

Form RD 1930-11
(01-01)

DEPARTMENT OF AGRICULTURE
Rural Housing Service
Multi-Family Housing Physical Inspection Report

Servicing Official: _____ Date of Inspection: _____

Type of visit: Annual Triennial Other - describe _____

Project Name: _____ Year Built: _____

Project Number: _____ Management Agent Name: _____

Project Type: _____ Borrower Name: _____

No of Apt. Units: _____ Borrower ID: _____

RA Units: _____

DIRECTIONS:

Record the results of the physical inspection. When needed, use the worksheet for standards to organize and record your findings.

Any subject area with a finding or violation must be documented as to how it failed to meet a standard contained on the worksheets for RHS MFH exterior or interior standards.

EXTERIOR MAINTENANCE

	Acceptable	Findings	Violation
1 Utilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Drainage and erosion control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Landscaping and grounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Drives, parking surfaces and walks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Exterior signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Fences and retaining walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Debris and graffiti	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Lighting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Foundation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Exterior walls and siding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Roofs, flashing and gutters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Window, doors and exterior structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Common area accessibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Common area signage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INTERIOR MAINTENANCE

	Acceptable	Findings	Violation
1 Flooring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 Walls, floors, and ceilings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 Doors and windows	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 Electrical, AC and heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 Water heaters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 Smoke alarms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 Emergency call system	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 Insect/vermin infestation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9 Range and hood	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 Refrigerator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 Sinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 Cabinets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13 Water closet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 Bathtub and shower stall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15 Fully Accessible Units	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS:

PROCEDURE FOR PREPARATION

: RD Instruction 1930-C.

PREPARED BY

: RD Servicing Officer.

NUMBER OF COPIES

: Original and one copy.

SIGNATURE REQUIRED

: RD Servicing Officer.

DISTRIBUTION OF COPIES

: Original to borrower's servicing file. A copy with follow-up letter to borrower within 30 days after the visit.

(01-31-01) PN 329

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Department of Agriculture
Rural Housing Service
Worksheet for MFH Exterior Physical Standards

Project Name: _____ Agency Inspector: _____

DIRECTIONS:

Use this worksheet to document findings and violations determined during exterior physical inspections.

In the first column, check to indicate either the failure frequency or the severity of the failure to meet the standard. Leave blank if okay.

The frequency is either
isolated (i),
a pattern (p), or
widespread (w).

The severity is either
low (l),
medium (m), or
high (h).

Number longer comments on an attachment for notes.
Attach pictures for additional evidence of problems.

To help determine the urgency of corrections, subject areas are coded:

- ** Serious health and safety problem.
 - * Major repair, (no star is minor repair).
- The subject area coding is also used to assist in classifying the failure to meet the standard as either a finding or violation.

In the second column, check to indicate if you consider the failure to meet the specified standard to be a finding (F) or violation (V).
A finding is a failure to meet a standard that should be corrected through routine procedures.

A violation is a finding that is a serious failure to meet a standard that must be corrected using the three servicing letters process.

In the third column, check to indicate if the entire subject area is to be considered a finding (F) or violation (V).

Site Inspection

	frequency / severity	F / V	F	V
1 UTILITIES (from evidence or documentation received by the reviewer)				
** The project has an adequate and safe water supply	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
** The project has functional and safe waste water disposal	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
** Project site is free of hazardous waste material	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 DRAINAGE AND EROSION CONTROL				
* Units, basement or crawl space are free of evidence that water has entered	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* Site drainage is safe and effectively protects the project from water damage	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site is free of standing water for long periods of time	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Site is free from erosion evidence by deep ruts or removal of top soil	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3 LANDSCAPING AND GROUNDS				
Lawns are periodically mowed	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plants and shrubs are maintained and allow air to windows, vents and sills	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreation areas are maintained and safe	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trash collection areas are adequately sized, screened and maintained	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4 DRIVES, PARKING SURFACES AND WALKS				
Provide safe access and surfaces are free of holes and deterioration	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Holes or deteriorated areas are no larger than approximately 1 sq. ft. for every 10 sq. ft. of area	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walks are free of changes in height (1/2 inch or greater) and deterioration	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5 EXTERIOR SIGNAGE				
All signs including project, building, parking, unit number and informational are visible and well kept	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project sign includes the name of the project	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project sign contains rental contact information (phone number at a minimum)	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project sign has equal housing opportunity logotype (house symbol and slogan) or slogan, or statement	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6 FENCES AND RETAINING WALLS				
Fence lines are free of trash, weeds, vines and other vegetation	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fence is free of holes, and damaged or loose sections	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The bases of all retaining walls are free of erosion	i <input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walls are promptly repaired to prevent additional damage	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weep holes are cleaned out to prevent excessive pressure behind wall	no <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7 DEBRIS AND GRAFFITI				
Project site is kept free of trash, litter and debris	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Common areas are kept free of litter, trash and debris	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public walkways, walls of buildings, common areas are free of graffiti	i <input type="checkbox"/> m <input type="checkbox"/> h <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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8 LIGHTING	frequency / severity	F / V	F	V
Exterior lighting is functional	no		<input type="checkbox"/>	<input type="checkbox"/>
Common areas lighting is functional	no		<input type="checkbox"/>	<input type="checkbox"/>
Lighting permits safe access and security	l m h		<input type="checkbox"/>	<input type="checkbox"/>

