

## Appendix B - Internal Moisture Intrusion Checklist

**Perform as soon as possible after moisture intrusion problems are reported.**

Property Name: <b>CREEKSIDE VILLAGE</b>
Date Reported: <b>11/03/21</b>
Time Reported: <b>12:00 am</b>

Unit# <b>303</b>
Inspector's Name: <b>Mark Gordillo</b>

**Type of moisture intrusion (clear, grey, black water):**

Check Only One

		Inspector's Initials	Comments/Follow-up
Clear	<input type="checkbox"/>	M.G.	
Grey	<input type="checkbox"/>	M.G.	
Black	<input checked="" type="checkbox"/>	M.G.	

### Inspection Item:

**Staining/discoloration observed on building materials:**

Ceiling

Walls

Windows

Yes	No	Inspector's Initials	Comments/Follow-up
<input type="checkbox"/>	<input checked="" type="checkbox"/>	M.G.	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	M.G.	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	M.G.	

**Staining/discoloration observed near utilities:**

Sinks

Potable water lines

Drain lines

Yes	No	Inspector's Initials	Comments/Follow-up
<input type="checkbox"/>	<input checked="" type="checkbox"/>	M.G.	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	M.G.	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	M.G.	

**Building material impacted by moisture intrusion:**

Location - which room / room(s) etc.

Square Footages

Wood moisture meter results

Concrete moisture meter results

M/BEDROOM

**tbgt**