



# East Ohio Conference Parsonage Inspection & Evaluation

**CHURCH:**

**DATE:**

**GCFA #:**

**Is the parsonage occupied?**

Pastor:

Renter:

Other:

*If parsonage is rented, it is recommended that the lease run from June 1 through May 31.*

*The STANDARDS FOR PARSONAGES are found on pages 8-9 thru 8-11, 2021 East Ohio Conference Journal.*

Review Date:

Reviewer:

Parsonage Phone:

Parsonage Address:

Contact Person:

Phone:

Year Parsonage Built:

Appraisal/Value:

Appraisal Date:

Location of deed: Indicate County Court House, Record Vol, Page, Date for each tract of land recorded. What is church name as recorded on deed

Location of copy of deed:

*(Safety Deposit box recommended)*

Date of File Photo:

*Please take digital pictures of exterior and include in report.*

Annual Repair and Maintenance

Amount Spent/Budget last Year:

- Color of Home Is there a floor plan on file?
- Is there a fire/alarm system? Name of Company?
  1. If yes, does it notify the Fire Dept? Location of Fire Dept?
  2. How many fire extinguishers are in the home?
  3. How many smoke detectors throughout the house?
  4. Are there carbon monoxide detectors installed?
  5. Are there any ground fault interrupter (GFI) outlets? How Many?  
Location
  6. How is the house secured? Window Locks Door Locks Alarm System  
Security issues needing addressed
- Does the present parsonage contain the following: (Please check where appropriate.)
 

One Level:	Two Levels:	Three Levels:
Type of Siding: Vinyl	Aluminum	Wood Brick
- **Living Room:** Size: Wall Color: Paint Paper Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:
- **Dining Room:** Size: Wall Color: Paint Paper Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:
- **Kitchen:** Size: Wall Color: Paint Paper Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:  
Is there room for kitchen table? How many chairs? Is there a ceiling fan?  
When was the kitchen last updated? What is the condition of the cupboards/counter?  
Is there a kitchen pantry? Is there adequate storage space?
- **Utility Room:** Size: Wall Color Paint Paper Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:  
Washer: Dryer: Work space for ironing and folding clothes:
- **Basement:** Size: Wall Color: Paint Paper Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:  
Dehumidifier: Other information about Basement
- **Bedroom # 1:** Size: Wall Color: Paint: Paper: Paneling  
Type of Flooring: Condition: Color of Carpet / Stain:  
Closet: Attached Bathroom: Ceiling Fan:

- **Bedroom # 2:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Closet: \_\_\_\_\_ Attached Bathroom: \_\_\_\_\_ Ceiling Fan: \_\_\_\_\_
- **Bedroom # 3:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Closet: \_\_\_\_\_ Attached Bathroom: \_\_\_\_\_ Ceiling Fan: \_\_\_\_\_
- **Bedroom # 4:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Closet: \_\_\_\_\_ Attached Bathroom: \_\_\_\_\_ Ceiling Fan: \_\_\_\_\_
- **Bathroom #1:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Tub: \_\_\_\_\_ Shower: \_\_\_\_\_ Ventilated: \_\_\_\_\_
- **Bathroom #2:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Tub: \_\_\_\_\_ Shower: \_\_\_\_\_ Ventilated: \_\_\_\_\_
- **Bathroom #3:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Tub: \_\_\_\_\_ Shower: \_\_\_\_\_ Ventilated: \_\_\_\_\_
- **Bathroom #4:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Tub: \_\_\_\_\_ Shower: \_\_\_\_\_ Ventilated: \_\_\_\_\_
- **Study:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_ Paneling  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Attached Bathroom \_\_\_\_\_ Closets: \_\_\_\_\_  
Paneling
- **Recreation/Family Room:** Size: \_\_\_\_\_ Wall Color: \_\_\_\_\_ Paint: \_\_\_\_\_ Paper: \_\_\_\_\_  
Type of Flooring: \_\_\_\_\_ Condition: \_\_\_\_\_ Color of Carpet or Stain: \_\_\_\_\_  
Location: \_\_\_\_\_ Attached Bathroom: \_\_\_\_\_ Closets: \_\_\_\_\_
- **Closets/Storage Space (other than those in already listed under bedrooms)**  
How many: \_\_\_\_\_ Locations: \_\_\_\_\_

	Materials & Composition	Condition	Last Inspected	Last Maintained	Recommendations
Roof					
Gutters/Downspouts					
Exterior Paint					
Brick/Stone					
Garage					
Outside Lighting					
Outside Water					
Lawn & Trees					
Foundation					
Basement					
Finished?					
Attic Finished?					
Other					

- How many car garage: \_\_\_\_\_ Is the driveway paved? Material?
- Is there an electric garage door opener?
- Is the garage attached to the house?
- Is other storage available? What type? Describe
- Where is the maintenance & lawn equipment stored?
- Are any of the following at the parsonage? Leaf Blower: Snow Blower: Lawn Mower:
- What size is the lawn? Is it fenced in? Material?
- When was the parsonage built? Any additions?
- Has there been a licensed inspection? Name type & date
- Are all electrical boxes properly grounded?
- What type of heating system is in the parsonage?
- Is the house air-conditioned? Type of AC
- What size is the hot water tank? Date installed:  
Recommendations for hot water tank:
- Is there a water softener? Who maintains the softener?
- Is the water system: City/County: Cistern: Well: Date water tested:
- Is the sewer System: City/County: Septic:
- Does the parsonage have a doorbell? Does the doorbell work properly?
- Are there multiple extension cords or adapters? Why?  
Recommendations:
- Any problems with sewer/waste water drainage? Describe  
Recommendations:
- Are all sinks and toilets working properly? If no, why?  
Recommendations:
- Are all tub/shower drains working properly? If no, why?  
Recommendations:

	Conditions		Conditions
Stove:	_____	Study Equipment	
Fridge/Freezer	.	Doorbells	
Washer	.	TV/Cable/Antenna	
Dryer	.	Internet connection	
Kitchen Cabinets	.	Storm Windows	
Dishwasher	.	Storm Doors	
Garbage Disposal	.	Locks	
Closets	_____	Insulation	
Storage Space Stair	.	Mower	
Railings-inside	.	Snow Removal	
Stair Railings-outside	.	Play Space	
Air Conditioning	.	Inside Lighting	
Drapes/Rods		Outside Lighting	
Other:		Fireplace Screens	

**\* Please be as descriptive as possible about the conditions of everything, and include anything else that you feel should be mentioned. Remember that a new family may need this to make a good decision about using the church housing. Present the parsonage in a good light, but do not embellish the true conditions of it.**

**ACTION PLAN FOR NEEDED REPAIRS**

**COMMENTS**

PLEASE MAKE COMMENTS ABOUT THE GENERAL CONDITION OF THE PARSONAGE. THE PARSONAGE FAMILY SHOULD BE CONSULTED AS TO WHAT THEY PERCEIVE THE NEEDS OF THE PARSONAGE TO BE.

Trustee/Parsonage Chairperson Signature

Address of Parsonage

Trustee/Parsonage Chairperson Signature

Pastor's Signature

**THIS FORM SHOULD BE COMPLETED IN THE FALL AND INCLUDED IN THE CHARGE CONFERENCE REPORTS.**

***Please distribute the following:***  
*--One copy to District Office*  
*--One copy to Trustee Chair*  
*--One copy to Parsonage Chair*  
*--One copy to parsonage Family*  
*--One copy to SPR Chair*  
***Please attach a copy to the omnibus***