



Pre-Install JobSite Checklist

Date of Evaluation: _____

Homeowner Name: _____

Address: _____

Exterior Evaluation:

Damage Noted:

Details:

Gutters:

Yes _____

No _____

Windows/Screens/
Shutters

Yes _____

No _____

Bushes/Trees

Yes _____

No _____

Driveway Stains Etc

Yes _____

No _____

Deck

Yes _____

No _____

Siding Dents/ Soffit

Yes _____

No _____

Miscellaneous

