

OWNER/FAMILY INSPECTION CHECKLIST

NAME OF PARTICIPANT: _____

When the packet is completed and returned to the CHA office or intake agent, with the rest of your issuance/movers packet information, you will need to set up an inspection. A walk through of the unit is required by owner and family using this checklist. **Initial inspections require both the owner and tenant to be present.**

GENERAL

No.	Description	Yes	No	N/A
1.	Will the unit be vacant for the inspection?			
2.	Does this unit have the required number of bedrooms?			
3.	How many bedrooms are in the unit?			
4.	Do all windows open?			
5.	Do all windows lock for all rooms used for living?			
6.	Is the heating equipment capable of providing adequate heat (either directly or indirectly) to all rooms used for living?			
7.	Are there any loose or torn floor coverings?			
8.	If there are four (4) or more steps or steps higher than 30", inside or out, is there a hand rail?			
9.	Can you provide written confirmation that the wood burning stove has been professionally inspected?			
10.	Basements will not pass inspection unless there is egress. (Egress means escape.) Does the basement or basement apartment have windows large enough for an adult to escape quickly and safely?			
11.	Is there an electrical outlet and is it properly installed in each room intended to be used as a living space?			
12.	Is there a permanently installed ceiling or wall light fixture or at least two (2) electrical outlets in each room intended to be used as a living space? <i>(Do not count a single duplex receptacle as two (2) outlets.)</i>			
13.	Do the outlets and/or light work in each room intended to be used as a living space?			
14.	Are there any electrical hazards? (i.e., broken wiring, non-insulated wiring, frayed wiring, mixing cover plates or outlets and cracked outlets, etc.)			
15.	Does the door exit to the outside or common area?			
16.	Does the ceiling of the <u>unit</u> present any serious defects such as: bulging or falling loose surface?			
17.	Does the walls to the <u>unit</u> include any serious defects such as holes, air infiltration or leaning?			
18.	Does the floor to the <u>unit</u> include any serious defects such as tripping hazards, buckling or missing parts?			
19.	Bedrooms cannot have an open flame. (Example: hot water heater.)			

KITCHEN

No.	Description	Yes	No	N/A
1.	Is there sufficient area for the storage of food and food preparation?			
2.	Is the refrigerator large enough for your family, and will it keep food from spoiling?			
3.	Do all the burners on the range work			
4.	Is the oven operational?			
5.	Is there a sink with hot and cold running water?			

BATHROOM

No.	Description	Yes	No	N/A
1.	Does the toilet flush?			
2.	Is there a tub or shower with hot and cold running water?			
3.	Is there a sink with hot and cold running water?			
4.	Is there at least one (1) permanent light in the bathroom?			
5.	Is there a window in the bathroom that opens or a vent that operates?			
6.	Is the toilet contained within the unit?			
7.	Is the wash basin permanently installed?			
8.	Is the toilet available for exclusive use of the tenant?			

HEALTH AND SAFETY

No.	Description	Yes	No	N/A
1.	Is the water heater equipped with a safety valve and a discharge pipe to within 4" of the floor?			
2.	Are there two (2) exits from the unit in case of an emergency?			
3.	Can you enter the unit without going through anyone else=s private living quarters?			
4.	Are there any sidewalks that might cause falling or tripping?			
5.	Is the unit, inside and outside, free from large piles of garbage and trash?			
6.	If there a smoke detector adjacent to the bedroom or bedrooms, and one additional smoke detector on each level?			
7.	<u>Mobile Homes</u> - Is the unit placed in a stable manner free from sliding or wind damage?			
8.	Do all sleeping rooms have at least one (1) window that opens?			

BUILDING

No.	Description	Yes	No	N/A
1.	Is the roof in good condition?			
2.	Are there secure handrails on any extended porches, balconies or decks which are more than 30 inches above the ground?			
3.	Is the chimney in good repair?			
4.	Is the unit on an approved public or private water system?***			
5.	Is the unit on an acceptable sewage disposal system?***			
6.	Is there evidences of infestation?			
7.	Is there heavy accumulation of garbage and debris?			
8.	Is there adequate refuse disposal?			
9.	If an apartment complex, do all common areas meet health safety guidelines, (i.e., tripping hazards, condition of walls, ceilings and interior air quality)?			
10.	Are there any neighborhood conditions that would <i>Aseriously and continuously endanger the health and safety of the residents@?</i>			
11.	Was the unit built before January 1, 1978?			
12.	If yes, is there any cracked or peeling paint?			
13.	Are there any children in the home six or under?			

*** The Cheyenne Housing Authority will not accept Housing units on septic tanks or individual water systems unless the following conditions are met:

1. Owners of housing units with septic systems must provide a current (within 30 days) septic tank inspection certificate conducted by the appropriate governmental organization.
2. Owners of housing units with individual water systems, must provide a current (within 30 days) water inspection certified by the appropriate governmental organization.

Both certifications must provide assurance that the septic system and/or water systems are safe and in acceptable operational condition.

Both certifications must be provided to the Cheyenne Housing Authority, prior to signing of the Housing Assistance Payment Contractor for initial participation and annually, ten (10) days prior to the time of tenants recertification date.

All landlords and tenants must sign the separate verification sheet on the type of water and sewage systems provided for the unit.

Landlord/Agent (Signature)

Date

Tenant (Signature)

Date

Anyone else in household over 18

Date

Anyone else in household over 18

Date