

**WEATHERIZATION ASSISTANCE PROGRAM ESTIMATOR FIELD INSPECTION**  
**NORTH DAKOTA DIVISION OF COMMUNITY SERVICES**  
**SFN 59495 (01/12)**

Name		Job Number	Date
Address		City	Home Phone
Directions			Work Phone
Audited By	Furnace Work?	Heat Loss Needed?	Number of Rooms
Conditioned Building Specs.		Building Age:	
:	X	Lead Book? <input type="checkbox"/> Mobile Home <input type="checkbox"/> 1 Story <input type="checkbox"/> 1½ Stories <input type="checkbox"/> 2 Stories <input type="checkbox"/> 2½ Stories	
:	X		
:	X		
:	X		
:	X		
<b>Combustion Appliances Present</b>			
<input type="checkbox"/> Secondary Heat <input type="checkbox"/> Cook Stove <input type="checkbox"/> DHW <input type="checkbox"/> Fireplace <input type="checkbox"/> Other _____			
<b>General Heat Waste</b>		<b>Baseload</b>	
		Lights on 2 hours or more	Existing Wattage
		Refrigerator Make and Model	Kwh/Yr
		<b>Health and Safety</b>	
		Mold or Moisture Problems?	

	Exist	Add	Comments
<b>Miscellaneous</b>			
Water Heater Jacket	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Pipe Insulation		<input type="checkbox"/> Yes <input type="checkbox"/> No	
CO Detector	Location		
Smoke Detector	Location		
REEP			
Dryer Vent			
Dryer Vent Hose			
Roof Jack Kit	Location		

