

Condition Report, Care Recommendations & Inspection Record Outdoor Mural

An annual inspection and documentation of your murals is an important first step in an ongoing maintenance program. By recording the materials and condition of your murals and retaining the report in your files, changes in condition from year to year can be readily detected. This will allow you to address problems and deterioration before major unsightly and perhaps irreparable damage occurs.

Title:		Artist:	Date:
Owner of Painting:		Address:	Phone:
Location of Painting/Addres	55:		
Owner of Wall:		Address:	Phone:
Details of Agreen	nent / Responsibility if known:		
Custodian of Painting-Orga	nization:		
Contact Position	Fitle/Person:		
Address	::		Phone:
Details of Agreement / Resp	oonsibility if known:		
Description of Image:			
Plaque:			
Signature: □Yes / □No	Location:		
Maintenance Program:	□Regular Program with fund	ling / □Regular Program without funding	
	Maintenance Schedule:		
Organization Responsible for	or Maintenance:		
Contact Person / Office:		Address:	Phone:
			I none.
Duties:			T HORE.
Duties: Last examined: (See back p	age)		
Last examined: (See back p			
Last examined: (See back p	intervention; by whom:		
Last examined: (See back p Date and nature of repair /	intervention; by whom: tion: □Sidewalk □Parking:Pavement / Grave	□Lane: Pedestrian / Vehicles I / Soil □Road: Pavement / Dirt / Gravel □Paving stones / □Garden / □Grass / □Trees	□Vacant Lot: □Building / Porch □Other:

Lighting: Security:

Location - Specific Hazard	ls:				
□Public access:	□Direct	□Indirect			
	□Snow build-up □Snow removal: □Water: □Parked Cars:	□Splashback from eaves / □Splashbacl	k from cars / □Rain?		
	Other:				
OBJECT DESCRIPTION:	Dimensions (cm):	□ measured □ approximate			
	height:	width:	depth:		
MATERIALS & CONDIT coordinates eg) 1.		e location of damage on a sketch, a pho	tograph or photocopy of image or by measured		
Structural or Auxiliary Sup Materials:	<i>port (If applicable)</i> □Wall / □Other				
Descript	ion:				
Condition:	□Stable / □Insecu	re			
Descript	ion of Condition:				
<i>Primary Support</i> Materials: □Wall	l: □Brick, □Plaster,	□Stucco, □Stone, □Cement block, □Wo	od, □Metal, □Other		
	Water d	rainage:			
□Panel:	□Wood,	, □Plywood, □Veneered particle board, □	JMetal, □Other		
	Flashing:				
	Attachm	nent to wall:			
□Fabric	/ Banner:				
	Attachment to wal	11:			
□Mosaid	2				
□Other:					
General	Description:				
Condition:	□Stable / □Unstab	ble			
Comments:	□Cracks □Out of	unical damage s plane distortion / deformation pling / □Spalling / □Delaminating surface	□Repairs □Tears □Loss e		
Preparation Layers: □yes / Materials: Descri					
Condition:	□Stable / □Unstab □Lifting □Loss		□Crumbling		
Commer					

nage Layer:			
Materials:	□Paint: □Oil / □Acrylic / □Other / □Unknown □Other:		
Descr	iption:		
Condition:	□Stable / □Unstable □Lifting □Crumbling □Blanching / Bloom □Abrasion □Surface Dirt	□Cracking □Fading / □Colour Change □Loss □Accretions / □Graffiti	
Comr	nents:		
Surface Coating: □yes /	□no / □uncertain		
Materials:			
Descr	iption:		
Condition:	□Stable / □Unstable □Lifting □Blanching / Bloom □Abrasion □Surface Dirt	□Cracking □Yellowing / Discoloration □Loss □Accretions / □Graffitti	
Comr	nents:		
Retouching / Repairs: Dy	yes / □no / □uncertain		
Materials:			
Condition:	□Not Visible / □Readily Visible □Colour satisfactory / □unsatisfactory		
	Texture - planar match; □yes / □no		
Comr	nents:		

ACTION REQUIRED: (Please note: Any treatment undertaken should be recorded in a report and retained in the painting's file.)					
	Urgent need of treatment	Would benefit from treatment	Well maintained	Unable to comment	
Wall & Surrounding Area					
Auxiliary Support					
Support					
Image Layers					
Surface Coating					
Mural examined by:			Date:		
Proposed treatment reviewed by $(\Box N/A)$:			Date:		

Ongoing Periodic Inspection – Outdoor Mural

Title:	Artist:		Date:
Owner of Painting:	Address:		Phone:
Location of Painting/Addre	SS:		
	mage on a sketch, a photograph or photocopy	of image or by measured coordin	ates eg) 1.30mR/.20mB)
Structural or Auxiliary Sup	port (If applicable)		
Condition:	□Stable / □Insecure Description of Condition:		
Primary Support			
Condition:	□Stable / □Unstable □Mechanical damage □Cracks □Out of plane distortion / deformation	□Tears □N	Loss Aechanical Damage ng / □Delaminating surface
Water d	Irainage?		
If separ	ate support; condition of attachment to wall?		
Comme	ents:		
Preparation Layers: □yes /	′ □no		
Condition:	□Stable / □Unstable □Lifting	□Crumbling	□Loss
Comme	ents:		
Image Layer:			
Condition:	□Stable / □Unstable □Lifting □Crumbling □Blanching / Bloom	□Cracking □Fading / □Colour Change □Surface Dirt	□Abrasion □Loss □Accretions / Graffiti
Comme	-		
Surface Coating: □yes / □r	no / □uncertain		
Condition:	□Stable / □Unstable □Lifting □Blanching / Bloom □Surface Dirt	□Cracking □Yellowing / Discoloration □Accretions / □Graffitti	□Abrasion □Loss
Comme	ents:		
<i>Retouching / Repairs:</i> □yes	s / □no / □uncertain		
Condition:	□Not Visible / □Readily Visible □Colour satisfactory / □unsatisfactory		
Comments:	Texture - planar match; □yes / □no		
Overall Condition: Has the	ere been a change in condition? □No cl	ange □Minor Ch	ange DMajor Change

ACTION REQUIRED: (Please note: Any treatment undertaken should be recorded in a report and retained in the painting's file.)					
	Urgent need of treatment	Would benefit from treatment	Well maintained	Unable to comment	
Wall & Surrounding Area					
Auxiliary Support					
Support					
Image Layers					
Surface Coating					

Periodic Inspection by:	Date:	
Proposed action reviewed by: $(\Box N/A)$:	Date:	

Ongoing Periodic Inspection – Outdoor Mural

Title:	Artist:		Date:
Owner of Painting:	Address:		Phone:
Location of Painting/Addre	SS:		
(Please note location of da Structural or Auxiliary Sup	mage on a sketch, a photograph or photocopy	of image or by measured coo	ordinates eg) 1.30mR/.20mB)
Condition:	□Stable / □Insecure		
Condition.	Description of Condition:		
Primary Support			
Condition:	□Stable / □Unstable □Mechanical damage □Cracks □Out of plane distortion / deformati	□Repairs □Tears on □Crumbling / □S	□Loss □Mechanical Damage palling / □Delaminating surface
Water c	lrainage?		
If separ	ate support; condition of attachment to wall?		
Comme	ents:		
Preparation Layers: □yes /	□no		
Condition:	□Stable / □Unstable □Lifting	□Crumbling	□Loss
Comme	ents:		
Image Layer:			
Condition:	□Stable / □Unstable □Lifting □Crumbling □Blanching / Bloom	□Cracking □Fading / □Colour Change □Surface Dirt	□Abrasion □Loss □Accretions / Graffiti
Comme	ents:		
Surface Coating: □yes / □1	no / □uncertain		
Condition:	□Stable / □Unstable □Lifting □Blanching / Bloom □Surface Dirt	□Cracking □Yellowing / Discoloratior □Accretions / □Graffitti	□Abrasion n □Loss
Comme			
<i>Retouching / Repairs:</i> □yes	s / □no / □uncertain		
Condition:	□Not Visible / □Readily Visible □Colour satisfactory / □unsatisfactory Texture - planar match; □yes / □no		
Comments:			
Overall Condition: Has the	ere been a change in condition? □No o	hange □Mino	or Change □Major Change

ACTION REQUIRED: (Please note: Any treatment undertaken should be recorded in a report and retained in the painting's file.)					
	Urgent need of treatment	Would benefit from treatment	Well maintained	Unable to comment	
Wall & Surrounding Area					
Auxiliary Support					
Support					
Image Layers					
Surface Coating					
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Proposed action reviewed by: $(\Box N/A)$:	Date:

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Water d	lrainage?		
If separ	ate support; condition of attachment to wall?		
Comme	ents:		
Preparation Layers: □yes /	′ □no		
Condition:	□Stable / □Unstable □Lifting	□Crumbling	□Loss
Comme	ents:		
Image Layer:			
Condition:	□Stable / □Unstable		
	□Lifting □Crumbling □Blanching / Bloom	□Cracking □Fading / □Colour Cha □Surface Dirt	□Abrasion ange □Loss □Accretions / Graffiti
Comme	ents:		
<i>Surface Coating:</i> □yes / □r	no / ⊐uncertain		
Condition:	□Stable / □Unstable □Lifting □Blanching / Bloom □Surface Dirt	□Cracking □Yellowing / Discolora □Accretions / □Graffitt	
Comme	ents:		
<i>Retouching / Repairs:</i> □yes	s / □no / □uncertain		
Condition:	□Not Visible / □Readily Visible □Colour satisfactory / □unsatisfactory		
	Texture - planar match; □yes / □no		
Comments:			
Overall Condition: Has the	ere been a change in condition? □No	change □M	linor Change □Major Change

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Wall & Surrounding Area					
Auxiliary Support					
Support					
Image Layers					
Surface Coating					
L	·	·	·	£	

Periodic Inspection by:	Date:
Proposed action reviewed by: $(\Box N/A)$:	Date: