Inspection Inspector ID: Affiliation: Areas inspected: Exterior only	Inspection time:	
Building Description Building name: Address:	☐ IVIIU-IISE OF HIGH-IISE	☐ Pre-fabricated ☐ One- or two-family dwelling
Building contact/phone: Number of stories: "Footprint area" (square feet): Number of residential units:	☐ Dwelling☐ Other residential☐ Public assembly	☐ Commercial ☐ Government ☐ Offices ☐ Historic ☐ Industrial ☐ School ☐ Other:
Investigate the building for the conditions below and che Observed Conditions: Collapse, partial collapse, or building off foundation Building significantly out of plumb or in danger Damage to primary structural members, racking of walls Falling hazard due to nonstructural damage Geotechnical hazard, scour, erosion, slope failure, etc. Electrical lines / fixtures submerged / leaning trees Other (specify) See back of form for further comments.	eck the appropriate column. inor/None Moderate Seve	Estimated Building Damag (excluding contents) None > 0 to < 1% 1 to < 10% 10 to < 30% 30 to < 60% 60 to < 100%
Posting Choose a posting based on the evaluation and team judg grounds for an Unsafe posting. Localized Severe and over INSPECTED (Green placard) Record any use and entry restrictions exactly as written on	erall Moderate conditions may ED USE (Yellow placard)	• •
Further Actions Check the boxes below only if further	er actions are needed.	
□ Detailed Evaluation recommended: □ Structur □ Substantial Damage determination recommended □ Other recommendations:	al Geotechnical	Other: