|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| BUILDING CONDITION FORM | | | | | |
| To be completed annually by the group representative or member of staff that is responsible for or based at the property | | | | | |
| Group: | | | Type property: | | |
| Address: | | | | | |
| **Person completing the inspection:** | | | | | **Date:** |
|  | **Condition** |  | | **Condition** | |
| **Roof covering:** |  | **Window and doors** | |  | |
| Main roof |  | Main entrance | |  | |
| Dormer roof |  | Rear entrance | |  | |
| Gutters and fall pipes |  | Front windows | |  | |
| Fascias and soffits |  | Side windows | |  | |
| Flashings |  | Rear windows | |  | |
|  |  |  | |  | |
|  |  |  | |  | |
| **Brickwork:** |  | Outside areas | |  | |
| Main building |  | Entrance gate | |  | |
| Garage |  | Perimeter fencing | |  | |
|  |  | Car parking areas | |  | |
|  |  | Walkways | |  | |
|  |  |  | |  | |
|  |  |  | |  | |
| **General comments:**  Add categories not covered above. | | | | | |
| **Completion date:** | | **Signature:** | | | |