

ROBBINSDALE TRUTH IN SALE OF HOUSING DISCLOSURE REPORT

A

Notice – Read Entire Report Carefully

This is not a Buyers Inspection!

Page 1 of 4

Address Of Evaluated Dwelling:

Owner Name:

Home

Owner Address:

Work

(City, State, ZIP)

Realtor/Contact:

Ph

Fax

I declare to the best of my knowledge the following information for this property regarding any sewer backup or any evidence of chronic water seepage; any abandoned unused or uncapped well; or any discharge of storm water, ground water, roof runoff, yard drainage, foundation drains or sump pumps into the sanitary sewer: None YES, COMMENTS:

Signature of Owner (Disclosure Report Not Valid Without Signature)

Date:

\*\*\*\*\* SEE ATTACHED PAGES FOR IMPORTANT CONSUMER INFORMATION \*\*\*\*\*

Number of Dwelling Units: 1 Check if: Townhouse  or Condo

Housing Orders:  NO orders  YES housing orders pending from Robbinsdale Inspections Division.

This property:  IS NOT condemned  IS condemned (reason):

1. This report offers a limited overview of building components and fixtures by the evaluator and is not technically extensive. Prospective buyers may want to seek additional opinions from various experts in the inspections field prior to purchase. This report is not a warranty or guarantee, expressed or implied, by the City of Robbinsdale or by the evaluator or of any building component or fixture.

2. This report is not a code compliance inspection. The owner, owner’s agent and/or buyer must repair all items marked Repair/Replace. All required Repair/Replace items are enforceable by Robbinsdale City Code Ordinance Section 435. The Inspections Division will not use all other items as a basis for enforcing Robbinsdale ordinances.

3. The ordinance requires and places the responsibility on the seller or agent to make sure that this report is publicly displayed on the premises when the house is shown to prospective buyers. Also, the seller or agent must give a copy of this report to the buyer prior to the signing of a Purchase Agreement.

4. This report covers only those items listed on the form. The evaluator is not required to ignite the heating plant, use a ladder to observe the condition of the roofing, evaluate inaccessible or concealed areas or disassemble items. This report does not address formaldehyde, lead paint, any airborne gasses (including radon), asbestos, wood stoves or fireplaces (except for visible venting and clearances), or air conditioners. Gas inserts in fireplaces WILL be evaluated.

5. This report is not an FHA, VA or Section 8 inspection. It is not an appraisal.

6. This report is valid for one year from the date of issue and only for the owner named on the report. It is required for all single family homes, duplexes, triplexes, townhouses, or condominium offered for sale.

7. Any questions regarding this report should be directed to the evaluator whose name and phone number appear below. Any complaints regarding this report should be directed to the Program Administrator, Point of Sale at (763) 531-1266, Robbinsdale Inspections Division, 4100 Lakeview Ave. N., Robbinsdale, MN 55422

8. If the buyer intends to rent out any portion of this property a rental housing license is required by City of Robbinsdale Ordinance Section 425 prior to rental. Please contact the Housing Inspector at (763) 531-1261.

I hereby certify that this report is made in compliance with the Robbinsdale Code of Ordinances, Section 435, and that I utilized care and diligence reasonable reasonable and ordinary for one meeting the Certification Standards. The report covers only those problems listed and reasonably visible at the time of my evaluation and does not warrant future useful life of any house component or fixture. I have included all required information pages with this report

Print Name: Doug Hastings of Cities’ Inspection Service, Inc

Evaluation Date:

Signed: Doug Hastings

Telephone Number: (952) 892-0490

THERE ARE REQUIRED REPAIR/REPLACE ITEMS NOTED IN THIS REPORT: YES [X] NO [ ]

If “RR” items noted, permits may be required, see attached “Most Common Repair Items.

**EVALUATION CODES:** **M:** Meets Minimum Requirements **B:** Below Minimum Requirements **C:** Comments  
**N/A:** Not Applicable/ Does Not Apply **SC:** Suggested Correction **RR:** Repair/Replace **Y:** =Yes **N:** =No

Items marked “**RR**” indicate that the item must be repaired or replaced and a re-inspection must be made by the City of Robbinsdale Inspector within one year of the evaluation report.

Any item marked “**B**”, “**C**”, “**SC**” or “**RR**” must have a written comment about the item. “**Y**” or “**N**” must have comments when starred (\*). Read “COMMENTS” COLUMN CAREFULLY. Each Item May Have More Than One Code.

Any item with the words “**SEE HANDOUT**” in the comment column refers to the “**MOST COMMON REPAIRS**” handout that should be attached to this report. Contact the evaluator if it is not attached.

<u>Item List</u>	<u>Required</u>	<u>RR</u>	<u>Item Number / Code / Comments</u>
1. Basement stairs	<u>M</u>	<u>1</u>	<u>1</u>
2. Basement floor	<u>M</u>	<u>2</u>	<u>2</u>
3. Foundation walls	<u>M</u>	<u>3</u>	<u>3</u>
4. Evidence of Dampness or staining			
a) on basement walls (Y* or N)	<u>Y</u>	<u>4a</u>	
b) on basement floor (Y* or N)	<u>Y</u>	<u>4b</u>	
c) See owner’s statement on Page A			
5. Basement sleeping rooms (Y* or N) <i>(If Yes, see page “C”)</i>	<u>N</u>	<u>5</u>	
6. First floor, floor system	<u>M</u>	<u>6</u>	<u>6</u>
7. Columns & beams	<u>M</u>	<u>7</u>	<u>7</u>
8. Floor drains	<u>M</u>	<u>8</u>	<u>8</u>
9. Waste & vent piping	<u>M</u>	<u>9</u>	<u>9</u>
10. Water piping	<u>M</u>	<u>10</u>	<u>10</u>
11. Gas piping	<u>M</u>	<u>11</u>	<u>11</u>
12. Water heater	<u>M</u>	<u>12</u>	<u>12</u>
13. Water heater venting	<u>M</u>	<u>13</u>	<u>13</u>
14. Basement plumbing fixtures	<u>M</u>	<u>14</u>	<u>14</u>
15. Copper water line visible on the street side of water meter (Y or N*) <i>Evaluator assumes no responsibility for copper water line being continuous to street.</i>	<u>Y</u>	<u>15</u>	
16. Electrical service installation / size at panel Amps: <u>100</u> Volts: <u>120/240</u> 60 amp suitable for one major 220 volt appliance. <i>Evaluator is not required to disassemble items or evaluate inaccessible areas.</i>	<u>M</u>	<u>16</u>	<u>16</u>
17. Smoke detectors properly located	<u>M</u>	<u>17</u>	<u>17</u>
a) Operable	<u>M</u>	<u>17a</u>	<u>17a</u>
18. Separate 20 amp kitchen circuit indexed at service panel: (Y or N*)	<u>N</u>	<u>18</u>	
19. Basement electrical outlets/fixtures	<u>M</u>	<u>19</u>	<u>19</u>
20. Electrical outlet for laundry indexed at service panel: (Y or N*)	<u>N</u>	<u>20</u>	
21. Heating plant installation <i>Type: <u>Gas</u> Fuel: <u>Air</u> Heat exchanger evaluated only if readily visible. Evaluator is not required to light the pilot.</i>	<u>M</u>	<u>21</u>	<u>21</u>
22. Heating plant viewed in operation (Y or N*)	<u>N</u>	<u>22</u>	<u>22</u>
23. Heating plant combustion venting	<u>M</u>	<u>23</u>	<u>23</u>
24. Auxiliary/additional heating units (Y or N)	<u>N</u>	<u>24</u>	
a) Installation	<u>N/A</u>	<u>24a</u>	<u>24a</u>
b) Viewed in operation (Y or N*)	<u>NA</u>	<u>24b</u>	<u>24b</u>
c) Combustion venting	<u>N/A</u>	<u>24c</u>	<u>24c</u>
d) Location(s) <i>(include attic or garage heater)</i>	<u>N/A</u>	<u>24d</u>	<u>24d</u>

Evaluator: Doug Hastings

Date:

