

# Annual Report on the Parsonage

The chairperson of the committee on pastor-parish relations, the chairperson of the board of trustees, and the pastor shall make an annual review of the church-owned parsonage to assure proper maintenance.

## Parsonage Checklist

District: \_\_\_\_\_

For Year Ending: \_\_\_\_\_ Date of last parsonage review: \_\_\_\_\_

Church/City: \_\_\_\_\_

Parsonage Physical Address: \_\_\_\_\_

Occupied by: Senior Pastor \_\_\_\_\_ Associate Pastor \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ # of bedrooms  
\_\_\_\_\_ Living Room or Great Room  
\_\_\_\_\_ Screen Porch  
Garage: (one car)  (two car)  (three car)   
Laundry Area: (indoor)  (outdoor)

\_\_\_\_\_ # of bathrooms  
\_\_\_\_\_ Dining Room  
\_\_\_\_\_ Fenced Yard

\_\_\_\_\_ Family Room  
\_\_\_\_\_ Study  
\_\_\_\_\_ Secure Storage Area  
\_\_\_\_\_ Carport

### 1. Outside:

#### A. House:

##### 1. Outside appearance is:

Excellent  Good  Fair  Poor

Needs work  
(explain):

##### 2. Condition of the following is:

(Please indicate - E-excellent, G-good, F-fair, P-poor)

\_\_\_\_\_ Roof  
\_\_\_\_\_ Windows  
\_\_\_\_\_ Garage  
\_\_\_\_\_ Doors  
\_\_\_\_\_ Chimney

\_\_\_\_\_ Gutters  
\_\_\_\_\_ Septic/Drain System  
\_\_\_\_\_ Pump/Well  
\_\_\_\_\_ Exterior paint/finish of house

\_\_\_\_\_ Trim  
\_\_\_\_\_ Screens  
\_\_\_\_\_ Mail receptacle

#### B. Yard:

##### 1. Appearance of the yard is:

Excellent  Good  Fair  Poor

Needs work (explain):

\_\_\_\_\_  
\_\_\_\_\_

##### 2. Condition of the following is:

(Please indicate - E-excellent, G-good, F-fair, P-poor)

\_\_\_\_\_ Lawn/grass \_\_\_\_\_ Irrigation system \_\_\_\_\_ Shrubbery \_\_\_\_\_ Trees

3. Who has responsibility for yard upkeep?:  Pastor  Church
4. If Pastor is responsible for yard upkeep, does the parsonage have the following equipment?:  
 \_\_\_\_\_ Gas mower \_\_\_\_\_ Trimmer \_\_\_\_\_ Weed eater  
 \_\_\_\_\_ Rake \_\_\_\_\_ Shovel \_\_\_\_\_ Electric or gas hedge trimmer  
 \_\_\_\_\_ Other (list):

**2. Inside:**

- A. Does the parsonage have the following equipment?  
 \_\_\_\_\_ Stove \_\_\_\_\_ Dishwasher \_\_\_\_\_ Microwave \_\_\_\_\_ Water Softener  
 \_\_\_\_\_ Freezer \_\_\_\_\_ Washer \_\_\_\_\_ Dryer \_\_\_\_\_ Garbage disposal  
 \_\_\_\_\_ Hot water heater (40 gal min) \_\_\_\_\_ Vacuum cleaner  
 \_\_\_\_\_ Refrigerator w/ freezer  
 \_\_\_\_\_ Other (list):

- B. How is the heating/cooling system accomplished?  
 Gas  Electric  Heat pump  
 Is the heating/cooling system adequate? yes  no

- C. Please provide the following dates:

	<u>Annual Inspection Date</u>	<u>Treatment</u>	<u>Treatment Date</u>
1. Pest control	_____	yes <input type="radio"/> no <input type="radio"/>	_____
2. Termite	_____	yes <input type="radio"/> no <input type="radio"/>	_____
3. Ductwork	_____	yes <input type="radio"/> no <input type="radio"/>	_____

<u>Regular Maintenance Dates</u>	
1. Annual carpet cleaning _____	3. Exterior Painting _____
2. Chimney Sweeping _____	4. Interior Painting _____

- D. Other items:
1. Is the house adequately insulated? yes  no
  2. Are there sufficient electrical outlets in all rooms? yes  no
  3. Are there functional smoke detectors? yes  no
  4. Are there functional fire extinguishers? yes  no
  5. Is the telephone system adequate? yes  no
  6. Is the house wired for basic cable or satellite? yes  no
  7. Is the house wired for Internet? yes  no
  8. Is there monitored security for entire house? yes  no
  9. Is there regular pest control treatment? yes  no
  10. Are there quality window coverings in neutral colors that insure privacy?  
yes  no
  11. Are there quality floor coverings in neutral colors that are durable and easy to maintain?  
yes  no

**3. Parsonage Family Concerns**

- A. Has there been input from the parsonage family regarding their housing needs?  
yes  no
- B. Does the parsonage family have adequate insurance coverage on personal property and furnishing?  
yes  no
- C. What pets does the parsonage family have? \_\_\_\_\_  
*(It is important to note that any damage or additional wear and tear on the parsonage, due to pets, is the responsibility of the parsonage family.)*

**4. Committee Concerns**

A. Is the parsonage well maintained by the parsonage family:  
 Excellent                       Average                       Poor

B. Comments:

C. Indicate repairs and replacements needed and desired in the coming year and approximate cost.

D. What financial provision is made for the upkeep of the parsonage?

E. If the parsonage is for a multi-church charge, how are the expenses shared?

**5. Please include a current picture of your parsonage**

**6. Please attach a current inventory of church owned parsonage furniture.**

**7. The maintenance / repairs listed below need attention:**

Signed: \_\_\_\_\_  
Chairperson of the Trustees / Parsonage Committee

Signed: \_\_\_\_\_  
Chairperson of the Pastor Parish Relations Committee

Signed: \_\_\_\_\_  
Pastor / Occupant of the Parsonage

Date of Parsonage Annual Review: \_\_\_\_\_