



BUILDING VISUAL ASSESSMENT FORM

Name of Building: _____

Location: _____

Date Inspected: _____

Type of Main Structure: Concrete
 Steel
 Others, please specify: _____

Observations: In good condition/Structurally sound
 Hairline/Minor Cracks

Location of Cracks:

Minor Element (Non-load Bearing Wall, etc)
 Structural/Major Element (Columns, Beams, Slab)

Major Cracks

Location of Cracks:

Minor Element (Non-load Bearing Wall, etc)
 Structural/Major Element (Columns, Beams, Slab)

Dilapidated
 Others, please specify: _____

Remarks: Safe
 For further investigation (Destructive Test or Non-destructive Tests)

Recommendations:

Prepared by:
