

## Building Condition Audit Form

*Part 1*

Inspector(s): \_\_\_\_\_

Building name: \_\_\_\_\_

Date: \_\_\_\_\_

### COLUMN & EXTERIOR WALL SYSTEM

*Part 2*

**Column & Exterior Wall System Characteristics:**

1. Structural: Reinforced Concrete Columns  Structural Steel  Reinforced Concrete Walls  Structural Wood   
 Load Bearing Masonry  Light Steel Frame  Other  \_\_\_\_\_
2. Non-Structural Walls:  
 Masonry: Brick  Concrete Block  Limestone  Marble  Granite  Combination  Other  \_\_\_\_\_  
 Curtain or Panel: Metal  Glass  Asbestos Cement  Laminated  Other  \_\_\_\_\_
3. Insulation: Fiberglass Bats  Other  \_\_\_\_\_ Thickness \_\_\_\_\_

Additional description \_\_\_\_\_

<b>Part 3</b> Col / Ext Wall Components	<b>Prioritization Categories (See Below)</b>						<b>System Rating Total</b>	<b>Deficiency Cost</b>
	1	2	3	4	5	6		
1) Physical Condition								
2) Waterproofing								
3) Caulking								
4) Cleaning / Pointing								
5) Insulation								
6) Maintainability								
7) Painting								
Rating System Totals								

*Part 4*

System Rating	System Multiplier	System Deficiency	Building Value	Deficiency Cost For System
	X	Equals	0	X
		Equals		\$ -

*Part 5*

**Rating Explanation:**

Row	Column	Notes