



TECHNICAL CONSULTING REPORT

Page 1 of 1

| | | | |
|--|-------------------|-------------------|-----------|
| Report Date | | Report By: | |
| Homeowner | | | |
| Address | | | |
| Consult Type & Date(s) | Email / Telephone | | In Person |
| Purpose(s) of Meeting (generally) | | | |

| Service(s) Undertaken | <i>Observations</i> | <i>Recommendations</i> |
|------------------------------------|---------------------|------------------------|
| a. Visual Inspection | | |
| Attic | | |
| Basement / Crawlspace | | |
| Equipment | | |
| Other | | |
| b. Diagnostic Testing | | |
| Blower Door | | |
| Combustion Testing | | |
| Other | | |
| c. Written Materials Review | | |
| Audit Report | | |
| Proposal | | |
| Other | | |
| d. Other | | |
| | | |

NOTE: This Report was prepared at the request of the Homeowner, based on information and/or materials provided to STEP by the Homeowner and/or data or observations collected during limited visual inspection(s), diagnostic testing and/or review of written materials by STEP staff. Therefore, the information provided herein is intended to be reliable and informative; however, neither STEP nor the Town of University Park, MD assume any liability for the accuracy of any data, analyses, recommendations and/or other information provided by the Homeowner or contained herein.