

Property Observation Checklist

To be completed by a qualified Surveyor



JHAY0296

Guidance notes

Please complete in BLOCK CAPITALS and black ink and return it to James Hay Partnership, Dunn's House, St Paul's Road, Salisbury, SP2 7BF.

Should you have any queries, please call our general enquiry number 03455 212 414.

1 Surveyor details

Surveyor to complete

Site/Property

Date of inspection

Surveyor's name

Approximate date of construction

Surveyor's address

 Postcode

Existing use of site

2 Property information

Surveyor to complete

Is the property:

Occupied Yes No Vacant Yes No Dilapidated Yes No

Was the immediate vicinity inspected?

Yes No

Are there any adverse ground conditions adjoining properties, or uses that may give rise to land contamination?

Yes No If **Yes**, please provide details

Does the property contain a lift?

Yes No

Does the property contain any significant items of plant and/or machinery?

Yes No If **Yes**, please provide details

Does the site include:

Main property Yes No Outbuildings, including garages and stores Yes No Agricultural land Yes No Water course or adjacent thereto Yes No Derelict or rough ground Yes No **Inspected:**Main property Yes No Outbuildings, including garages and stores Yes No Agricultural land Yes No Water course or adjacent thereto Yes No Derelict or rough ground Yes No

	Present	Inspected	Is further investigation recommended?
Asbestos	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Waste disposal/processing/fly tipping/landfill	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fuel tanks above ground	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Fuel tanks below ground	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other tanks or containers of hazardous/toxic materials i.e. chemicals, pesticides, fertilisers, acids, paints or radioactive materials	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Discoloured or smelly water/liquid	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Oil staining	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Irregular topography	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Japanese Knotweed	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other invasive non-native species	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Vegetation dieback	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

If you have indicated above that fuel tanks are present, please indicate here if they are in current use.

Yes No

If **Yes**, please provide details

Have you had sight of any environmental reports relating to the property?

Yes No

If **Yes**, please provide details

To your knowledge, are there any known environmental issues relating to previous activities on this or adjacent sites?

Yes No

If **Yes**, please provide details

Any other comments?

4 Surveyor signature

Signature

Surveyor qualification

Date

D
D
M
M
Y
Y
Y
Y

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