

STRUCTURAL SAFETY INSPECTION REPORT FORM



Inspection Firm or Individual Name: _____

Address: _____

Telephone Number: _____

Inspection Commenced Date: _____

Inspection Completed Date: _____

No Repairs Required
 Repairs are required as outlined in the attached inspection report

Licensed Design Professional: Engineer Architect

Name: _____

License Number: _____

Threshold Building – Certified Special Inspector Yes No



Seal

I am qualified to practice in the discipline in which I am hereby signing,

Signature: _____ Date: _____

This report has been based upon the minimum inspection guidelines for building safety inspection as listed in the Broward County Board of Rules and Appeals' Policy #05-05. To the best of my knowledge and ability, this report represents an accurate appraisal of the present condition of the structure, based upon careful evaluation of observed conditions, to the extent reasonably possible.

| 1. DESCRIPTION OF STRUCTURE | | | |
|-----------------------------|--|------------------------------|-----------------------------|
| a. | Name on Title: | | |
| b. | Street Address: | | |
| c. | Legal Description: | | |
| d. | Owner's Name: | | |
| e. | Owner's Mailing Address: | | |
| f. | Email Address: | Contact Number: | |
| g. | Folio Number of Property on which building is located: | | |
| h. | Building Code Occupancy Classification: | | |
| i. | Present Use: | | |
| j. | General Description: | Type of Construction: | |
| k. | Square Footage: | Number of Stories: | |
| l. | Is this a threshold building (per F.S. 553.71): | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

m. Special Features:

n. Describe any additions to original structure:

o. Additional Comments:

2. PRESENT CONDITION OF STRUCTURE

a. General Alignment (Note: Good, Fair, Poor, Explain if significant):

1. Bulging: Good Fair Poor Significant (Explain):

2. Settlement: Good Fair Poor Significant (Explain):

3. Deflections: Good Fair Poor Significant (Explain):

4. Expansion: Good Fair Poor Significant (Explain):

5. Contraction: Good Fair Poor Significant (Explain):

b. Portion Showing Distress (Note: Beams, Columns, Structural Walls, Floor, Roofs, Other):

c. Surface Conditions – Describe general conditions of finishes, noting cracking, spalling, peeling, signs of moisture penetration and strains:

d. Cracks – Note location in significant members. Identify crack size as HAIRLINE if barely discernible; FINE if less than 1mm in width; MEDIUM if between 1mm and 2mm in width; WIDE if over 2mm:

e. General extent of deterioration – Cracking or spalling concrete or masonry, oxidation of metals; rot or borer attack in wood:

f. Note previous patching or repairs:

g. Nature of present loading indicate residential, commercial, other estimate magnitude:

3. INSPECTIONS

a. Date of notice of required inspection:

b. Date(s) of actual inspection:

c. Name and qualifications of the individual preparing report:

d. Description of laboratory or other formal testing, if required, rather than manual or visual procedures:

e. Structural Repairs:

f. Has the property record been researched for any current code violations or unsafe structure cases? Yes No

Explanation/Comments:

4. SUPPORTING DATA ATTACHED

a. Sheets of written data:

b. Photographs:

c. Drawings or sketches:

d. Test reports:

5. FOUNDATION

a. Describe building foundation:

b. Has the property record been researched for any current code violations or unsafe structure cases? Yes No

c. Has the property record been researched for any current code violations or unsafe structure cases? Yes No

d. Describe any cracks or separation in the walls, column or beams that signal differential settlement:

e. Is there additional sub-soil investigation required? Yes No

1. If yes, explain:

6. MASONRY BEARING WALL – Indicate good, fair or poor on appropriate lines

a. Concrete masonry units: Good Fair Poor

b. Clay tile or cotta units: Good Fair Poor

c. Reinforced concrete tie columns: Good Fair Poor

d. Reinforced concrete tie beams: Good Fair Poor

e. Lintel: Good Fair Poor

f. Other type bond beams: Good Fair Poor

g. Masonry Finishes – **Exterior**:

| | | | | | | |
|----------------|--------------------------|------|--------------------------|------|--------------------------|------|
| 1. Stucco: | <input type="checkbox"/> | Good | <input type="checkbox"/> | Fair | <input type="checkbox"/> | Poor |
| 2. Veneer: | <input type="checkbox"/> | Good | <input type="checkbox"/> | Fair | <input type="checkbox"/> | Poor |
| 3. Paint Only: | <input type="checkbox"/> | Good | <input type="checkbox"/> | Fair | <input type="checkbox"/> | Poor |
| 4. Other: | <input type="checkbox"/> | Good | <input type="checkbox"/> | Fair | <input type="checkbox"/> | Poor |

4a. Explain:

h. Cracks – Note beams, columns, or others, including locations (description):

i. Spalling – In beams, columns, or others, including locations (description):

j. Rebar corrosion – Check appropriate line:

- | | | |
|----|--------------------------|---|
| 1. | <input type="checkbox"/> | None Visible |
| 2. | <input type="checkbox"/> | Minor – Patching will suffice |
| 3. | <input type="checkbox"/> | Significant – Patching will suffice |
| 4. | <input type="checkbox"/> | Significant – Structural repairs required |

4a. Describe:

k. Were samples chipped out for examination in spalled areas?

