

**Notice - Read entire report carefully**

Address of evaluated dwelling	Unit no.	No. of units
Owner name		
Owner address		

- This Report offers a limited overview of building components and fixtures by the Evaluator and is not technically extensive. Prospective buyers may seek additional evaluations from various experts in the inspection field prior to purchase. **This Report is NOT a warranty or guarantee expressed or implied by the City of Bloomington, or by the Evaluator, or of any building component or fixture.**
- The Ordinance requires that no person shall exhibit or show a dwelling for sale without first having obtained an Evaluation Report. The original Evaluation Report issued for the dwelling must be displayed on the site and shall be provided to the buyer before or at the time of sale of the dwelling. A copy of the Report must be submitted to the City of Bloomington within 7 calendar days after the evaluation has been made.
- This Report is **not** an FHA or VA inspection or appraisal.
- This Report covers only the items listed on this form. The Evaluator is not required to evaluate inaccessible, concealed, or unsafe areas; climb up on roofs; or disassemble items. This Report does not address lead paint, radon or asbestos.
- This Report is valid for one year from the date of issue and only to the owner named above.
- Any **questions** regarding this Report should be directed to the City of Bloomington or the Evaluator whose name appears on the back of this form. Any **complaints** regarding this Report should be directed to the City of Bloomington Review Evaluator at City Hall, 1800 West Old Shakopee Road, phone 952-563-8930 (TTY: 952-563-8740).

### Evaluation codes:

If an item is non-existent, the word "None" shall be indicated in the comment area. Items marked with a "NA" indicate that this item is not applicable or not relevant. Items marked with a "M" indicate that no problems related to that item were seen at the time of evaluation. The following require comments explaining each item: any "B" (Below minimum requirements); any "C" (Comment); and any

"H" (Hazardous as defined in the City Code). Additional comment sheets may be attached if needed. **Items marked "H" (Hazardous) must be corrected and inspected by a City Inspector prior to occupancy. PERMITS may be REQUIRED FOR CORRECTION OF HAZARDOUS ITEMS.**

**None** Non-existent    **M** Meets requirements    **B** Below minimum requirements    **C** Comment    **H** Hazardous    **NA** Not applicable

Interior: basement	Item number/comments and remarks
1. Stairs - railings, landings, steps	_____ 1.
2. Floor	_____ 2.
3. Foundation walls	_____ 3.
4. Columns and beams	_____ 4.
5. First floor structural systems	_____ 5.
6. Floor drain and its cleanout	_____ 6.
7. Water supply piping	_____ 7.
8. Plumbing fixtures	_____ 8.
9. Drain, waste and vent piping	_____ 9.
10. Heating system installation and operation	_____ 10.
11. Water heater installation and operation	_____ 11.
12. Venting system of the heating plant and water heater	_____ 12.
13. Gas lines and valves	_____ 13.
14. Fireplaces	_____ 14.
15. Electrical service. Service size at panel: _____ AMPS	_____ 15.
16. Electrical outlets/fixtures/wiring	_____ 16.
17. Smoke detectors	_____ 17.
18. Sleeping room(s)	_____ 18.

**This Evaluation Report shall be conspicuously displayed on the premise at all times the dwelling is offered for sale.**

Address of evaluated dwelling

<b>Interior: Rooms on level</b>		<b>1</b>	<b>2</b>	<b>Item number/comments and remarks</b>
19. Plumbing fixtures		___ ___	19.	
20. Gas lines and valves		___ ___	20.	
21. Electrical outlets/fixtures/wiring		___ ___	21.	
22. Auxiliary heaters - installation and wiring		___ ___	22.	
23. Wood burning appliances		___ ___	23.	
24. Fireplaces		___ ___	24.	
25. Floors and rooms - construction and dimensions		___ ___	25.	
26. Light and ventilation windows		___ ___	26.	
27. Sleeping rooms		___ ___	27.	
28. Smoke detectors (presence, location, operation)		___ ___	28.	
29. Walls and ceiling components		___ ___	29.	
30. Stairs and railings (upper floors)		___ ___	30.	
<b>Interior: Attic space</b>				
31. Rafters, sheathing, ventilation		___ ___	31.	
32. Evidence of staining or seepage		___ ___	32.	
33. Electrical outlets/fixtures/wiring		___ ___	33.	
<b>Exterior</b>				
34. Electrical outlets/fixtures/overhead service		___ ___	34.	
35. Stairs, decks, balconies, porches, railings		___ ___	35.	
36. Walls - siding, trim, etc.		___ ___	36.	
37. Windows (frames/screens/glass)		___ ___	37.	
38. Doors		___ ___	38.	
39. Roof covering and flashing		___ ___	39.	
40. Chimneys and vents		___ ___	40.	
41. Drainage		___ ___	41.	
42. Plumbing - backflow prevention		___ ___	42.	
<b>Garage</b>				
43. Roof structure and covering		___ ___	43.	
44. Wall structure and covering		___ ___	44.	
45. Overhead garage door		___ ___	45.	
46. Electrical outlets/fixtures/wiring		___ ___	46.	
47. Gas lines and valves		___ ___	47.	
48. Fire separation		___ ___	48.	
49. Heaters		___ ___	49.	
<b>Miscellaneous</b>				
50. Miscellaneous, including abandoned fuel tanks		___ ___	50.	
51. Sanitation		___ ___	51.	
<b>Certification by licensed contractor</b>				
52. Certification of the heating system required?	Y/N	___ ___	52.	
53. Certification of the water heater required?	Y/N	___ ___	53.	
54. Certification of the plumbing system required?	Y/N	___ ___	54.	
55. Certification of the electrical system required?	Y/N	___ ___	55.	
56. Certification of the structural system required?	Y/N	___ ___	56.	
57. List other certifications required:				

**An immediate hazard as indicated in Section 14.420 of the *Bloomington City Code* was discovered and is identified herein. A Certificate of Approval shall be issued by the City prior to occupancy by a new owner. "YES" must be indicated if ANY item has been marked "Hazardous". "NO" must be indicated if NO item has been marked "Hazardous".**

Circle one. YES NO

I hereby certify that this evaluation was done in compliance with *Bloomington City Code Sec. 14.419* and the City of Bloomington Housing Standards and Evaluator Guidelines.

Evaluator's signature \_\_\_\_\_ Phone no. \_\_\_\_\_ Issue date: \_\_\_\_\_