

Insert Company name and CREIA logo here

## Property Entry Advisory and Declaration for a Home Inspection

Property Address: 1 Scheduled date and time:

**1. RISKS OF EXPOSURE:** There are numerous risks during a home inspection. These risks include, but are not limited to: exposure to virus, germs, shock, falling, and tripping. These risks are not only to the Home Inspector, but anyone else at the property before, during and after the inspection.

**2. CERTIFIED HOME INSPECTORS ARE PROFESSIONALS.** Home Inspectors understand these risks and use measures to mitigate these risks every day. By following the steps below, I will contribute to the success of a professional home inspection; and thereby lowering the risk.

**3. USE OF THIS FORM:** This form should be signed by the home inspector. This form must be signed no more than 24 hours prior to the scheduled inspection. Forms signed after the start of the inspection are null and void.

### 4. REPRESENTATION AND AGREEMENT:

A. As the Home Inspector:

(1) I will not allow anyone other than myself in the home during the inspection.

(2) I will not perform any activities that will put me at risk of harm (i.e. climbing a wet roof) or damage to personal property (i.e. moving boxes to access the panel).

(3) After the inspection, I will take everything I used on the inspection with me, and properly dispose of anything not needed once I leave the property.

(4) I will maintain a 6' distance from everyone at all times.

(5) I believe that I have not been sick in the last 24 hours prior to the home inspection.

(6) Should I find out that anyone at the home was or is sick, I will cancel the inspection.

(7) I will wear all Personal Protective Equipment (PPE) mandated by law.

**5. AGREEMENT, DECLARATION AND ASSUMPTION OF RISK:** By signing below, I am declaring the foregoing is true, that I agree to take all recommended and reasonable actions to protect myself and others. And that I assume the risk, as applicable, of entering the property. I understand and agree that no one can guarantee that I will not be exposed to risk.

By signing below, I acknowledge that I have read, understand, and voluntarily agree to the foregoing.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date / Time