

Residential Rental Inspection Checklist

Property details					
Residential rental property primary address:	Property owner/manager name:				
Additional address(es) – Add page if more space is needed:	Email:				
	Phone:				
Zip:					
Inspection details					
Type of inspection	Inspected by – Include name and company				
☐ Inspection	(If multiple inspectors, list all)				
☐ Re-inspection					
Inspection date:					
Total number of units:	Email:				
Number of units inspected:	Phone:				
** An application must be submitted within 90 days of the i	nitial inspection.				
\Box The number of units inspected is 10% of the total units ran	ndomly selected by the inspector for the residential rental				
property plus any checklist items related to shared utilities o	r common areas. Note: For any residential rental property				
where there is a below grade unit, item 5.3 must be verified	for all below grade units. Single unit properties require an				
individual license. For multiunit properties, a single license can	be issued for multiple units, addresses, or structures if they are				
all located on a single or contiguous parcels and under the same	e ownership.				
$\hfill\Box$ I certify that all items have been marked as compliant/correct	ct or not applicable. Leave this box blank if items are non-				
compliant. Inspections submitted with checklist items marked r	non-compliant will be considered incomplete. Non-compliant				
items must be resolved and documentation submitted within o	ne year of application				
By signing this form, the licensed inspector certifies that they pe	rformed the housing inspection for the rental property				
$indicated\ following\ the\ requirements\ instructed\ in\ the\ check list.$	${\it The inspector also certifies that they have no financial interest}$				
in the property $\&$ is not related in any way to the owner/agent α	or tenant.				
Inspector signature:	Date:				
Inspection report					
List the address and unit numbers inspected. This section must	be completed.				
If inspecting more than 12 units, please add additional page and	d list all additional units inspected.				

Page of Revised 5.3.2023



Legend:

C = Compliant/Correct **NC** = Non-compliant **NA** = Not applicable

Item	Section 1 – Egress	С	NC	NA
1.1	Egress to Ground Level, Stairs in Good Condition & Emergency Exits Clear (RH, 2-202 A-C)			
1.2	Lighting of Halls & Stairways – Multi-Unit Dwellings (RH, 2-205 C)			
Item	Section 2 – Water Systems	С	NC	NA
2.1	Dwelling connected to Municipal or approved Water System (RH, 2-203 A 1)			
2.2	Hot Water Minimum Temperature 110*F (RH, 2-207 C 1)			
2.3	Gas-Fired Water Heater Location (RH, 2-207 C 3)			
2.4	Water Heater provided with Pressure/Temp Relief Valve (RH, 2-207 C 8)			
2.5	Toilet Working Properly & Connected to Approved Water & Sewer System (RH, 3-301 B 1)			
2.6	Bathtubs & Showers in Good Condition (RH, 3-301 D 2)			
Item	Section 3 - Electrical	С	NC	NA
3.1	Outlets & Fixtures Installed Properly (RH, 2-206 A 1)			
3.2	Total Circuitry Limits; No Make-Shift Outlets; Wiring in Good Condition (RH, 2-206 B 1-2)			
3.3	At least 1 GFCI Outlet in All Bathrooms (RH, 2-212 C)			
3.4	Free of Unsafe Extension Cords & Makeshift Wiring (RH, 2-206 B 4-5)			
Item	Section 4 – Fire Safety	С	NC	NA
4.1	Smoke & CO Detector; Fire Extinguisher Present (DRMC, 27-195)			
4.2	Furnace Room Door Requirements are Met – Basement (RH, 2-201 C)			
4.3	Boiler/Furnace have approved Safety Devices (RH, 2-207 A 3-4)			
4.4	Gas Supply Pipes in Good Condition (RH, 2-207 A 1)			
Item	Section 5 – Walls, Roof & Foundation	С	NC	NA
5.1	Free of Holes in Walls or Roof; Deteriorating Paint (RH, 2-208 A)			
5.2	Free of Lead Hazards & Hazards Associated with Water Intrusion (RH, 2-209 A 2)			
5.3	Free of Leaks in Below Grade Units – Basement (RH, 2-201 B 1)			
5.4	Foundation Secure & Free of Visible Decay (RH, 2-208 B)			
Item	Section 6 – Trash	С	NC	NA
6.1	Regular Trash Removal; Free of Excessive Odors & Accumulation (RH, 2-214 D-F)			
Item	Section 7 – Pest Control	С	NC	NA
7.1	Free of Pest Infestation (RH, 2-215 A)			
7.2	Regular Pest Removal & Control Devices as Necessary (RH, 2-215 C)			
Item	Section 8 – Required Utilities, Equipment and Services	С	NC	NA
8.1	Capable of Maintaining Minimum Room Heating Temperature of 70*F (RH, 2-207 B 1)			
Item	Section 9 – Safe & Sanitary	С	NC	NA
9.1	Safe & Sanitary for Human Habitation (DRMC, 27-21)			

Page of Revised 5.3.2023



			Verified resolved date				
Initial			(non-compliant items				
inspection		Unit	must be resolved within	Inspector's			
date	Non-compliant checklist item	number	one year of application)	initials			
16 11:::							
	on-compliant checklist items have been found, please a	aa more pag	ies as necessary documenting (all violations.			
Comments:							
If submitting a	re-inspection:						
☐ I certify all reinspect items have been resolved.							
Inspector nam	e: Si	gnature:					
non-compliant items must be resolved within one year of application)							

Page of Revised 5.3.2023