



# OWNER BUILDER INSPECTION REPORT

Owner Builder.

Site Address

Date of Inspection

[Include Photo Here]



1300 552 262

### Section 1 - Description

<b>Site Address:</b>
<b>Owner's name/s:</b>
<b>Name of owner or owner's representative present during inspection:</b>
<b>Date of inspection:</b>
<b>Weather conditions at time of inspection:</b>

Detailed description of the works contained in the approved building plans or scope of works seeking warranty/indemnity cover ("the works"):

Construction type/methods:

**NO OF LEVELS:**  
**FOOTINGS:**  
**PIERS:**  
**WALL STRUCTURE:**  
**EXTERNAL VENEER:**  
**ROOF SHAPE:**  
**ROOF FRAME:**  
**ROOF CLADDING:**  
**FLOOR:**  
**INTERNAL WALL LINING:**  
**INTERNAL CEILING LINING:**  
**WINDOW FRAMES:**  
**ADDITIONAL STRUCTURES**

Cost of works declared on application form:

Are you of the view that the above cost would reasonably permit the scope of work and specification to be been completed?

Occupancy date declared on application form:

Are you of the view that the occupancy date above is reasonable based on your observations?

<b>Section 2 - Certification sighted:</b>		<b>Yes</b>	<b>No</b>	<b>NA</b>
2.1	<b>Owner Builder Permit (NSW only) sighted</b>			
	<b>Date issued:</b>			
	<b>Party named as owner builder:</b>			
	<b>Permit No:</b>			

2.2	<b>Stamped building plans sighted</b>  <b>Architectural plans prepared by:</b>  <b>Approved by:</b>  <b>Determination date:</b>  <b>Engineer plans prepared by:</b>  <b>Approved by:</b>  <b>Determination date:</b>			
2.3	Building Approval/Construction Certificate/Building Permit sighted  <b>Party named as builder:</b>  <b>Development approval:</b>  <b>Determination date:</b>  <b>Construction Certificate approval:</b>  <b>Determination date:</b>			
Section 2 - Certification sighted (continued)		Yes	No	NA
2.4	Engineers details/drawings sighted  <b>Prepared by:</b>			
2.5	Geotechnical classification or compaction certificate sighted  <b>Conducted by:</b>  <b>Soil classification:</b>			
2.6	Electrical compliance certification sighted  <b>Contractor:</b>  <b>License No:</b>			
2.7	Plumbing compliance certification sighted  <b>Contractor:</b>  <b>License No:</b>			
2.8	Waterproofing compliance certification sighted  <b>Contractor:</b>  <b>License No:</b>			

2.9	Termite certification sighted  <b>Part A method:</b>  <b>Operator:</b>  <b>Date of treatment:</b>			
2.10	Statutory Inspection Certificates sighted			
2.11	Final Occupation Certificate sighted  Date issued:  Issued By:			
	Comments on 2.1 to 2.11 above:			

**Advised by owner Builder Nil**

**Observed on site Nil**

**Section 4 – Condition & status of INCOMPLETE WORKS**

Including MINOR & MAJOR items  
NOTE: If there are no incomplete works enter “Nil”

Nil.

**Section 5 – Detailed list of DEFECTS IDENTIFIED**

Including MINOR & MAJOR items  
Note: If there are no defects enter “Nil”

Nil.

**Section 6 – Areas of inaccessibility**

<u>Inaccessible areas:</u>	<u>Reason for no access:</u>
There were no inaccessible areas.	

**Section 7 – Comment on workmanship standard and materials used**

Workmanship:

Materials:

**CONSTRUCTION DETAILS: Due to our concerns regarding upper level balconies/decks we require you to complete the following: (If there is no upper level balconies/decks please state ‘Nil Balconies’ on comment lines below.)**

1. Is there a flashing in place between the deck and door/wall?
2. Per the Owner Builder has drilling through the membrane for Balustrade been avoided?
3. Is there a fall?
4. Is there a drip tray?
5. Is there a certificate from a licensed waterproofing membrane Installer?

**If you answered ‘NO’ to any of the above, please provide a detailed explanation:**

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<b>Section 8 - Report</b>		Yes	No
8.1	Is there evidence that the works inspected do not comply with the dimensions, extent, overhangs, set backs and conditions as set out in the approved building plans or that they do not comply with the relevant building codes		No
8.2	Is there evidence of moisture penetration from the wet areas?		<b>No</b>

Details of any questions 8.1 to 8.2 above answered "Yes"

SAMPLE

**Section 9 - Recommended exclusions**

SAMPLE

**Section 10 – Declaration**

Inspector Name:

Report prepared by:

Report signed by:

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

**\*\*\* Please attach a copy of your Professional Indemnity Insurance Certificate of Currency to this report \*\*\***

SAMPLE