

Inspected by: _____
 Date Inspected: _____
 Property Address: _____
 Unit: _____

Robesonia Borough Rental Unit Check List

EXTERIOR PROPERTY	CHECKED	COMMENTS
General Sanitation (Garbage/Rubbish)		
Sidewalk/driveway (Tripping Hazards)		
Grass/weeds (overgrown)		
Motor Vehicles (junk vehicles)		
EXTERIOR OF STRUCTURE		
Premises Identification		
Exterior Paint/Siding/Brick		
Stairs/Handrails		
Decks/Porches (decking/guards/railings		
Front		
Rear		
ROOFING		
Shingles (loose or missing, signs of leaking)		
Gutter/Down spouts		
ROOM #1		
Doors (proper locks, open completely)		
Walls/Ceilings (chipped paint/holes)		
Windows (is there one/does it open?)		
Floor (torn carpeting, loose tiles, etc)		
Switches (work properly/covers)		
Outlets (work properly, covers/at least 2)		
Smoke Detector (tested)		
ROOM #2		
Doors (proper locks, open completely)		
Walls/Ceilings (chipped paint/holes)		
Windows (is there one/does it open?)		
Floor (torn carpeting,		

loose tiles, etc)		
Switches (work properly/covers)		
Outlets (work properly, covers/at least 2)		
Smoke Detector (tested)		
KITCHEN		
Doors (exit doors)		
Walls/Ceilings (chipped paint/holes)		
Floor (torn carpeting, loose tiles, etc)		
Switches (work properly, covers)		
Outlets (work properly, covers, at least 2)		
GFI Outlet(s) (Tested, covers)		
Lighting (is it adequate, too dark)		
Sink (faucet or drain leak)		
Range Hood (does fan work?)		

BATHROOM #	CHECKED	COMMENTS
Fan/Window (is there one, does it work?)		
Walls/Ceiling (chipped paint, holes)		
Floor (torn carpeting/loose tiles, etc)		
GFI Outlet(s) (Tested, covers)		
Lighting (light works)		
Lavatory (faucet or drain leak)		
Water closet (works properly)		
Tub/Shower (faucet leaks)		
BATHROOM #		
Fan/Window (is there one, does it work?)		
Walls/Ceiling (chipped paint, holes)		
Floor (torn carpeting/loose tiles, etc)		
GFI Outlet(s) (Tested, covers)		
Lighting (light works)		
Lavatory (faucet or drain leak)		
Water closet (works properly)		
Tub/Shower (faucet leaks)		
BEDROOM #1		
Doors (open properly)		
Windows (open freely, glass broken)		
Walls/Ceilings (chipped paint, holes)		
Floor (torn carpeting, loose tiles, etc)		
Switches (work properly, covers)		

Outlets (work properly, covers, at least 2)		
Smoke Detector (tested)		
BEDROOM #2		
Doors (open properly)		
Windows (open freely, glass broken)		
Walls/Ceilings (chipped paint, holes)		
Floor (torn carpeting, loose tiles, etc)		
Switches (work properly, covers)		
Outlets (work properly, covers, at least 2)		
Smoke Detector (tested)		
BEDROOM #3		
Doors (open properly)		
Windows (open freely, glass broken)		
Walls/Ceilings (chipped paint, holes)		
Floor (torn carpeting, loose tiles, etc)		
Switches (work properly, covers)		
Outlets (work properly, covers, at least 2)		
Smoke Detector (tested)		
ATTIC		
Stairs (handrail)		
Switches (work properly, covers)		
Smoke Detector (tested)		

BASEMENT	CHECKED	COMMENTS
Stairs (handrail)		
Switches (work properly, covers)		
CO Detector (fossil fuel burning mech)		
Smoke Detector (tested)		
Water Heater (relief pipe in place, flue)		
Grounded outlet at washing machine		
Heaters/Boilers (flue, relief pipe)		
GENERAL ITEMS		
Stairs (railing)		
Bedroom Hallway CO Detector		
Bedroom Hallway Smoke Detector		
MISCELLANEOUS		
Attached Garage CO Detector		
Emergency Lighting (for all buildings w/2		
Or more units sharing a common hallway)		

Issue certificate: _____ Re-inspection: _____ 30 days: _____ 60 days: _____ 90 days _____

Checklist acknowledged by: _____ Date: _____ Inspector Signature: _____

Owner/Representative Signature

Print Name: