PARSONAGE INSPECTION FORM

(Supplemental to Parsonage Information Sheet)

Church: _____ **Pastor:** _____

Parsonage Address: _____ **District:** _____

Instructions:

- **Please Send Forms On White Paper, One-Sided, Not Stapled.**
- **Please Send To Your: ☐ Board of Trustees, ☐ SPRC Committee, ☐ District Office**

INTERIOR

(*Key for Rating: 1=Excellent, 2=Good, 3=Fair, 4=Poor, 5=Not Acceptable)

Please print this form to use on a clip board during the parsonage inspection

Interior:	Ceiling*	Walls*	Floor*	Trim*	Windows*	Doors*	Tile*	Fixtures*	Outlets*	Cabinets*	Counters*
Front Entry											
Back Entry											
Living Rm											
Family Rm											
Dining Rm											
Kitchen											
Bedroom - 1											
Bedroom - 2											
Bedroom - 3											
Bedroom - 4											
Bathroom- 1											
Bathroom- 2											
Bathroom -3											
Bathroom- 4											
Study											
Office											
Other											
Basement											
Attic											

	First Floor*	Second Floor*	Basement*	Attic*
Heating				
Plumbing				
Smoke Detectors				
CO Detectors				
Fire Extinguisher				
Lead & Radon Testing				
Deadbolt Locks/Window Locks				

Person Filling Out This Form: _____

Date: _____

_____

Pastor's Signature

_____

Trustee Chair's Signature

PARSONAGE INSPECTION FORM

(Supplemental to Parsonage Information Sheet)

Church: _____ **Pastor:** _____

Parsonage Address: _____ **District:** _____

Instructions:

- **Please Send Forms On White Paper, One-Sided, Not Stapled.**
- **Please Send To Your: ☐ Board of Trustees, ☐ SPRC Committee, ☐ District Office**

EXTERIOR

(*Key for Rating: 1=Excellent, 2=Good, 3=Fair, 4=Poor, 5=Not Acceptable)

Exterior:	Parsonage*	Garage*	Notes
Siding			
Paint			
Brick			
Foundation Walls			
Roof			
Gutter & Downspout			
Chimney			
Glass/Window Sash			
Trim			
Lighting			
Driveway			
Sidewalk			
Steps			
Landscape			
Lawn Condition			
General Appearance			
Other			

EQUIPMENT

Lawn Mower	
Snow Blower	
Hoses, Rake, Shovel	
Ladder	
Combustible Storage	
Other	

Person Filling Out This Form: _____

Date: _____

_____

Pastor's Signature

_____

Trustee Chair's Signature

PARSONAGE INSPECTION FORM

(Supplemental to Parsonage Information Sheet)

Church: _____ **Pastor:** _____

Parsonage Address: _____ **District:** _____

Instructions:

- **Please Send Forms On White Paper, One-Sided, Not Stapled.**
- **Please Send To Your: ☐ Board of Trustees, ☐ SPRC Committee, ☐ District Office**

APPLIANCES

(*Key for Rating: 1=Excellent, 2=Good, 3=Fair, 4=Poor, 5=Not Acceptable)

Appliances	Rating*	Notes
Range & Oven		
Refrigerator w/Freezer		
Dishwasher		
Garbage Disposal		
Washer		
Dryer		
Garage Door Opener		
Water Heater		
Humidifier		
Water Softener, if needed		

Person Filling Out This Form: _____

Date: _____

_____

Pastor's Signature

_____

Trustee Chair's Signature

Have Trustees Toured The Parsonage This Year? ☐ **Yes** ☐ **No**

What plans are in place for appropriate modernization and upkeep of the parsonage?

Please use a digital camera and take photos (both inside/outside) of the church(es) and parsonage.

Please send a disc with images to the district office.