



Property Owner / Manager Inspection Checklist

Address _____ Inspection Date _____

- _____ Address Visible on Building & Units _____
- _____ Sidewalks NO trip cracks ½ inch or greater _____
- _____ Parking Spaces/Surface of Lot _____
- _____ Garbage Container Provided _____
- _____ Exterior Foundation/Walls/Stairs/Decks/Porches-meet Building Code Standards _____
- _____ Exit Doors operational _____
- _____ Exit Signs/Lights Illuminated _____
- _____ Egress Path in Common Area _____
- _____ Hallways Illuminated _____
- _____ Handrails /Guardrails Sizing/Proper Height-Grip _____
- _____ Gas/Electric Meter Clearly Labeled _____
- _____ Furnace- Combustibles Clear of area _____
- _____ Dwelling Doors Weather Tight/Secure _____
- _____ Fire Extinguisher/Charged size /Type 2A :10BC hung near egress _____
- _____ Dual Sensor Smoke Detectors in all Sleeping Areas: Photo Electric/Ionization Type _____
- _____ Dual Sensor Carbon Monoxide/Photo Electric Smoke Detector in Hallway to Sleeping Rooms _____
- _____ Electrical Panel Accessible and Labeled _____
- _____ Outlets ALL Operational _____
- _____ GFCI Outlets; Kitchen/Bath/Garage/Outdoors _____
- _____ No Extension Cords or Multiple Plugs Cords _____
- _____ Light Fixtures Switched Outlets All Working _____
- _____ Appliances Functioning Stove/Refrigerator/Vent Fans/Garbage Disposals, etc _____
- _____ Furnace Operational/Thermostat Working _____
- _____ Water Heater Pressure Relief Valve & has Discharge Line _____
- _____ Egress Window Where Needed _____
- _____ Window Weather-tight/Screens (April-Oct) _____
- _____ Ventilation Windows Open/Fans Operational _____
- _____ Plumbing Fixtures/noLeaks/hasTraps _____
- _____ Ceiling Height/Room Size meet Housing Code _____
- _____ Ceiling Walls/Floor Conditions /Paint Maintenance _____
- _____ Rodent/Insect Infestation plan for resolution _____
- _____ Maximum Occupancy _____
- _____ OTHER _____

***** THIS LIST IS NOT ALL INCLUSIVE