



## Property Checklist for Annual Inspections by the Property Stewards

*This form is made available so that the inspection can be carried out during the light summer evenings. When the report has been completed it should be brought, along with any recommendations or proposals, to the autumn meeting of the Church Council where it will be included in the approval of the Church Return.*

Name of Church	Name of Circuit	Date Year Ending
		31/08/

The Site and Building Surroundings	1	2	3
Are the boundary walls, fences and gates in good condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are paths, steps and ramps in good condition and free from hazards?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the manhole covers sound and are drains running freely?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are signs/notice boards in good condition and with up to date information?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the grounds, surrounding areas and vegetation adequately maintained?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are any car parking areas safe and in good condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there adequate provision for wheelchair access?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any other external features on which to report?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

The Exterior of the Building	1	2	3
<b>General Structure: Wall</b>			
Are the external walls satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any indications of penetrating dampness	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the external ground level at least 150mm below damp course level?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all airbricks clear?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the building free of timber decay?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there damage due to vandalism?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The Exterior of the Building</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Roof structure and coverings</b>			
Are all roof coverings (pitched and flat) in good condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all flashings, edges and junctions satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all roof spaces free of water penetration?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Rainwater disposal</b>			
Are all gutters and downpipes clear and working properly?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all gullies clear?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>External doors &amp; windows</b>			
Are all external doors in good condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all window frames in sound condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any defective windowpanes?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are any window guards satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>External decorations</b>			
Are all the decorations to woodwork, metalwork etc., in good condition?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The interior of the building</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Ceilings, walls, partitions &amp; doors</b>			
Are all ceilings satisfactory and in good decorative order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all walls, including internal and partitions, satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there any signs of dampness and or timber decay?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all internal doors satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all windows sound and secure?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Floors &amp; balconies etc.</b>			
Are all floors sound and the floor coverings clean and in good order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all stairs and steps in good order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>The Building Services</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Heating System</b>			
Is the heating system satisfactory and in good working order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has there been an annual boiler inspection?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the gas installation satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Electrical Installation &amp; appliances</b>			
Is the electrical installation satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Kitchen &amp; sanitary facilities</b>			
Are all the kitchen facilities in good order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If kitchens are used for food preparation, are the requirements of the Local Authority Environmental Health Department being complied with?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are the toilet facilities and all the sanitary fittings clean and in good order?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there adequate toilet facilities for the disabled?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>Security, Access, Health and Safety</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Fire Precautions (see <a href="#">Methodist Insurance Guidance notes</a>)</b>			
Are all means of escape maintained and escape routes kept clear?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all exit signs and emergency lighting satisfactory?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has any emergency lighting system/fire alarm system been tested?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are fire extinguishers/blankets kept in position?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are fire extinguishers serviced annual by a BAFF company?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are all fire notices properly displayed?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Health and Safety</b>			
Has the mandatory Health & Safety Risk Assessment been carried out and reviewed? (see <a href="#">Methodist Insurance Guidance notes</a> )	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are there potential hazards for children, elderly and infirm persons?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is there an approved first aid kit on the premises?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Health and Safety</b>			
Is there an "accident book" for recording accidents?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>Security, Access, Health and Safety</b>	<b>1</b>	<b>2</b>	<b>3</b>
Have the managing trustees as “duty holders” carried out their management inspection of the asbestos (as required under the “Control of Asbestos Regulations 2012”)? See updated Technical Guidance Note T12 (available on the <a href="#">Methodist website</a> ); also <a href="#">Control of Asbestos 2012</a>	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Environment Audit</b>			
Has an environmental audit been carried out as a recommended contribution to the Connexional Environmental policy? (see the <a href="#">Carbon Reduction</a> page for more information)	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>Facilities for the disabled</b>			
Equalities Act (2010) Has full provision been made to comply with the Equalities Act?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you undertaken an access audit of the premises?	NA <input type="checkbox"/>	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Signed: _____	Position Held: _____	Date: _____
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