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<b>KITCHEN</b>	<u>Required</u> <u>RR</u>	<u>Item Number / Code / Comments</u>
25. Walls & ceiling components	<u>M</u> 25	<u>25</u>
26. Evidence of dampness/staining (Y* or N)	<u>Y</u> 26	
27. Floor condition	<u>M</u> 27	<u>27</u>
28. Window size & operable area	<u>M</u> 28	
29. Window & door condition / Mech. Vent.	<u>M</u> 29	<u>29</u>
30. Electrical outlets & fixtures	<u>M</u> 30	<u>30</u>
31. Plumbing fixtures/mechanical ventilation	<u>M</u> 31	<u>31</u>
32. Water flow	<u>M</u> 32	<u>32</u>
33. Gas piping	<u>M</u> 33	<u>33</u>
 <b>DINING/LIVING ROOM</b>		
34. Walls & ceiling components	<u>M</u> 34	<u>34</u>
35. Evidence of dampness/staining (Y* or N)	<u>Y</u> 35	
36. Floor area & ceiling height	<u>M</u> 36	
37. Floor condition	<u>M</u> 37	<u>37</u>
38. Window size & operable area	<u>M</u> 38	
39. Window & door condition	<u>M</u> 39	<u>39</u>
40. Electrical outlets & fixtures	<u>M</u> 40	<u>40</u>
 <b>BATHROOM</b>		
41. Walls & ceiling components	<u>M</u> 41	<u>41</u>
42. Evidence of dampness/staining (Y* or N)	<u>Y</u> 42	
43. Floor condition	<u>M</u> 43	<u>43</u>
44. Window size & operable area/Mech. Ex..	<u>M</u> 44	
45. Window & door condition	<u>M</u> 45	<u>45</u>
46. Electrical outlets & fixtures	<u>M</u> 46	<u>46</u>
47. Plumbing fixtures	<u>M</u> 47	<u>47</u>
48. Water flow	<u>M</u> 48	<u>48</u>
 <b>HALLWAYS/STAIRWELLS</b>		
49. Walls & ceiling components	<u>M</u> 49	<u>49</u>
50. Evidence of dampness/staining (Y* or N)	<u>Y</u> 50	
51. Floor condition	<u>M</u> 51	<u>51</u>
52. Window & door condition	<u>M</u> 52	<u>52</u>
53. Electrical outlets & fixtures	<u>M</u> 53	<u>53</u>
54. Stairs (upper floors)	<u>M</u> 54	<u>54</u>
55. Smoke detectors properly located	<u>M</u> 55	<u>55</u>
a) Operable	<u>M</u> 55a	<u>55a</u>
 <b>SLEEPING ROOMS</b>		
56. Number of sleeping rooms (include basement)	<u>3</u> 56	
57. Walls & ceiling components	<u>M</u> 57	<u>57</u>
58. Evidence of dampness/staining (Y* or N)	<u>Y</u> 58	
59. Floor area & ceiling height	<u>M</u> 59	
60. Floor condition	<u>M</u> 60	<u>60</u>
61. Window size & operable area	<u>M</u> 61	
62. Window & door condition	<u>M</u> 62	<u>62</u>
63. Electrical outlets & fixtures	<u>M</u> 63	<u>63</u>

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<b>PORCH/SUNROOM/OTHER ROOM</b>	<u>Required</u>	<u>RR</u>	<u>Item Number / Code / Comments</u>
64. Walls & ceiling components	M	64	64
65. Evidence of dampness/staining (Y* or N)	Y	65	
66. Floor condition	M	66	66
67. Window & door condition	M	67	67
68. Electrical outlets & fixtures	M	68	68

**ATTIC SPACE** (if visible)

69. Roof boards & rafters / Mech. Vent.	M	69	69
a) Attic insulation			
TYPE(s): _____ DEPTH: _____ inches			
70. Evidence of dampness/staining (Y* or N)	Y	70	
71. Electrical outlets & fixtures	M	71	71

**EXTERIOR** (Items visible at time of evaluation only)

72. Foundation	M	72	72
73. Basement windows	M	73	73
74. Drainage (grade)	M	74	
75. Exterior walls	M	75	75
76. Doors (frames/storms/screens/deadbolt locks)	M	76	76
77. Windows (frames/storms/screens)	M	77	77
78. Stoops	M	78	78
79. Cornice & trim	M	79	
80. Roof covering & flashing	M	80	
81. Chimney	M	81	81
82. Electrical outlets/fixtures	M	82	82
83. Two-family dwelling egress	M	83	

**OPEN/UNHEATED TYPE PORCHES**

84. Floor	M	84	84
85. Walls	M	85	85
86. Roof/ceiling	M	86	86
87. Doors/screens/windows	M	87	87
88. Electrical outlets/fixtures	M	88	88

**GARAGE / Accessory building** (Automatic garage doors that don't reverse upon striking an object pose a serious deficiency and should be corrected immediately.)

89. Roof structure & covering	M	89	89
90. Wall structure & covering	M	90	90
91. Garage door	M	91	
a) Automatic garage door opener	M	91a	
92. Electrical outlets & fixtures	M	92	92

**MISCELLANEOUS**

93. Clutter (egress obstruction)	M	93	93
94. Sanitation	M	94	94
95. Vermin	M	95	95
96. Guards (Walls/Guardrails/Railings)	M	96	96

**LICENSED CONTRACTOR REQUIRED TO REPAIR OR EVALUATE (safety check or certify)**

Heating System: Yes  No  Water Heater: Yes  No  Plumbing System: Yes  No   
 Electrical System: Yes  No  Structural System: Yes  No  Other: Yes

**EVALUATOR TO RETURN TO COMPLETE THE EVALUATION DUE TO: utility shut-off, heating plant not on, locked areas, etc.** Yes  No  (The evaluator will charge.)

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Date:

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