**Dilapidation/ Existing condition report**

Site address:

Client:

Council:

Occupant providing access on day:

Date of inspection:

Weather:

**SCHEDULE OF DEFECTS:**

|  |  |  |
| --- | --- | --- |
| **Photo** | **Photo location and direction** | **Comment** |
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**Recommendations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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