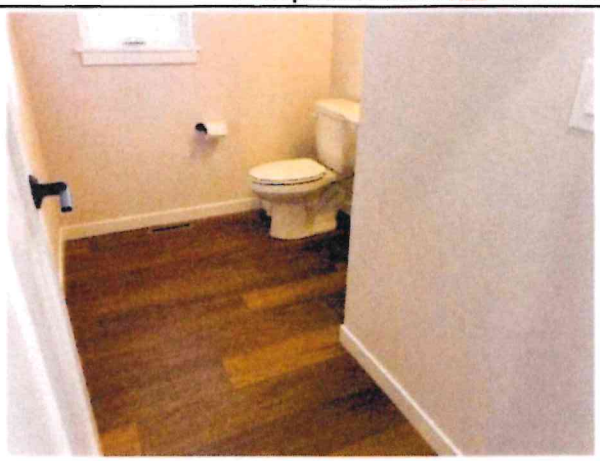
Second Floor Bedroom

Customer: Graebel Companies - CO
Attn: Louise Bartosak
Date Inspected: 7/9/2026

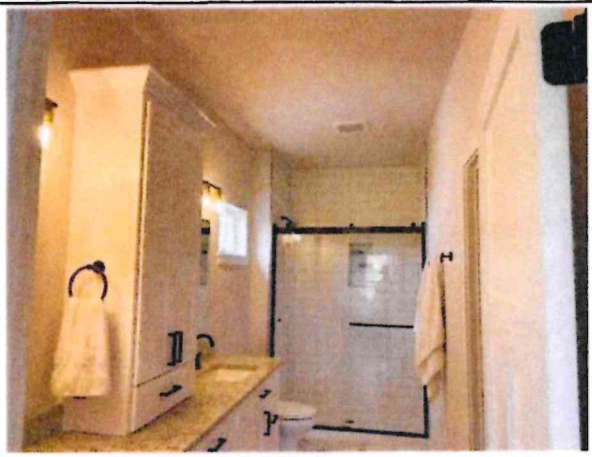
Transferee:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****



Main Floor Half Bathroom



Master Bathroom



Second Floor Bathroom



Office

Buyer's Initials: _____ / _____

Customer: Graebel Companies - CO
Attn: Louise Bartosak
Date Inspected: 7/9/2026

Transferee:
Shane Sipiorski
2009 Paris Ln
Cottage Grove, WI 53527

Inspection Type: Home Inspection - MCI
Customer File Number: APROA660834
ReloOlogy Number: 123300

***** Note: pictures with a RED border indicate a potential hazard, problem or defect *****



Kitchen



Fireplace



Water Softener

ReloOlogy™ inspection management services

Termite Inspection Summary

Transferee / Property / Inspection Information

Transferee Name:	Shane Sipiorski	Street Address:	2009 Paris Ln
City:	Cottage Grove	State / Zip Code:	WI / 53327
Customer:	Graebel Companies – CO	File Number:	APROA660834
Customer Contact:	Louise Bartosak	Inspection / Report Date:	7-9-2026 / 7-16-2026

Issues Identified During Inspection

At the time of inspection, there was no evidence of wood destroying insects at the visually accessible areas of the home.

Please note: *The inspection and this report are provided solely for the purpose of evaluating the physical condition and/or functionality of the property and/or related systems or components at the time of inspection. This inspection does* ***not*** *determine, guarantee, or imply the insurability of the property or any of its components. Insurance companies may have their own underwriting requirements, risk assessments, or restrictions regarding certain materials, systems, or conditions, which are beyond the scope of this inspection. The inspector makes no representation as to whether the property will qualify for insurance coverage, the cost of such coverage, or the availability of coverage. Customers, buyers, etc. are advised to consult directly with their insurance provider regarding any concerns related to coverage, insurability, or policy limitations. Neither the inspector nor the inspection management company shall be held responsible for future insurability decisions made by insurance carriers or other third parties.*

Action Recommended

Action Recommended: **No corrective action is required at this time.**

If you have any questions or concerns, please do not hesitate to contact us.

Sincerely,

Cathy Ciambella
Senior Inspection Specialist
ReloOlogy Inspection Management Services
Phone: 215/478-6962

Wood Destroying Insect Inspection Report

Notice: Please read important consumer information on **page 2.**

Section I. General Information

Inspection Company, Address & Phone

Plunkett's Pest Control, Inc.
40 NE 52nd Way
Fridley, MN 55421
877-571-7100

Company's Pest Control Business Lic. No.: WI 533930

Date of Inspection: 07/09/26

Address of Property Inspected
2009 Paris Lane
Cottage Grove, WI 53527

Inspector's Name, Signature & Certification, Registration, or Lic. #
Ken Bateson — WI Commercial 204325

Structure(s) Inspected
Home and garage

Section II. Inspection Findings

This report is indicative of the condition of the above identified structure(s) on the date of inspection and is not to be construed as a guarantee or warranty against latent, concealed, or future infestations or wood destroying insect damage. **Based on a careful visual inspection of the readily accessible areas of the structure(s) inspected:**

- [x] **A. No visible** evidence of wood destroying insects was observed.
- [ ] **B. Visible** evidence of wood destroying insects was observed as follows:
  - [ ] 1. Live insects (description and location): _____
  - [ ] 2. Dead insects, insect parts, frass, shelter tubes, exit holes, or staining (description and location): _____
  - [ ] 3. **Visible** damage from wood destroying insects was noted as follows (description and location): _____

NOTE: This is not a structural damage report. **If box B above is checked, it should be understood that some degree of damage, including hidden damage, may be present.** If any questions arise regarding damage indicated by this report, it is recommended that the buyer or any interested parties contact a qualified structural professional to determine the extent of damage and the need for repairs.

Section III. Recommendations

- [x] No action and/or treatment recommended: (Explain if Box B in Section II is checked) _____
- [ ] Recommend action(s) and/or treatment(s) for the control of: _____

Section IV. Obstructions and Inaccessible Areas

The following areas of the structure(s) inspected were obstructed or inaccessible:

- [x] Basement **1, 3, 5, 7, 8, 9, 12, 13, 18, 24, 26**
- [ ] Crawlspace
- [x] Main Level **1, 3, 4, 5, 8, 9, 13, 17, 24, 26**
- [x] Attic **5, 10, 11**
- [x] Garage **1, 3, 5, 6, 7, 9, 12, 13, 17, 24, 26**
- [x] Exterior **3, 13, 17**
- [ ] Porch
- [ ] Addition
- [ ] Other

The inspector may write out obstructions or use the following optional key:

1. Fixed ceiling	15. Standing water
2. Suspended ceiling	16. Dense vegetation
3. Fixed wall covering	17. Exterior siding
4. Floor covering	18. Window well covers
5. Insulation	19. Wood pile
6. Cabinets or shelving	20. Snow
7. Stored items	21. Unsafe conditions
8. Furnishings	22. Rigid foam board
9. Appliances	23. Synthetic stucco
10. No access or entry	24. Duct work, wiring, and/or plumbing
11. Limited access	25. Spray foam insulation
12. No access beneath	26. Equipment
13. Only visual access	
14. Cluttered condition	

Section V. Additional Comments and Attachments

(these are an integral part of the report) _____

Attachments _____

Signature of Seller(s) or Owner(s) if refinancing. Seller discloses to the buyer all information, to their knowledge, regarding W.D.I. infestation, damage, repair, and treatment history.

X

Signature of Buyer. The undersigned hereby acknowledges receipt of a copy of both page 1 and page 2 of this report and understands the information reported.

X

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Important Consumer Information Regarding the Scope and Limitations of the Inspection

Please read this entire page as it is part of this report. Please refer to the NPMA Suggested Guidelines for instructions on completing this report. This report is not a guarantee or warranty as to the absence of wood destroying insects nor is it a structural integrity report. The inspector's training and experience do not qualify the inspector in damage evaluation or any other building construction technology and/or repair.

1. **About the Inspection:** A visual inspection was conducted in the readily accessible areas of the structure(s) indicated (see Page 1) including attics and crawlspaces which permitted entry during the inspection. The inspection included probing and/or sounding of unobstructed and accessible areas to determine the presence or absence of visual evidence of wood destroying insects. The WDI inspection firm is not responsible to repair any damage or treat any infestation at the structure(s) inspected, except as may be provided by separate contract. Also, wood destroying insect infestation and/or damage may exist in concealed or inaccessible areas. The inspection firm cannot guarantee that any wood destroying insect infestation and/or damage disclosed by this inspection represents all of the wood destroying insect infestation and/or damage which may exist as of the date of the inspection. ***For purposes of this inspection, wood destroying insects include: termites, carpenter ants, carpenter bees, and reinfesting wood boring beetles. This inspection does not include mold, mildew or noninsect wood destroying organisms.*** **This report shall be considered invalid for purposes of securing a mortgage and/or settlement of property transfer if not used within ninety (90) days from the date of inspection. This shall not be construed as a 90-day warranty. There is no warranty, express or implied, related to this report unless disclosed as required by state regulations or a written warranty or service agreement is attached.**

2. **Treatment Recommendation Guidelines Regarding Subterranean Termites:** Treatment or corrective action should be recommended if live termites are found. If no evidence of a previous treatment is documented and evidence of infestation is found, even if no live termites are observed, treatment or corrective action by a licensed pest control company should be recommended. Treatment or corrective action may be recommended if evidence of infestation is observed, and a documented treatment occurred previously, unless the structure is under warranty or covered by a service agreement with a licensed pest control company.
For other Wood Destroying Insects, please refer to the NPMA suggested guidelines for added guidance on actions and or treatment.

3. **Obstructions and Inaccessible Areas:** No inspection was made in areas which required the breaking apart or into, dismantling, removal of any object, including but not limited to: moldings, floor coverings, wall coverings, siding, fixed ceilings, insulation, furniture, appliances, and/or personal possessions; nor were areas inspected which were obstructed or inaccessible for physical access on the date of inspection. Your inspector may write out inaccessible areas or use the key in Section IV. Crawl spaces, attics, and/or other areas may be deemed inaccessible if the opening to the area is not large enough to provide physical access for the inspector or if a ladder was required for access. Crawl spaces (or portions thereof) may also be deemed inaccessible if there is less than 24 inches of clearance from the bottom of the floor joists to the surface below. If any area which has been reported as inaccessible is made accessible, the inspection company may be contacted for another inspection. An additional fee may apply.

4. **Consumer Maintenance Advisory Regarding Integrated Pest Management for Prevention of Wood Destroying Insects.** Any structure can be attacked by wood destroying insects. Homeowners should be aware of and try to eliminate conditions which promote insect infestation in and around their structure(s). Factors which may lead to wood destroying insect infestation include: earth to wood contact, foam insulation at foundation in contact with soil, faulty grade, improper drainage, firewood against structure(s), insufficient ventilation, moisture, wood debris in crawlspace, wood mulch or ground cover in contact with the structure, tree branches touching structure(s), landscape timbers and wood decay. Should these or other conditions exist, corrective measures should be taken in order to reduce the chances of infestation of wood destroying insects and the need for treatment.

5. **Neither the inspecting company nor the inspector has had, presently has, or contemplates having any interest in the property inspected.**

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