



Pre Inspection Questionnaire
Please fill in this questionnaire before the survey

Property Address

Date.....

Owner Occupier (Full Name) ,...

Q. *What is the APPROXIMATE AGE of the property?..... ,.....*

Q. *What is the TENURE? Freehold Leasehold*

Q. *Dates of any EXTENSIONS.....*

Q. *HOW LONG has the owner occupied the property?*
.....
years

Q. *Is the property occupied by more than one family?..... No...*
Yes.....

Q. *Is the property LISTED?..... No..... Yes.....Don't Know..... If so, what GRADE?.....*

Q. *Is the property located within a CONSERVATION AREA?.....*

Q. *Are there any HABITABLE OUTBUILDINGS?. No Yes.....*

Q. *What type of SPACE HEATING systems are installed (Make and Model if Possible)*
Age if known.....

Q. *What type of WATER HEATING systems are installed.....*
Age if known.....

Q. *What SERVICES are connected?.....Gas: Mains/LPG/None Electricity: Mains/Non-Mains Water: Mains/Private Oil: Yes/No*

Q. *Where is the ELECTRICITY METER located?.....*

Q. Is an OFF-PEAK SUPPLY provided?. No..... Yes.....

Q. Has CAVITY WALL INSULATION been installed after construction?...
No..... Yes.....

Q. Has REPLACEMENT DOUBLE GLAZING been installed...No..... Yes
(when).....

Location and Risks:

Located in a conservation area?.. No " Yes... Exposed Location?No..... Yes
(describe).....

Please use this space for any other information which may be useful: