**RFP # 26-01 Roof Inspection & Repair**

**Sample Roof Inspection Report Template**

Inspection Report #: [Enter Report Number]

Inspection Date: [MM/DD/YYYY]

Inspector Name: [Full Name]

Company Name: [Contractor or Firm]

Contact Info: [Phone & Email]

# 1. Property Information

Facility Name: [Enter Facility Name]
Address: [Street, City, ZIP]
Roof Type: [Flat, Pitched, Metal, etc.]
Roof Material: [EPDM, TPO, Shingle, etc.]
Roof Age (approx.): [Years]
Square Footage: [Estimated or Actual]
Last Inspection Date: [If available]
Weather During Visit: [Sunny, Cloudy, Rain, etc.]

# 2. Visual Inspection Summary

Roof Surface: [✓ Good / Fair / Poor] – Notes: [Blistering, punctures, wear, algae, etc.]
Flashing: [✓ Good / Fair / Poor] – Notes: [Lifting, missing, rusted]
Drains & Gutters: [✓ Good / Fair / Poor] – Notes: [Clogged, damaged, functioning properly]
Roof Penetrations: [✓ Good / Fair / Poor] – Notes: [Cracks, gaps, unsealed areas]
Perimeter Edges: [✓ Good / Fair / Poor] – Notes: [Loose edging, detachment]
Skylights/Vents: [✓ Good / Fair / Poor] – Notes: [Leaking, broken seals]
Evidence of Leaks: [✓ Yes / No] – Notes: [Water stains, mold, moisture intrusion]
Interior Ceiling: [✓ Good / Fair / Poor] – Notes: [Staining, sagging, wet spots]

# 3. Photographic Documentation

Attach labeled photographs of key areas: Overall roof view, damaged areas, drainage systems, etc.

# 4. Findings and Recommendations

Summary of Issues Identified: [Narrative summary of key concerns found during the inspection.]

Recommended Repairs or Maintenance:
- Priority: High – Action: Replace torn membrane – Location: NW corner – Est. Cost: $2,000
- Priority: Medium – Action: Clear clogged gutters – Location: South edge – Est. Cost: $300

# 5. Additional Notes

[Observations, limitations, safety access, warranty concerns.]

# 6. Inspector Certification

I hereby certify that the information contained in this inspection report is accurate to the best of my knowledge, based on a visual inspection conducted on the date listed above.

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