

HOUSING INSPECTION REPORT

OCCUPANT NAME		OCCUPANT ADDRESS			
GRADE	NUMBER OF BEDROOMS	DATE ASSIGNED	DATE CHECK-IN INSPECTION	DATE PRELIMINARY INSPECTION	DATE CHECK-OUT INSPECTION

INSTRUCTIONS: Indicate the condition of each of the following items by these abbreviated codes:
S - Satisfactory D - Damaged/Usable R - Repair/Replace U - Unsatisfactory

	ITEM	CHECK IN	REMARKS	CHECK OUT	REMARKS	CHARGES
KITCHEN/UTILITY	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS/SHADES					
	LIGHT FIX AND OUTLETS					
	WALL CABINETS					
	BASE CABINETS/TOPS					
	COOKING RANGE/BROILER					
	REFRIGERATOR					
	SINK					
	COUNTER TOP					
	GARBAGE DISPOSAL					
	VENT FAN AND RANGE HD					
	UTILITY RM/WATER HTR					
DOORS						
DINING ROOM	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS					
	LIGHT FIX AND OUTLETS					
	DOORS					
	DRAPES/SHADES/RODS					
	PATIO DOOR/SCREEN					
LIVING ROOM	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS					
	LIGHT FIX AND OUTLETS					
	DOORS					
	STORAGE CLOSET					
	DRAPES/SHADES/RODS					
	TV JACK OR CABLE					
	FURNACE/SPACE HEATER					

HOUSING INSPECTION REPORT *(Continuation)*

OCCUPANT NAME

	ITEM	CHECK IN	REMARKS	CHECK OUT	REMARKS	CHARGES
STAIR	CEILING/WALLS					
	FLOORS/STAIRS					
	LIGHT FIX AND OUTLETS					
	STORAGE AND CLOSET					
	FURNACE AIR VENT					
MAIN BATHROOM	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS/SHADES					
	SHOWER ROD/TOWEL BAR					
	SOAP DISH/PAPER HOLDER					
	MEDICINE CABINET					
	LAVATORY					
	TUB					
	SHOWER					
	COMMODE AND SEAT					
	DOORS					
	LIGHT FIX/VENT FAN					
MASTER BEDROOM	CEILING/WALLS					
	FLOORS					
	WINDOWS					
	LIGHT FIX AND OUTLETS					
	CLOSET DOORS/SHELVES					
	DOORS					
	DRAPES/SHADES/RODS					
MASTER BATHROOM	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREEN/SHADES					
	SHOWER ROD/TOWEL BAR					
	SOAP DISH/PAPER HOLDER					
	MEDICINE CABINET					
	LAVATORY					
	TUB					
	SHOWER					
	COMMODE AND SEAT					
	DOORS					
	LIGHT FIX/VENT FAN					

HOUSING INSPECTION REPORT (Continuation)					OCCUPANT NAME	
ITEM		CHECK IN	REMARKS	CHECK OUT	REMARKS	CHARGES
BEDROOM (1)	CEILING/WALLS					
	FLOOR					
	WINDOWS					
	LIGHT FIX AND OUTLETS					
	CLOSET/DOORS/SHELVES					
	DOORS					
	DRAPES/SHADES/RODS					
BEDROOM (2)	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS					
	LIGHT FIX AND OUTLETS					
	CLOSET/DOORS/SHELVES					
	DOORS					
	DRAPES/SHADES/RODS					
BEDROOM (3)	CEILING/WALLS					
	FLOOR					
	WINDOWS/SCREENS					
	LIGHT FIX AND OUTLETS					
	CLOSET/DOORS/SHELVES					
	DOORS					
	DRAPES/SHADES/RODS					
HALF BATH	CEILING/WALLS					
	FLOOR					
	WINDOWS					
	TOWEL BAR/PAPER HOLD					
	MEDICINE CABINET					
	LAVATORY					
	COMMODE AND SEAT					
	DOOR					
	LIGHT FIX/VENT FAN					
EXTERIOR	ENTRY DOOR					
	LIGHT FIX AND OUTLETS					
	PATIO PORCH/GROUNDS					
	PORCH RAILING AND WALK					
	CLOTHES LINES					

HOUSING INSPECTION REPORT (Continuation)					OCCUPANT NAME	
ITEM		CHECK IN	REMARKS	CHECK OUT	REMARKS	CHARGES
EXTERIOR	OUTSIDE STORAGE					
	GARBAGE CANS/HOSES					
	CARPORT					
	PAINT/SIDING					
	KEYS/MAIL BOX					
OCCUPANT COMMENTS (Check-In)						
OCCUPANT SIGNATURE (Check-In)					DATE	
INSPECTOR COMMENTS (Check-In)						
INSPECTOR SIGNATURE (Check-In)					DATE	
OCCUPANT COMMENTS (Check-Out)						
OCCUPANT SIGNATURE (Check-Out)					DATE	
INSPECTOR COMMENTS (Check-Out)						
INSPECTOR SIGNATURE (Check-Out)					DATE	