

PROGRESS INSPECTION REPORT

Client Reference No. _____

Progress Inspection #: _____

File No.: _____

NAS No.: _____


CLIENT	CLIENT: _____	APPRAISER	APPRAISER: Joseph _____
	ATTENTION: _____		COMPANY: _____
	ADDRESS: _____		ADDRESS: _____
	CITY: _____ PROVINCE: _____ POSTAL CODE: _____		CITY: _____ PROVINCE: _____ POSTAL CODE: _____
	PHONE: _____ E-MAIL: _____		PHONE: _____ E-MAIL: _____
PROPERTY	APPLICANT'S NAME: _____		
	PROPERTY ADDRESS: _____	CITY: _____	PROVINCE: _____ POSTAL CODE: _____
SERVICES	LEGAL DESCRIPTION: _____		
	<input type="checkbox"/> Rénovation / amélioration <input checked="" type="checkbox"/> Nouvelle construction Occupied : <input type="radio"/> Oui <input type="radio"/> Non		
	Completed	Septic	Sanitary Sewer
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Storm Sewer	Municipal Water	Well
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Curb & Gutter	Paved Road	Sidewalk
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CONSTRUCTION STAGE	CONSTRUCTION STAGE		%ALLOWED
			%COMPLETED
	TOTAL%COMPLETED		
	Excavation, Foundation and Footings		
	Dampproof and Backfill		
	Framing and Sheathing		15
	Roofing		6
	Exterior Doors and Garage Doors		2
	Windows and Skylight		4
	Rough Electrical		4
	Rough Plumbing		3
	Insulation		2
	Exterior Finish		9
	Rough Heating		2
	Basement Floor		2
	Drywall		8
	Heating Equipment		4
	Interior Doors and Frames		2
	Finished Floors		4
	Finished Electrical		1
	Finished Plumbing		3
	Finished Carpentry		3
	Cabinetry		7
	Painting		4
Walks, Driveway, Final Grading and Landscaping		3	
Total		88	
COST	Total Cost of Construction: \$ _____ Estimated Cost to Complete: \$ _____		
	COMPLIANCE: The following schedule applies to advance draws provided that construction is proceeding as per plans, specifications, and costs remain unchanged from the original appraisal report. Oui <input type="checkbox"/> Non <input type="checkbox"/> (If No, see comments)		
	COMMENTS _____		
CERTIFICATION	CERTIFICATE: I certify that I have personally inspected the property at the above location and that in my opinion the state of completion is as indicated above.		
	APPRAISER SIGNATURE:  NAS Appraiser Password: <input type="password"/> <input type="checkbox"/> Notarius NAME: Joseph DESIGNATION: _____ MEMBER # _____ DATE SIGNED: _____ DATE OF INSPECTION: _____ LICENSE INFO (where applicable) _____ NOTE: For this appraisal to be valid, an original or a password protected digital signature is required.	SUPERVISOR SIGNATURE: _____ Supervisor Password <input type="password"/> <input type="checkbox"/> Notarius NAME: _____ DESIGNATION: _____ MEMBER # _____ DATE SIGNED: _____ DATE OF INSPECTION: _____ LICENSE INFO (where applicable) _____ NOTE: For this appraisal to be valid, an original or a password protected digital signature is required.	

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Review

Complete