|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PROPERTY QUINQUENNIAL INSPECTION CERTIFICATE AND REPORT SUMMARY** | | | | | | | | | | | |
| SCHEDULE E: MANSE OR OTHER HOUSING | | | | | | | | | | | |
| **NOTES:**   * *1 digital copy and 3 paper copies of this Certificate and Quinquennial Report are to be sent to the Superintendent Minister/Circuit Appointee, who will send one of each to the Circuit Steward/Manse Secretary and one to the District Manses Committee Secretary* * *Additional copies may be made locally* * ***Items 1-4 should be completed by the Superintendent Minister/Circuit Appointee before issue to the Inspector*** | | | | | | | | | | | |
| **PROPERTY DETAILS** | | | | | | | | | | | |
| **1** | Address | |  | | | | | | | | |
| **2** | Circuit | |  | | | | | | | No. |  |
| **3** | Date of last Inspection | |  | | | | | | | | |
| **4** | Church Appointee *name* | |  | | | | | | | | |
|  | *address* | |  | | | | | | | | |
|  |  | |  | | | | | | | | |
|  | *office held* | |  | | | | | | | | |
|  |  | |  | | | | | | | | |
| **5** | Listed Building Status | | | | | | | | | | |
|  | Grade (England & Wales) | | | I |  | II\* |  | II |  | | Nil |
|  | Grade (Scotland) | | | A |  | B |  | C |  | | Nil |
| **6** | In Conservation Area | | | Yes |  | No |  |  | | |  |
|  |  | | | | | | | | | | |
| **7** | Summary and Recommendations | | | | *Range of likely cost (£,000s + scaffolding costs etc.)* | | | | | | |
| *A* | *Urgent, requiring immediate attention* | | | |  | | | | | | |
| *B* | *Requires attention within 12 months* | | | |  | | | | | | |
| *C* | *Requires attention within 12–24 months* | | | |  | | | | | | |
| *D* | *Requires attention within 5 years* | | | |  | | | | | | |
| *E* | *Desirable improvements, no timescale* | | | |  | | | | | | |
| *X* | *Requires further investigation/survey* | | | |  | | | | | | |
| *M* | *Routine maintenance* | | | |  | | | | | | |
| **8** | Matters for further investigation *(e.g. opening up, special access, extended or detailed inspection)* | | | | | | | | | | |
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| **INSPECTOR DETAILS** | | | | | | | | | | | |
| Name | |  | | | | | | | | | |
| Address | |  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| Qualifications | |  | | | | | | | | | |
| Telephone | |  | | | Email |  | | | | | |
| Signed | |  | | | | | Date | | | | |