

VHDA Multifamily Development Existing Condition Questionnaire/On-Site Analysis

Project: _____ Date of Visit: _____
 Project Type(s): High/Mid-rise Garden Style Townhouse Scattered Site Other: _____
 Structure(s): Concrete Steel Masonry Wood Other: _____
 Number of Buildings: _____ Age of Property: _____
 Number of Units: _____ First Occupancy: _____
 Unit Addresses and Unit Types Observed: _____

Site

Parking
 Age: _____ Alligatoring: Y N Potholes: Y N
 Drainage: G P Overall Condition: _____

Lighting
 Min. 1fc at parking? Y N Min. 1fc at sidewalks? Y N Min. 1fc at mailboxes? Y N
 Min. 1fc at dumpsters? Y N Overall Condition: _____

Grading
 Negative Drainage Observed: Y N Location: _____
 Water Infiltrating Buildings: Y N Location: _____

Landscaping
 Grass Dead Patches: Y N Overall Condition: _____
 Foundation Plantings: Y N Overall Condition: _____
 Dead landscaping/stumps: Y N Notes: _____

Trash
 Dumpster OR Compactor OR Individual Tenant Cans
 Enclosure: Y N Condition: _____
 Apron: Y N Condition: _____

Retaining Walls
 Exist on site: Y N Condition: _____
 Additional needed: Y N Notes: _____

Sidewalks
 Cracks/Spalling: Y N Trip Hazards: Y N
 Overall Condition: _____

Accessibility
 Accessible Route Provided From HC Parking to Units: Y N
 Notes: _____

Accessible Route Provided From Units to Common Areas: Y N
 Notes: _____

Systems

HVAC
 Type: _____
 Avg. Age of Equipment: _____ Overall Condition: _____
 Exhaust Fans Discharge to Exterior: Y N
 Additional Notes: _____

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Plumbing

Interior

Supply Type: Copper CPVC PEX Polybutylene Other _____

Overall Condition: _____

Waste Type: Cast Iron PVC Galvanized Other _____

Overall Condition: _____

Exterior

Supply Type: Copper CPVC PEX Polybutylene Other _____

Overall Condition: _____

Waste Type: Cast Iron PVC Galvanized Other _____

Water Heater Type: _____ Avg. Age: _____ Condition: _____

Bathtub Type: Fiberglass Cast Iron Other Condition: _____

Surround Type: Fiberglass Ceramic Other Condition: _____

Toilet: GPF: _____ Avg. Age: _____ Condition: _____

Electrical

Service Size Per Building: _____ Unit Panel Size: _____

Feeder Type: Copper OR Alum. Branch Wire Type: Copper OR Alum.

Outlet age: _____ Outlets Grounded: Y N

Outlet Overall Condition: _____

Exposed Wiring: Y N Locations: _____

Phones

Outlet Locations: _____

Cable TV

Outlet Locations: _____

Kitchen Lights: 1x4 Fluorescent OR Other _____

Laundry: In-unit OR Central

Type: Side by Side Stacked Combo Other _____

Age: _____ Condition: _____

How is Overflow Addressed: Pan with Drain Moisture Sensor Other _____

Appliances

Ref. Avg. Age: _____ Range Type: _____ Avg. Age: _____ Range Hood Avg. Age: _____

Dishwasher: Y N Dishwasher Avg. Age: _____

Overall Conditions: _____

Elevator

Type: _____ Size: _____ Last Upgraded: _____

Sprinkler system

Type: Full Partial NA Comments: _____

Fire Alarm system

Type: Full Partial NA Comments: _____

Smoke Detector Locations: _____

Structure

Foundation

Type: Slab on Grade Crawl Space Basement Other: _____

Overall Condition: _____

Roof

Type: Pitched Flat Combo. Age: _____ Sheathing Thickness: _____

Overall Condition: _____

Project Name

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Roof Overhang at Breezeway Stair Minimum 5': Y N

Insulation and Ventilation

Attic

Insulation Type: _____ R-Value: _____ Ventilation Type: _____

Crawl space

Insulation Type: _____ R-Value: _____ Ventilation Type: _____

Exterior wall

Insulation Type: _____ R-Value: _____ **Sheathing Type:** _____

Structural Deficiencies

Disclosed or Identified Structural Deficiencies: _____

Doors

Common

Overall Condition: _____

Apt. Entry Doors

Material: Steel OR Wood Door Type: Flush Raised Panel Variety Age: _____

Condition: _____

Hardware Type: Knob OR Lever Hardware Finish: Silver Yellow Variety

Hardware Condition: _____

Pre-hung Doors

Door Type: Flush Raised Panel Variety Condition: _____

Hardware Type: Knob OR Lever Hardware Finish: Silver Yellow Variety

Hardware Condition: _____

Windows

Common

Age: _____ Overall Condition: _____

Apts.

Type: Vinyl Alum. Store Front Alum. Insulated: Y N

Age: _____ Overall Condition: _____

Breezeway Stair

Type: Wood Steel Concrete Combo. Condition: _____

Building Envelope

Material Type: _____ Age: _____ Condition: _____

Brick Row Lock Slope: Adequate OR Not adequate OR Need Architect To Perform Inspection

Exterior Trim

Type: _____ Condition: _____

Flooring

Carpet Condition: G P NA Ceramic Condition: G P NA

Hardwood Condition: G P NA Vinyl Condition: G P NA

Notes: _____

Cabinets and Counters

Kitchen Condition: _____ Bath Condition: _____

Drywall

Overall Condition: _____

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Baseboard

Type: _____ Condition: _____

Kitchen Pass Through

Existing: Y N To be Provided: Y N NA

Environmental

Storage Tanks

Above Ground: Y N Underground: Y N Will be removed: Y N NA

Notes: _____

Lead Paint

Present: Y N Notes: _____

Asbestos

Present: Y N Notes: _____

General Notes
