**STATE OF OHIO**

**DEPARTMENT OF TRANSPORTATION**

**STRUCTURE INSPECTION REPORT**

|  |  |  |
| --- | --- | --- |
|  | County: |  |
| Inspector(s) for ODOT | Route: |  |
|  | Section: |  |
|  | Parcel(s): |  |
| ODOT Address and Phone Number of Inspector | State Job No**.:** | |
|  |  | |
|  |  | |
| Owner/Tenant and Telephone After Moving | Owner/Tenant Address After Moving | |
|  | PID No.**:** | |
|  | Agreed Possession Date:  **date.** | |
| Location of State-Owned Property | Date Moved: **T**ap to enter a date. | |
|  |  | |

Date Inspected: Click or tap to enter a date. Time Inspected: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Description of Structures: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, the undersigned agent for the State of Ohio, have inspected the above identified structure(s) and attest that all items of realty as set forth in the RE 95 are  or are not  present this date. I have accepted possession the \_\_\_\_\_\_\_\_\_\_\_\_\_ day of Click or tap to enter a date. And hereby authorize the Closing Agent to deliver the holdback monies subject to the following conditions:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Representative Date

I, the undersigned owner  agent for the owner  hereby give possession of the subject structure(s) to the State of Ohio on this date, and hereby acknowledge that I was advised that the holdback monies withheld are now available to me from the Closing Agent subject to the conditions that are mentioned in the above portion of the Structure Inspection Report.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Owner / Agent for Owner Date

Structure will be: Rented  Not Rented

Overall Condition of Structure(s): Good  Average  Poor

Utilities: On Off Meter In Out

Gas

Water

Electric

If the structure is to be demolished the meters need to be turned off and removed.

Yes No

Meters Turned Off:

Meters Removed:

Keys Received From:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date/Time: Click for date/time.

Structure Winterized: Yes  No  Water Tank Drained: Yes  No

Structure Secured (Doors and Windows Locked) Yes  No

Detection of Rodent Infestation: Yes  No  Heavy  Medium  Light

Date Treated: Click or tap to enter a date. Number of Rodenticide Packets Placed:

Date Retreated: Click or tap to enter a date. Number of Rodenticide Packets Placed:

Follow Up Date: Click or tap to enter a date.

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| --- |
| Action Taken |
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|  |
| Hazards Noted and Action Taken |
|  |
|  |
|  |
| Additional Comments |
|  |
|  |