SDE Residential Worksheet

Inspection # ___________ Inspector Name ____________________________
Photo # _______________ Date _______________________

PROPERTY LOCATION
Latitude: ___________________ Longitude: ___________________
Street Address ________________________________
City, State, Zip ________________________________
County _______________________________________

STRUCTURE ATTRIBUTES
Residence Type: 
○ Single Family Residence
○ Town or Row House
○ Manufactured House
Foundation:
○ Continuous Wall w/Slab
○ Basement
○ Crawlspace
○ Piers
○ Slab-on-Grade
○ Piers & Posts

Superstructure:
○ Stud-Framed
○ Common Brick
○ ICF
○ Masonry
Roof Covering:
○ Shingles – Asphalt, Wood
○ Clay Tile
○ Standing Seam [Metal]
○ Slate

Exterior Finish:
○ Siding or Stucco
○ Brick Veneer
○ EIFS
○ None – common brick, structural
HVAC System:
○ Heating and/or Cooling
○ None

Story:
○ One Story
○ Two or more Stories
Quality:
○ Low
○ Budget
○ Average
○ Good
○ Excellent

Year of Construction: ___________
Date Damage Occurred: __/__/____

Cause of Damage:
○ Fire
○ Flood
○ Flood and Wind
○ Seismic
○ Wind
○ Other
Duration of Flood: _______ ○ Hours ○ Days

Depth of Flood Above Ground: _________

Depth of Flood Above 1st Floor: _________

DIAGRAM w/ MEASUREMENTS and NUMBER OF STORIES:

ELEMENT PERCENTAGES

Foundation _______ %
Cabinets & Countertops _______ %
Superstructure _______ %
Floor Finish _______ %
Roof Covering _______ %
Plumbing _______ %
Exterior Finish _______ %
Electrical _______ %
Interior Finish _______ %
Appliances _______ %
Doors and Windows _______ %
HVAC _______ %

MISC NOTES: