

## **Scope of Work Primer**

This document helps you think through the different aspects of your construction project and 'prime' about aspects that you may not have thought of already. Completing this document will help you formalize the scope of work for presenting to contractors. This completed document outlines and describes the detailed nature of the possible project Scope of Work.

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## I. STRUCTURAL SYSTEMS ☐ See Home Owner's Association Agreement ☐ Yes ☐ No **A. Foundations** ☐ Remove ☐ Replace ☐ New ☐ Repair **Foundation Type:** ☐ Slab on Grade ☐ Pier and Beam □ Combination $\square$ Other: **Crawl Space Access:** ☐ Interior ☐ Exterior ☐ Other: **Foundation Walls:** ☐ Block / Brick $\square$ Poured Concrete $\square$ Stone ☐ Wood ☐ Other: \_\_\_\_\_ ☐ Option \_\_\_\_\_ Scope of Work Priority: $\square$ Base Comments: $\square$ Yes $\square$ No **B. Grading and Drainage Grading:** ☐ Remove ☐ Repair ☐ Replace ☐ New Drainage: ☐ Remove ☐ Repair ☐ Replace ☐ New Scope of Work Priority: ☐ Base ☐ Option \_\_\_\_ Comments: \_ ☐ Yes ☐ No **C. Roof Covering** ☐ Remove ☐ Repair ☐ Replace ☐ New **Roofing Material:** ☐ Asphalt Shingle ☐ Wood Shingles / Shakes ☐ Tile / Slate $\square$ Other: Max Life: ☐ 10-15 year ☐ 15-20 year ☐ 20-25 year ☐ 25-30 year ☐ 30-35 year $\square$ 35+ years Square Footage: \_\_\_ Flashing: ☐ Remove ☐ Repair ☐ Replace ☐ New ☐ Flashing Material ☐ Valley Material ☐ Plumbing Vents ☐ Cricket / Saddle Flashing



		<b>Gutters and Downspouts:</b>			
		☐ Remove	☐ Repair	☐ Replace	□ New
		☐ Gutters	$\square$ Downspouts		
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
□ Yes	□ No	D. Roof Structure and Attic			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Roof Style:			
		☐ Flat/Low Slope	☐ Gable	$\square$ Gambrel	☐ Hip
		$\square$ Shed	☐ Other:		
		Pitch:			
		□ Low	☐ Medium	☐ Steep	$\square$ Combination
		Roof Structure Material:			
		☐ Conventional Wood	☐ Metal Truss	☐ Wood truss	
		☐ Combination	☐ Other:		
		Roof Sheathing Material:			
		☐ 1"x Wood	☐ Plywood		
		⊠ Other:		Square Footage o	f Area:
		Attic Access:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Access Type:			
		☐ Knee Wall	☐ Pull-down	$\square$ Scuttle-hole	☐ Stairs
		☐ Other:			
		Access Location:			
		☐ Bedroom	☐ Closet	$\square$ Hallway	$\square$ Garage
		☐ Other:			
		Attic Flooring:			
		☐ Complete	☐ Partial		☐ None
		Туре:			
		☐ Storage	$\square$ Subfloor	$\square$ Walkway	
		Insulation:			
		☐ Repair	☐ Replace	$\square$ New	
		Insulation Type:			
		☐ Batt	☐ Loose Fill	$\square$ Other:	
		Depth (Inches):			
		Attic Fans:			
		☐ Remove	☐ Repair	☐ Replace	□ New



	Attic Fan Type:			
	☐ Passive	$\square$ Powered		
	Attic Ventilation:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	$\square$ Soffit Vent	$\square$ Ridge Vent	$\square$ Gable Vent	$\square$ Eaves Vent
	☐ Other:			
	Vapor Barriers:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
☐ Yes ☐ No <b>E. V</b>	Walls (Interior and Exterior	r)		
	Interior Walls:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Туре:			
	☐ Sheetrock	$\square$ Paneling	☐ Other	
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
	Painting:			
	Square Footage of Ar	ea:	$\square$ One Coat	☐ Two-Coat
	Finish:	☐ Glossy	☐ Semi-Gloss	☐ Flat
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:		-	
	Exterior Walls:			
	☐ Remove	☐ Repair	☐ Replace	$\square$ New
	Construction Type:			
	$\square$ Wood Frame	☐ Metal Frame	☐ Masonry	☐ Unknown
	☐ Other:			
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
			☐ Option	



Exterior Wall Siding:			
$\square$ Remove	☐ Repair	☐ Replace	□ New
Material:			
☐ Stucco/Stone	☐ Brick	$\square$ Wood	$\square$ Metal/Vinyl
☐ Fiber Cement	☐ EIFS	Other:	
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Trim / Soffit / Fascia:			
☐ Remove	☐ Repair	☐ Replace	$\square$ New
Linear Footage:		<u> </u>	
Material Type:			
$\Box$ Treated Lumber	☐ Pine	$\square$ Cedar	$\square$ Metal/Vinyl
☐ Fiber Cement	☐ EIFS	☐ Other:	
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Caulking:			
☐ Remove	☐ Repair	☐ Replace	□ New
Linear Footage:		_	
Location(s):			
☐ Windows	☐ Doors	☐ Masonry	☐ Corners
☐ Penetrations	☐ Other:		
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
☐ Yes ☐ No <b>F. Ceilings, Floors, Stairs and</b>	l Handrails		
Ceilings:			
☐ Remove	☐ Repair	☐ Replace	☐ New
Square Footage of A	rea:	Ceiling Height (ft.	'-in"):
Material:			
☐ Drywall	☐ Durock	☐ Ceiling Tiles	$\square$ Wood
☐ Concrete	$\square$ Other:		



Туре:			
$\square$ Combination	$\square$ Vaulted	$\square$ Angled	☐ Flat
$\square$ Other:	_		
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Painting:			
	☐ Repair	☐ Replace	□ New
Square Footage of Area	a:	☐ One Coat	☐ Two-Coat
Finish:	☐ Glossy	☐ Semi- <b>Gloss</b>	☐ Flat
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Flooring:			
☐ Remove	☐ Repair	☐ Replace	□ New
Material:			
□ Wood	☐ Carpet	☐ Tile	☐ Vinyl
☐ Laminate	□ Other		<u> </u>
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Stairs:			
☐ Remove	☐ Repair	☐ Replace	$\square$ New
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Railing Handrail:			
☐ Remove	☐ Repair	☐ Replace	□ New
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Steps:			
☐ Remove	☐ Repair	☐ Replace	□ New
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			



⊔ Yes	⊔ No	G. Doors (Interior and Exterio	r)		
		Interior Doors:			
		☐ Remove	☐ Repair	☐ Replace	☐ New
		Location:			
		☐ Bathroom	$\square$ Bedroom	$\square$ Closet	☐ Garage
		$\square$ Study / Office	☐ Utility Closet	$\square$ Other:	
		Door Type:			
		☐ Solid Wood	☐ Hollow Core	☐ Accordion	☐ Bi-Fold
		$\square$ Louvered	☐ Glass	$\square$ Other:	
		Door Finish:			
		☐ Factory Finished	□Paint	☐ Stain	
		☐ Other:		Color:	
		Hardware Type:			
		☐ Security Lockset	☐ Pass-Through	☐ Closet	☐ Combo
		Hardware Finish:			
		☐ Oiled-Bronze	☐ Black Enamel	☐ White Enamel	☐ Brass
		☐ Nickel	$\square$ Other:		
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
		Exterior Doors:			
		☐ Remove	☐ Repair	☐ Replace	$\square$ New
		☐ Remove  Location:	□ Repair	☐ Replace	□ New
			□ Repair □ Back	<ul><li>☐ Replace</li><li>☐ Garage</li></ul>	□ New
		Location:	☐ Back		
		Location:	☐ Back		
		Location:   Front  Other:	□ Back	☐ Garage	□ Side
		Location:	□ Back	☐ Garage ☐ Vanity Door	□ Side
		Location:	□ Back	☐ Garage ☐ Vanity Door	□ Side
		Location:	□ Back	☐ Garage ☐ Vanity Door	□ Side
		Location:  Front Other:  Door Type: Solid Wood Sliding  Door Finish:	☐ Back ☐ Steel ☐ Other:	☐ Garage ☐ Vanity Door —	□ Side
		Location:	☐ Back ☐ Steel ☐ Other:	☐ Garage ☐ Vanity Door —	□ Side □ Glass
		Location:	☐ Back ☐ Steel ☐ Other:	☐ Garage ☐ Vanity Door —	□ Side □ Glass



	Hardware Finish:	_	_	_
	☐ Oiled-Bronze	☐ Black Enamel	☐ White Enamel	☐ Brass
	□ Nickel	□ Other:	_	
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
	Overhead Garage Door:			
	☐ Remove	☐ Repair	☐ Replace	☐ New
	Material:			
	$\square$ Wood	☐ Fiberglass	☐ Masonite	☐ Metal
	Other:			
	Hardware:			
	☐ Remove	☐ Repair	☐ Replace	☐ New
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
☐ Yes ☐ No <b>H.</b> Y	Windows			
	☐ Remove	☐ Repair	☐ Replace	☐ New
	Window Location:			
	☐ Bathroom	$\square$ Bedroom	☐ Closet	$\square$ Garage
	$\square$ Study / Office	$\square$ Utility Closet	$\square$ Other:	
	Window Type:			
	☐ Single Hung	$\square$ Double Hung	$\square$ Casement	$\square$ Sliding
	Other:			
	Frame Material:			
	☐ Aluminum	☐ Metal	$\square$ Vinyl	$\square$ Wood
	Other:			
	Frame Finish:			
	☐ Paint / Stain	$\square$ Laminate	$\square$ Other:	
	☐ Flat	☐ Semi-Gloss	☐ High Gloss	
	Glazing:			
	☐ Single Glaze	$\square$ Insulated Glass	☐ Double Insulate	ed
	$\square$ Other:			
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			



		5	torms and Screens:			
			☐ Remove	☐ Repair	☐ Replace	□ New
		N	/laterial:			
			$\square$ Wood	☐ Metal	☐ Wood/Metal Co	ombo
			Other:			
		S	cope of Work Priority:	☐ Base	☐ Option	
		C	Comments:			
$\square$ Yes	$\square$ No	I. Firep	lace / Chimney			
		F	ireplace:			
			☐ Remove	☐ Repair	☐ Replace	□ New
		L	ocation(s):			
			☐ Den	$\square$ Living Room	$\square$ Bedroom	
			Other:			
		T	уре:			
			$\square$ Masonry	$\square$ Metal Insert	☐ Surface Mounte	ed
			☐ Other:			
		F	uel Source:			
			☐ Natural Gas	☐ Propane	$\square$ Wood Burning	
			☐ Wood Burning Stove	(Consult manufactur	rer for limitations.)	
		В	lower:			
			☐ Remove	☐ Repair	☐ Replace	☐ New
		D	Damper:			
			☐ Remove	☐ Repair	☐ Replace	☐ New
		F	irebox:			
			☐ Remove	☐ Repair	☐ Replace	☐ New
		S	cope of Work Priority:	☐ Base	☐ Option	
		C	Comments:			
		C	chimney:			
			☐ Remove	$\square$ Repair	☐ Replace	□ New
		C	himney Material:			
			$\square$ Framed / Siding	$\square$ Masonry	☐ Metal	☐ Stucco
			☐ Other:			



		Chimney Specialties:			
		$\square$ New Flue Liner	☐ Cricket Flashing	☐ Spark Arrestor	☐ Rain Cap
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			_
$\square$ Yes	$\square$ No	J. Porches, Decks, and Covers			
		Exterior Area:			
		$\square$ Remove	☐ Repair	☐ Replace	$\square$ New
		☐ Porch / Patio	$\square$ Stoops / Steps	☐ Balcony	☐ Deck
		Material Type:			
		☐ Composite	☐ Concrete	$\square$ Wood	☐ Metal
		☐ Other:			
		Material Finish:			
		$\Box$ Treated	$\square$ Painted	☐ Other:	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
		Railings / Balusters:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		☐ Porch / Patio	$\square$ Stoop / Steps	☐ Balcony	☐ Deck
		Railings / Balusters Materia	al:		
		$\square$ Wood (Treated)	$\square$ Composite	☐ Metal	$\square$ Combination
		☐ Other:			
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
		Deck / Porch Covers:			
		$\square$ Remove	☐ Repair	☐ Replace	□ New
		☐ Porch / Patio	$\square$ Stoop / Steps	☐ Balcony	☐ Deck
		Deck / Porch Cover Materia	al:		
		$\square$ Wood	☐ Metal	☐ Other:	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			



$\square$ Yes	$\square$ No	K. Carports			
		Carport:			
		$\square$ Remove	☐ Repair	☐ Replace	□ New
		Carport Material:			
		☐ Brick	$\square$ Wood	☐ Other:	
		Scope of Work Priority	v: □ Base		_
		Comments:			
☐ Yes	$\square$ No	L. Driveways and Walkways			
		Driveway:			
		$\square$ Remove	☐ Repair	☐ Replace	□ New
		Driveway Material:			
		$\square$ Asphalt	☐ Concrete	$\square$ Gravel	☐ Pavers
		☐ Other:			
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
		Walkway:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Walkway Material:			
		$\square$ Asphalt	☐ Brick	$\square$ Concrete	$\square$ Gravel
		☐ Flagstone	☐ Pavers	$\square$ Other:	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			_
□ Yes	□No	M. Yard Fencing and Retaining	g Walls		
		Fencing:			
		$\square$ Remove	☐ Repair	☐ Replace	□ New
		Fencing Material:			
		☐ Metal/Chain Link	$\square$ Wood	☐ Masonry	
		☐ Other:		<u></u>	
		Scope of Work Priority:	☐ Base	☐ Option	_
		Comments:			



Retaining Wall:			
☐ Remove	☐ Repair	☐ Replace	□ New
Retaining Wall Material:			
$\square$ Masonry / Stone	☐ Brick	☐ Concrete	$\square$ Wood
☐ Other:			
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			_
CAL SYSTEMS			
Service Entrance and Pane	ls		
Exterior Electrical Service	Туре:	$\square$ Overhead	$\square$ Underground
Main Entry Wire:			
☐ Remove	☐ Repair	☐ Replace	□ New
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Main Panel:			
☐ Remove	☐ Repair	☐ Replace	☐ New
Location:			
☐ North	☐ South		□ West
Power:			
Amps:	□ 100	□ 200	☐ Other:
Volts:	□ 120	□ 240	$\square$ Other:
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Sub Panel(s):			
☐ Remove	☐ Repair	☐ Replace	□ New
Existing Power:			
Amps:	□ 100	□ 200	$\square$ Other:
Volts:	□ 120	□ 240	☐ Other:
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
	Retaining Wall Material:  Masonry / Stone Other: Other: Scope of Work Priority: Comments: Exterior Electrical Service Main Entry Wire: Remove Scope of Work Priority: Comments: North Power: Amps: Volts: Scope of Work Priority: Comments: Scope of Work Priority: Comments: Volts: Scope of Work Priority: Comments: Scope of Work Priority:	Remove	Remove



⊔ Yes	⊔ No	B. Bra	anch Electrical			
			Wiring:			
			☐ Remove	☐ Repair	☐ Replace	□ New
			Scope of Work Priority:	☐ Base	☐ Option	
			Comments:			
			Interior Fixtures:			
			$\square$ Remove	☐ Repair	☐ Replace	□ New
			Scope of Work Priority:	☐ Base	☐ Option	
			Comments:			
			Attic / Crawlspace Electrical	l:		
			☐ Remove	☐ Repair	☐ Replace	□ New
			Scope of Work Priority:	☐ Base	☐ Option	
			Comments:			
			Exterior Fixtures:			
			☐ Remove	☐ Repair	☐ Replace	□ New
			Scope of Work Priority:	☐ Base	☐ Option	
			Comments:			
			Garage Fixtures:			
			☐ Remove	☐ Repair	☐ Replace	□ New
			Scope of Work Priority:	☐ Base	☐ Option	
			Comments:			
			VENTILATION and A/C			
☐ Yes	□ No	A. He	ating System:	_		_
			☐ Remove	☐ Repair	☐ Replace	□ New
			Equipment Type:			
			☐ Floor/Wall Furnace		☐ Heat Pump	☐ Hydronic
			☐ Space/Window	□ Other:		_
			Energy Source:	□ Hot Weter		
			☐ Geo Thermal	☐ Hot Water	☐ Coal / Wood	☐ Oil
			<ul><li>□ Natural Gas</li><li>□ Other:</li></ul>	☐ Propane	□ Solar	☐ Steam



		Air Distribution:	See - C. Ducts and	d Vents	
		Air Registers:	See - C. Ducts and	d Vents	
		Air Return Type:	See - C. Ducts and	d Vents	
		Filter:			
		☐ Electrostatic ☐ Other:	☐ Fiberglass	☐ Pleated	
		Controls:			
		☐ Manual	$\square$ Electronic	Other:	
		<b>Auxiliary Heat Source:</b>			
		$\square$ Coal / Wood	□ Oil	☐ Natural Gas	☐ Propane
		☐ Solar	☐ Other:		<u> </u>
		<b>Heating Exhaust Flue:</b>			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
$\square$ Yes	□ No	B. Cooling Equipment			
		☐ Remove	☐ Repair	☐ Replace	☐ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		<b>Equipment Type:</b>			
		☐ Floor/Wall Furnace		☐ Heat Pump	☐ Hydronic
		☐ Window Unit	Other:		<u> </u>
		Energy Source:	_	_	_
		☐ Electric	□ Oil	□ Natural Gas	☐ Propane
		☐ Other:			
		Filter:			
		☐ Electrostatic	☐ Fiberglass	☐ Pleated	
		Other:			
		Square Footage of Service A			
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			



	Wall Units:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
	Baseboard Heaters:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
$\square$ Yes $\square$ No <b>C.</b>	Ducts and Vents			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Air Distribution Type:			
	☐ Insltd Metal Duct	☐ Insltd Flex Duct	☐ Rigid Metal	☐ Plenum
	Air Return Type:			
	☐ Insltd Metal Duct	☐ Insltd Flex Duct	☐ Rigid Metal	☐ Plenum
	Air Registers:			
	☐ Remove	☐ Repair	☐ Replace	☐ New
	Quality:			
	☐ Economy	☐ Good	☐ Better	☐ Best
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
IV PIIIMR	SING SYSTEM			
	Water Supply System and F	ivturos		
les line A.		ixtures		
	Water Service:  ☐ Repair	☐ Replace	□ New	
	Scope of Work Priority:			
	Comments:			



Pipes:					
☐ Remove	☐ Repair	☐ Replace	□ New		
Scope of Work Priority:	☐ Base	☐ Option			
Comments:					
Kitchen Plumbing:					
☐ Remove	☐ Repair	☐ Replace	□ New		
Scope of Work Priority:	☐ Base	☐ Option			
Comments:					
Laundry / Utility Room:					
Laundry Sink:					
☐ Remove	☐ Repair	☐ Replace	□ New		
Quality:					
☐ Economy	$\square$ Good	☐ Better	☐ Best		
Laundry Equipment:	See - V. Appliances				
Laundry Equipment: Energy Source:	See - V. Appliances				
	See - V. Appliances	☐ Propane			
Energy Source:		☐ Propane			
Energy Source:	<ul><li>□ Natural Gas</li><li>□ Base</li></ul>	•			
Energy Source:  ☐ Electric  Scope of Work Priority:	<ul><li>□ Natural Gas</li><li>□ Base</li></ul>	•			
Energy Source:  ☐ Electric  Scope of Work Priority:	<ul><li>□ Natural Gas</li><li>□ Base</li></ul>	☐ Option	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments:	<ul><li>□ Natural Gas</li><li>□ Base</li></ul>	☐ Option			
Energy Source:  □ Electric  Scope of Work Priority:  Comments:  Bathroom(s):	<ul><li>□ Natural Gas</li><li>□ Base</li></ul>	☐ Option	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments:  Bathroom(s):  Location(s):	□ Natural Gas □ Base	☐ Option	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments:  Bathroom(s):  □ Upstairs	□ Natural Gas □ Base	☐ Option	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments:  Bathroom(s):  Location(s):  □ Upstairs  Sink(s):	☐ Natural Gas ☐ Base ☐ Downstairs	Option  Number of Bathro	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments:  Bathroom(s):  □ Upstairs  Sink(s):  □ Remove	☐ Natural Gas ☐ Base ☐ Downstairs	Option  Number of Bathro	ooms:		
Energy Source:  □ Electric  Scope of Work Priority:  Comments: □ Bathroom(s): □ Upstairs  Sink(s): □ Remove  Quality:	☐ Natural Gas ☐ Base ☐ Downstairs ☐ Repair	□ Option  Number of Bathro  □ Other:  □ Replace	Doms: New □ Best		



Tub(s):			
☐ Remove	☐ Repair	☐ Replace	□ New
Quality:			
☐ Economy	$\square$ Good	☐ Better	☐ Best
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Shower(s):			
Remove	☐ Repair	☐ Replace	□ New
Quality:			
☐ Economy	$\square$ Good	☐ Better	☐ Best
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Toilet(s):			
☐ Remove	☐ Repair	☐ Replace	$\square$ New
Quality:			
☐ Economy	$\square$ Good	☐ Better	☐ Best
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Shower/Tub Area			
☐ Remove	☐ Repair	☐ Replace	□ New
Quality:			
☐ Economy	$\square$ Good	☐ Better	☐ Best
Scope of Work Priority:	☐ Base	☐ Option	
Comments:			
Exterior Hose Bib(s):			
Remove	☐ Repair	☐ Replace	□ New
Quality:	·		
☐ Economy	☐ Good	☐ Better	☐ Best
Scope of Work Priority:	☐ Base		
Comments:			



		Bath Accessories:			
		☐ Remove	☐ Repair	☐ Replace	☐ New
		☐ Toilet Paper Holder	$\square$ Towel Bar	☐ Grab Bar	$\square$ Soap Dispenser
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Scope of Work Priority:	$\square$ Base	☐ Option	
		Comments:			
□ Yes	$\square$ No	B. Drains, Waste, Vents			
		Pipe Type:			
		☐ Remove	$\square$ Repair	☐ Replace	☐ New
		☐ Cast Iron	$\square$ PVC	$\square$ CPVC	
		☐ Other:		<u> </u>	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
□ Yes	□ No	C. Water Heating Equipment			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Water Heater Type:			
		☐ High Efficiency	$\square$ Instant	$\square$ Tank	☐ Mini
		Water Heater Size:		gal.	
		Location:			
		☐ Exterior Closet	$\square$ Garage	☐ Basement	☐ Attic
		Other:		_	
		Energy Source:			
		□ Natural Gas	☐ Propane	☐ Electric	
		Scope of Work Priority:	$\square$ Base	$\square$ Option	
		Comments:			
		Vent Pipe:			
		$\square$ Remove	☐ Repair	☐ Replace	□ New
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			



⊔ Yes	⊔ No	D. Hydro Therapy Equipment	_	_	_
		☐ Remove	☐ Repair	☐ Replace	□ New
		Location:			
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
	V. APP	LIANCES			
□ Yes	□No	A. Dishwasher:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:	·	•	
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number:	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
					_
☐ Yes	□ No	B. Food Waste Disposer:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number:	
		Scope of Work Priority:	□ Base	☐ Option	
		Comments:			
☐ Yes	□ No	C. Range Hood:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number:	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
□ Yes	□ No	D. Ranges/Ovens/Cooktops:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best



		Manufacturer:		_ Model Number	<b>:</b>
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	□ No	E. Refrigerator:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:	- 1		
		☐ Economy	☐ Good	☐ Better	☐ Best
		Manufacturer:		Model Number	<b>:</b>
		Scope of Work Priority:			
		Comments:			
☐ Yes	□ No	F. Microwave Cooking Equipr	ment:		
		□ Remove	☐ Repair	☐ Replace	□ New
		Quality:	·	•	
		☐ Economy	☐ Good	☐ Better	☐ Best
		Manufacturer:		Model Number	<b>:</b>
		Scope of Work Priority:	☐ Base		
		Comments:			
☐ Yes	□ No	G. Trash Compactor:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number	<b>!</b>
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	□ No	H. Bathroom Exhaust Fans an	d/or Heaters:		
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number	<b>:</b>
		Scope of Work Priority:			
		Comments:			



☐ Yes	☐ No	I. Whole House Vacuum Syste	m:		
		☐ Remove	☐ Repair	☐ Replace	☐ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Manufacturer:		Model Number: _	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	$\square$ No	J. Laundry Washer:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		Manufacturer:		Model Number: _	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	□ No	K. Laundry Dryer:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		Manufacturer:		Model Number: _	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
$\square$ Yes	$\square$ No	L. Dryer Vents:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		Manufacturer:		Model Number: _	
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	□ No	M. Garage Door Operator(s):			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			



		Manufacturer:		Model Number	:	
		Scope of Work Priority:	☐ Base			
		Comments:				
□ Yes	□ No	N. Door Bell and Chimes:				
		☐ Remove	☐ Repair	☐ Replace	$\square$ New	
		Quality:				
		☐ Economy	$\square$ Good	☐ Better	☐ Best	
		Manufacturer:		Model Number	:	
		Scope of Work Priority:	☐ Base	☐ Option		
		Comments:				
	VI. Ou	tdoor Systems				
		☐ See Home Owner's	s Association Agree	ement		
☐ Yes	□ No	A. Lawn Sprinklers:				
		☐ Remove	☐ Repair	☐ Replace	☐ New	
		Quality:				
		☐ Economy	☐ Good	☐ Better	☐ Best	
		Manufacturer:		Model Number	:	
		Scope of Work Priority:	☐ Base	☐ Option		
		Comments:				
☐ Yes	$\square$ No	B. Swimming Pools and Equip	oment:			
		☐ See Home Owner's	s Association Agree	ement		
		☐ Remove	☐ Repair	☐ Replace	☐ New	
		Quality:				
		☐ Economy	$\square$ Good	☐ Better	☐ Best	
		Manufacturer:		Model Number	:	
		Scope of Work Priority:	☐ Base	$\square$ Option		
		Comments:				
		Pool Light:				
		☐ Remove	☐ Repair	☐ Replace	□ New	
		Quality:				
		☐ Economy	$\square$ Good	☐ Better	☐ Best	



	Scope of Work Priority:	☐ Base	$\square$ Option	
	Comments:			
	Pool Equipment:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
	Pool Heater:			
	☐ Remove	$\square$ Repair	☐ Replace	□ New
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
☐ Yes ☐ No	C. Outdoor Cooking Equipme	nt:		
	☐ Remove	$\square$ Repair	☐ Replace	□ New
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best
	Scope of Work Priority:	☐ Base	☐ Option	
	Comments:			
☐ Yes ☐ No	D. Gas Lines:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Material:			
	☐ Black Iron	$\square$ Copper	$\square$ Other:	
	Shutoff Location:		<del>_</del>	
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best
	Scope of Work Priority:	$\square$ Base	$\square$ Option	
	Comments:			
☐ Yes ☐ No	E. Water Wells:			
	Well Pump:			
	☐ Remove	☐ Repair	☐ Replace	□ New
	Location:			
	☐ Well House	☐ Well Pit	☐ Basement	☐ Unknown
	Quality:			
	☐ Economy	$\square$ Good	☐ Better	☐ Best



		Scope of Work Priority:	□ Base	☐ Option	
		Comments:			
☐ Yes	□No	F. Sump Pump:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	$\square$ No	F. Septic System:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	$\square$ Good	☐ Better	☐ Best
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
☐ Yes	$\square$ No	G. Security System:			
		☐ Remove	☐ Repair	☐ Replace	□ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			
_					
☐ Yes	□ No	H. Fire Protection Equipment	:		
		Smoke / CO Detectors:			
		☐ Remove	☐ Repair	☐ Replace	☐ New
		Quality:			
		☐ Economy	☐ Good	☐ Better	☐ Best
		Scope of Work Priority:	☐ Base	☐ Option	
		Comments:			