



## Property Checklist for Annual Inspections by the Property Stewards

*This form is made available so that the inspection can be carried out during the light summer evenings. When the inspection and supplement has been completed (one for each property for which the Circuit Meeting acts as Managing Trustees), it should be forwarded for approval by the Autumn Circuit Meeting.*

Name of Property	Name of Circuit	Date Year Ending
		31/08/

The Site and Building Surroundings	1	2	3
Are the boundary walls, fences and gates in good condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are paths, steps and ramps in good condition and free from hazards?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the manhole covers sound and are drains running freely?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any other external features on which to report?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

The Exterior of the Building	1	2	3
<b>General Structure: Wall</b>			
Are the external walls satisfactory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any indications of penetrating dampness?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the external ground level at least 150mm below damp course level?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all airbricks clear?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the building free of timber decay?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there damage due to vandalism?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Roof structure and coverings</b>			
Are all roof coverings (pitched and flat) in good condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all flashings, edges and junctions satisfactory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all roof spaces free of water penetration?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The Exterior of the Building</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Rainwater disposal</b>			
Are all gutters and downpipes clear and working properly?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all gullies clear?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>External doors &amp; windows</b>			
Are all external doors in good condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all window frames in sound condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>External decorations</b>			
Are all the decorations to woodwork, metal work etc., in good condition?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The interior of the building</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Ceilings, walls, partitions &amp; doors</b>			
Are all ceilings satisfactory and in good decorative order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all walls internally and partitions etc satisfactory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any signs of dampness and or timber decay?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all internal doors and windows sound and secure?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Floors &amp; balconies etc</b>			
Are all floors sound and the floor coverings clean and in good order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all stairs and steps in good order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The Building Services</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Heating System</b>			
Is the heating system satisfactory and in good working order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has there been an annual boiler inspection?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the gas installation satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Electrical Installation &amp; appliances</b>			
Is the electrical installation satisfactory?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The Building Services</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Kitchen &amp; sanitary facilities</b>			
Are all the kitchen facilities in good order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the toilet facilities and all the sanitary fittings clean and in good order?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>Security, Access, Health and Safety</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Fire Precautions (see <a href="#">Methodist Insurance Guidance notes</a>)</b>			
Are fire precautions adequate e.g. smoke alarms, fire extinguishers/blankets etc.?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there satisfactory means of escape from the building?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Health and Safety</b>			
Has the mandatory Health & Safety Risk Assessment been carried out? (see <a href="#">Methodist Insurance Guidance notes</a> )		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Environment Audit</b>			
Has an environmental audit been carried out as a recommended contribution to the Connexional Environmental policy? (see the <a href="#">Carbon Reduction</a> page for more information)		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Facilities for the disabled</b>			
Equalities Act (2010) Has full provision been made to comply with the Equalities Act?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you undertaken an access audit of the premises?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Signed: _____	Position Held: _____	Date: _____
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