- | | | |
|----|--------------------------|--|
| 1. | <input type="checkbox"/> | No |
| 2. | <input type="checkbox"/> | Yes – Describe color, texture, aggregate, general quality: |

7. FLOOR AND ROOF SYSTEM

a. Roof:

1. Describe type and condition of current roof:

2. Note water tanks, cooling towers, air conditioning equipment, signs, other heavy equipment and condition of support:

3. Note types of drains, scuppers, and condition:

4. Describe parapet construction and current condition:

5. Describe mansard construction and current condition:

6. Describe any roofing framing member with obvious overloading, overstress, deterioration, or excessive deflection:

7. Note any expansion joint and condition:

b. Floor System(s):

1. Describe (Type of system framing, material, spans, condition):

2. Balconies – Indicate location, framing system, material and condition:

3. Stairs and escalators – Indicate location, framing system, material and condition:

4. Ramps – Indicate location, framing system, material and condition:

5. Guardrails – Indicate type, location, material and condition:

c. Inspection – Note exposed areas available for inspection, and where it was found necessary to open ceilings, etc. for inspection of typical framing members:

8. STEEL FRAMING SYSTEM

a. Full description of system:

b. Exposed Steel – Describe condition of paint and degree of corrosion:

c. Steel Connections – Describe type and condition:

d. Concrete or other fireproofing – Describe any cracking or spalling and note where any covering was removed for inspection:

e. Identify any steel framing member with obvious overloading, overstress, deterioration or excessive deflection (provide location(s)):

f. Elevator sheave beams, connections and machine floor beams – Note column:

9. CONCRETE FRAMING SYSTEM

a. Full description of structural system:

b. Cracking:

1. Significant Not Significant

2. Description of members affected, location and type of cracking:

c. General condition:

d. Rebar Corrosion – Check appropriate line:

- | | | |
|----|--------------------------|--|
| 1. | <input type="checkbox"/> | None Visible |
| 2. | <input type="checkbox"/> | Location and description of members affected and type cracking |
| 3. | <input type="checkbox"/> | Significant – Patching will suffice |
| 4. | <input type="checkbox"/> | Significant – Structural repairs required (Describe): |

e. Were samples chipped out for examination in spalled areas?

- | | | |
|----|--------------------------|--|
| 1. | <input type="checkbox"/> | No |
| 2. | <input type="checkbox"/> | Yes – Describe color, texture, aggregate, general quality: |

f. Identify any concrete framing member with obvious overloading, overstress, deterioration or excessive deflection (provide location(s)):

10. WINDOWS, STOREFRONTS, CURTAINWALLS AND EXTERIOR DOORS

a. Windows, Storefronts and Curtainwalls:

b. Structural Glazing on the exterior envelope of threshold building: Yes No

1. Previous Inspection Date: _____

2. Description of Curtainwall Structural Glazing and adhesive sealant:

3. Describe condition of system:

c. Exterior Doors:

1. Type (wood, steel, aluminum, sliding glass door, other):

2. Anchorage type and condition of fasteners and latches:

3. Sealant type and condition of sealant:

4. General Condition:

5. Describe repairs needed:

11. WOOD FRAMING

a. Type – Fully describe mill construction, light construction, major spans, trusses:

b. Indicate condition of the following:

1. Walls:

2. Floors:

3. Roof member, roof trusses:

c. Note metal fitting (i.e., angles, plates, bolts, splint pintles, other and note condition):

d. Joints – Note if well fitted and still closed:

e. Drainage – Note accumulations of moisture:

f. Ventilation – Note any concealed spaces not ventilated:

g. Note any concealed spaces opened for inspection:

h. Identify any wood framing member with obvious overloading, overstress, deterioration, or excessive deflection:

12. BUILDING FAÇADE INSPECTION (Threshold Building)

a. Identify and describe the exterior walls and appurtenances on all sides of the building (cladding type, corbels, precast appliques, etc.):

b. Identify attachment type of each appurtenance type (mechanically attached or adhered):

c. Indicate the condition of each appurtenance (distress, settlement, splitting, bulging, cracking, loosening of metal anchors and supports, water entry, movement of lintel or shelf angles or other defects):

13. SPECIAL OR UNUSUAL FEATURES IN THE BUILDING

a. Identify and describe any special or unusual features (i.e., cable suspended structures, tensile fabric roof, large sculptures, chimney, porte-cochere, retaining walls, seawalls, etc.):

b. Indicate condition of special feature, its supports and connections: