## *Mayor's Office of Housing* Property Inspection Form

Summary Report								
Date of On-Site Inspection: Date of Report:								
Project Number:	Project Na	ame: Address: Street:						
Type of Inspection:	Annual	Follow-up	Follow-up Date of Prior Inspection Other:					
Increased by (normalized			<u> </u>					
Inspected by (name an RE Washington	ia title):			Signature of I	nspector			
Overall Rati	ng:							
General Appearance F (Site/Buildings/Units):	General Appearance Rating (Site/Buildings/Units): File Review/Eligibility Rating: Property Mgt/Maint Prog Rating					int Prog Rating:		
General Appearance Cor		File Review/Eligibility Rating Comments:			Property Mgt/Maint Prog Comments:			
Project Owner/Borrower	Project	Project Manager/Contact Name:			Project Manager Phone/E-mail:			
Property Supervisor (If any):								
Property Supervisor Phone:								
Type of Subsidy (HOME, CDBG, etc):								
Type of Housing: Duplex, F (1-2 Stor	Low Ris Stories):	Low Rise (3-4 ories): Stories):			e (5+ Single Room Other: Housing (SRO)			
Property Inspection S							1	
A. Site Review	g Review				D. File Review E. P		operty Mgt Review	
1	EDED	ED AS NEEDED					1	

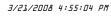


A. Site Review					
For each condition	For each category check the box to indicate " <u>Not Applicable</u> " (N), " <u>Pass</u> " (P or ✓), " <u>Fail</u> " (F), " <u>Inconclusive</u> " (I). For all " <u>Poor</u> " (P) ratings, describe condition or fault (or any other Comment) in the <u>NOTES</u> section				
Ref Nbr	Description	"N" "P" "F" "I"	NOTES		
1	Grounds/Landscaping				
2	Parking Lot/Driveway				
3	Tot Lot/ Play Area				
4	Exterior Walls				
5	Intercom				
6	Security				
7	Fences/Gates/Retaining Walls				
8	Mailboxes				
9	Signs				
10	Other (see NOTES)				
Gen H	ealth & Safety	1			
11	Access to Building				
12	Exits				
13	Evidence of Infestation				
14	Garbage and Debris				
15	Refuse Disposal				
16	Interior Stairs/Halls				
17	Lead-Based Paint: Owner Certification				



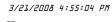


B. Building Review (Print out as many forms as necessary for the number of resident occupied buildings)					
Building Number:					
	For each category check the box to indicate "Not Applicable" (N), "Pass" (P or $\checkmark$ ), "Fail" (F), "Inconclusive" (I). For all "Poor" (P) ratings, describe condition or fault (or any other Comment) in the NOTES section				
Ref Nbr	Description	"N" "P" "I"		NOTES	
Gen H	ealth & Safety	1			
18	Access to Building				
19	Exits				
20	Evidence of Infestation				
21	Garbage and Debris				
22	Refuse Disposal				
23	Interior Stairs/Halls				
24	Other Interior Hazards				
25	Interior Air Quality				
26	Lead-Based Paint: Owner Certification				
Exterio	or				
27	Grounds/Landscaping				
28	Parking Lot/Driveway				
29	Tot Lot/ Play Area				
30	Exterior Walls				
31	Intercom				
32	Security				
33	Fences/Gates/Retaining Walls				
34	Stairs/Rails/Porches				
35	Mailboxes				
36	Signs				
37	Doors				
38	Walls				
39	Window Condition				
40	Fire Escape				
41	Roof				
42	Boiler				
43	Other (see NOTES)				
Buildir	ng Systems	T			
44	Elevator		-		
	Current Permit? (Y/N)	Υ	Ν		





Building Common Areas				
For each category check the box to indicate "Not Applicable" (N), "Pass" (P or ✓), "Fail" (F), "Inconclusive" (I). For all "Poor" (P) ratings, describe				
condition or fault (or any other Comment) in the NOTES section				
Ref Nbr	Description	"N" "P" "F" "I"	NOTES	
	Closet(s)			
Indicate h floor")	ow many utility rooms have been	checked and	note any faults found in NOTES section. (EXAMPLE "All 4 Closets checked." "Closet 2, near room 215 has worn	
45	Lighting/Illumination			
46	Ceiling Condition			
47	Electrical Hazards			
48	Security			
49	Wall Condition			
50	Floor Condition			
	y Room(s)			
Indicate h flooded")	ow many laundry rooms have bee	en checked al	nd note any faults found in NOTES section. (EXAMPLE "All 4 Laundry Rooms checked." "Laundry 4, in basement is	
51	Lighting/Illumination			
52	Electrical Hazards			
53	Security			
54	Ceiling Condition			
55	Window Condition			
56	Wall Condition			
57	Floor Condition			
58	Floor Condition			
Comm	unity Room(s)			
Indicate h Room 2, c	ow many community rooms have n 15 floor has cracked window.")	been checke	ed and note any faults found in NOTES section. (EXAMPLE "All 7 Community Rooms were checked." "Community	
59	Lighting/Illumination			
60	Electrical Hazards			
61	Security			
62	Ceiling Condition			
63	Window Condition			
64	Wall Condition			
65	Floor Condition			
66	Stove/Range/Microwave			
67	Refrigerator			
68	Sink			
69	Space for Storage, Preparation, and Serving Food			





Share	d Bathrooms		
Ref Nbr	Description	"N" "P" "F" "I"	NOTES
	Bathroom(s)		·
Indicate h Bathroom	ow many shared bathrooms have has broken fan.")	e been checke	ed and note any faults found in NOTES section. (EXAMPLE "All 4 Shared Bathrooms were checked." "Second Floor
70	Electricity/Illumination		
71	Electrical Hazards		
72	Window Condition		
73	Ceiling Condition		
74	Wall Condition		
75	Floor Condition		
76	Flush Toilet		
77	Wash basin		
78	Tub or Shower		
79	Ventilation		
Share	d Kitchens	T	1
Ref Nbr	Description	"N" "P" "F" "I"	NOTES
	l Kitchen(S)		
-		cked and not	te any faults found in NOTES section. (EXAMPLE "All 2 kitchens were checked." Kitchen 1 has leaking faurcets.")
80	Electricity/Illumination		
81	Electrical Hazards		
82	Security		
83	Window Condition		
84	Ceiling Condition		
85	Wall Condition		
86	Floor Condition		
87	Stove/Range/Microwave		
88	Refrigerator		
89	Sink		
90	Space for Storage, Preparation, and Serving Food		
91	Space for Storage, Preparation, and Serving Food		
92	Sink		
93	Space for Storage, Preparation, and Serving Food		



C. Unit Review (Print out as many forms as necessary for the number of units inspected)				
For each category check the box to indicate "Not Applicable" (N), "Pass" (P or ✓), "Fail" (F), "Inconclusive" (I). For all "Poor" (P) ratings, describe condition or fault (or any other Comment) in the NOTES section				
condition Ref	n or fault (or any other Comr	nent) in the "N"	NOTES section	
Nbr	Description	"P" "F" "I"	NOTES	
(Unit #	ŧ)			
Gen H	ealth & Safety			
94	Access to Unit			
95	Exits			
96	Evidence of Infestation			
97	Garbage and Debris			
98	Refuse Disposal			
99	Interior Stairs and Common Halls			
100	Other Interior Hazards			
101	Interior Air Quality			
102	Lead-Based Paint: Owner Certification			
LIVING	<u>G ROOM</u>			
103	Living Room Present			
104	Electricity/Illumination			
105	Electrical Hazards			
106	Security			
107	Window Condition			
108	Ceiling Condition			
109	Wall Condition			
110	Floor Condition			
<u>KITCH</u>				
111	Kitchen Present			
112	Electricity/Illumination			
113	Electrical Hazards			
114	Security			
115	Window Condition			
116	Ceiling Condition			
117	Wall Condition			
118	Floor Condition			
119	Stove/Range/Microwave			
120	Refrigerator			
121	Sink			
122	Space for Storage, Preparation, and Serving Food			



BATH	ROOM				
Ref		"N"			
Nbr	Description	"P" "F" "I"	NOTES		
123	Bathroom Present				
123	Electricity/Illumination				
124	Electrical Hazards				
125	Window Condition				
120	Ceiling Condition				
127	Wall Condition				
120	Floor Condition				
129	Flush Toilet				
130	Wash basin				
132	Tub or Shower				
132	Ventilation				
		and Halla	PEDDOOM 1.2		
Indicate a	Rooms Used for Living all that have been checked and no	ote any faults of	- <u>BEDROOM 1-2</u> of each or both in NOTES section.		
134	Electricity/Illumination				
135	Electrical Hazards				
136	Security				
137	Window Condition				
138	Ceiling Condition				
139	Wall Condition				
140	Floor Condition				
141	Smoke Detector				
Other	Rooms Used for Living	and Halls	– <u>BEDROOM 3-4</u>		
		ote any faults o	of each or both in NOTES section.		
142	Electricity/Illumination Electrical Hazards				
143					
144	Security Window Condition				
145					
146	Ceiling Condition Wall Condition				
147	Floor Condition				
148	Smoke Detector				
149 Othor		and Llalla	REDROOM 5		
	Other Rooms Used for Living and Halls – <u>BEDROOM 5</u> Indicate all that have been checked and note any faults of each or both in NOTES section.				
150	Electricity/Illumination				
151	Electrical Hazards				
152	Security				
153	Window Condition				
154	Ceiling Condition				
155	Wall Condition				
156	Floor Condition				
157	Smoke Detector				

