

**CITY OF ST. JOSEPH RESIDENTIAL RENTAL INSPECTION CHECKLIST**

Date: \_\_\_\_\_ Property Address: \_\_\_\_\_ Occupied \_\_\_\_\_ Vacant \_\_\_\_\_ Inspector \_\_\_\_\_

Owner Name/Agent: \_\_\_\_\_ Owner Phone: \_\_\_\_\_

Business License # \_\_\_\_\_ Comply by: \_\_\_\_\_ Landlord Signature: \_\_\_\_\_

<b>EXTERIOR</b>	<b>P</b>	<b>F</b>
Stairways, decks, porches, and balconies 304.10 Handrails and guards 304.12		
Structural members 304.4 Decorative features 304.8 Overhang extensions 304.9 Premises identification 304.3		
Exterior walls 304.6 Foundation walls 304.5 Protective treatment and siding 304.2		
Roofs and Drainage 304.7		
Exterior door 304.15 Basement hatchways 304.16 Windows, skylights, and door frames 304.13		
Chimney and towers 304.11		
Accessory structures-detached garage, fences, retaining walls 302.7		
<b>INTERIOR</b>		
Structural members in basement 305.2 Stairs and walking surfaces 305.4 Handrails and guards 305.5 Glazing (windows) 304.13.1 Openable windows 304.13.2 Building security-doors, windows, hatchways 304.18 Windows operable 304.18.2		
Plumbing Fixtures 504.1 Plumbing Maintenance 506.2 General plumbing 506.1		
Electrical facilities required 604.1 Electrical system hazard 604.3 Receptacles 605.2		
Heating facilities required 602.1 602.2 Mechanical equipment and appliances 603.1		
General sanitary condition 305.1		
General – egress 702.1		
Smoke detectors in every bedroom; on every level; outside sleeping quarters. CO detectors outside sleeping quarters in non-electric home or if there is an attached garage 704.1		
Workmanship 102.5		