

Site Visit Report

Initial Call Date _____ Case No _____
 Site Visit Date _____ Investigation Date _____
 Client Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone _____ Alt Phone _____

Site information

Home Business Other _____ Age/Date Built _____
 General Condition _____ Recent upgrades to heating/plumbing system _____
 Recent remodeling? Yes No Date Started _____ Date Done _____
 Type of building material _____ Number of floors _____
 Garage – Attached Separate Driveway/carport Number of floors
 Yard – Garden Grass Rock Other _____

Cooling

Heating

<input type="checkbox"/> Floor Fans	<input type="checkbox"/> Ceiling Fans	<input type="checkbox"/> Window Fans	<input type="checkbox"/> Heat Pump	<input type="checkbox"/> Furnace	<input type="checkbox"/> Space Heater
<input type="checkbox"/> Central Air	<input type="checkbox"/> Window Units		<input type="checkbox"/> Fire Place	<input type="checkbox"/> Wood Heater	<input type="checkbox"/> Wall Unit

Interior

Room	General condition	Avg. EMF	Avg. Temp
<input type="checkbox"/> Living Room	_____	_____	_____
<input type="checkbox"/> Dining Room	_____	_____	_____
<input type="checkbox"/> Kitchen	_____	_____	_____
<input type="checkbox"/> Family Room	_____	_____	_____
<input type="checkbox"/> Bathroom 1	_____	_____	_____
<input type="checkbox"/> Bathroom 2	_____	_____	_____
<input type="checkbox"/> Master Bedroom	_____	_____	_____
<input type="checkbox"/> Bedroom 1	_____	_____	_____
<input type="checkbox"/> Bedroom 2	_____	_____	_____
<input type="checkbox"/> Bedroom 3	_____	_____	_____
<input type="checkbox"/> Basement	_____	_____	_____
<input type="checkbox"/> Attic	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____
<input type="checkbox"/> Other _____	_____	_____	_____

Pets

Type / Number	General Condition / Location
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Cats _____

Dogs _____

Other _____

Atmospheric Conditions

The weather is

Clear

Clearing

Dusty

Cloudy

Foggy

Rainy

Dry

Misty

Sunny

Damp

Humid

The wind is

Still

Strong

Damp

Gentle

Shifting

Dry

Steady

Cold

Blowing from: _____

Gusty

Hot

Neighborhood is

Pond

Desert

Transformer

River

Creek

Transmission Tower

Stream

Forest

Microwave Tower

Well

Factory

Radio Station

Spring

Highway

Cemetery

Swamp

Railway

Lake

Mountain

Field

Power Station

Landscaping is

Open

Wooded

Granite

Hilly

Boulders

Quartz

Mountainous

Large Rocks

Fountain

Level

Gravel

Spa

Pasture

River rock

Pool

Field

Flagstone

Landscaped

Fieldstone