Building Inspection

9 FOUNDATION should be free of evidence of structural failure such as:	frequency / severity	F / V	F	V
Free of uneven settlement, evidenced by continuous horizontal cracks along the entire wall	no		<input type="checkbox"/>	<input type="checkbox"/>
Free of severe bowing of the foundation wall	no		<input type="checkbox"/>	<input type="checkbox"/>
Free of unstable soils which could undermine foundations or parking areas	no		<input type="checkbox"/>	<input type="checkbox"/>
Free of structural members showing excessive rot	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Free of insect or rodent infestation	l p w		<input type="checkbox"/>	<input type="checkbox"/>

10 EXTERIOR WALLS AND SIDING			F	V
Walls free from deterioration which allows elements to infiltrate the structure	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Eaves, gables and window trim are free of deterioration	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Exterior wall coverings are intact, securely attached and in good condition	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Brick veneers are free of missing mortar or bricks	l p w		<input type="checkbox"/>	<input type="checkbox"/>

11 ROOFS, FLASHING AND GUTTERS			F	V
Gutters and downspouts securely attached, clean and finished (painted) properly	l m h		<input type="checkbox"/>	<input type="checkbox"/>
Splash blocks or extenders are used to direct flow away from building	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Roof is free of leaks or defective covering which allows elements to enter	l m h		<input type="checkbox"/>	<input type="checkbox"/>
The roof structure is free of sagging or buckling	l m h		<input type="checkbox"/>	<input type="checkbox"/>
Fascia and soffits are intact	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Roof is free of curled or missing shingles	l p w		<input type="checkbox"/>	<input type="checkbox"/>

12 WINDOWS, DOORS, AND EXTERIOR STRUCTURES			F	V
Screens are free of tears, breaks and rips	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Windows are unbroken	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Window thermopane seals are unbroken	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Caulking on the exterior of the windows and doors is continuous and free of cracks	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Doors provide security and have functional locks	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Doors are weather tight and free of holes	l p w		<input type="checkbox"/>	<input type="checkbox"/>
Porches, balconies and exterior stairs are free of broken, missing or rotting components	l m h		<input type="checkbox"/>	<input type="checkbox"/>

Common Areas

13 COMMON AREA ACCESSIBILITY	frequency / severity	F / V	F	V
Accessible, designated handicapped parking space(s) provided	No		<input type="checkbox"/>	<input type="checkbox"/>
Handicapped parking space properly identified	No		<input type="checkbox"/>	<input type="checkbox"/>
Common areas (mailboxes, office, community room, trash area, playground and laundry room) are accessible through walks, ramps, landings, door lever handles, thresholds and widths	No		<input type="checkbox"/>	<input type="checkbox"/>
Accessible appliances in laundry	No		<input type="checkbox"/>	<input type="checkbox"/>
Mailboxes for accessible units at accessible heights	No		<input type="checkbox"/>	<input type="checkbox"/>
Elevators or mechanical lifts are functional and kept in good repair (if installed)	No		<input type="checkbox"/>	<input type="checkbox"/>
Common area switches, outlets, thermostats and controls at accessible heights	No		<input type="checkbox"/>	<input type="checkbox"/>
Public restrooms have maneuvering room at sinks and toilets, grab bars and lever faucets, insulated pipes, and mirrors at accessible height	No		<input type="checkbox"/>	<input type="checkbox"/>

14 COMMON AREA SIGNAGE			F	V
"Justice for all" poster properly displayed	No		<input type="checkbox"/>	<input type="checkbox"/>
Equal housing opportunity poster properly displayed	No		<input type="checkbox"/>	<input type="checkbox"/>
Current affirmative fair housing marketing plan posted	No		<input type="checkbox"/>	<input type="checkbox"/>
Tenant grievance and appeal procedure posted	No		<input type="checkbox"/>	<input type="checkbox"/>
Project occupancy rules posted	No		<input type="checkbox"/>	<input type="checkbox"/>
Office hours posted	No		<input type="checkbox"/>	<input type="checkbox"/>
Emergency hours posted	No		<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS:

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Department of Agriculture
Rural Housing Service
Worksheet for RHS MFH Interior Physical Standards

Project Name: _____ Agency Inspector: _____

DIRECTIONS:

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isolated (i),
a pattern (p), or
widespread (w).

The severity is either
low (l),
medium (m), or
high (h).

Number longer comments on an attachment for notes.
Attach pictures for additional evidence of problems.

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- ** Serious health and safety problem.
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In the third column, check to indicate if the entire subject area is to be considered a finding (F) or violation (V).

Apartment Units – General

	frequency / severity	F / V	F	V
1 FLOORING				
Carpet is clean and without excessive wear	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Carpet seams secure and stretched properly	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Resilient flooring is clean and unstained	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Resilient flooring is free of tears and breaks, and seams are secure	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
2 WALLS, FLOORS, AND CEILINGS				
Walls and ceilings are free of holes	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Wallboard joints are secure and free of cracks	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Walls and ceilings are free of evidence of current water leaks	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Walls and ceilings are free of material that appears in danger of falling	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
3 DOORS AND WINDOWS				
All doors are free of holes and metal doors are free of rust	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Door hardware is secure, unbroken, and easily operable	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Dead bolts are in place and secure	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Windows can be easily opened and closed	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Window interiors are free of evidence of moisture damage	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Windows are free of bent blinds or torn curtains	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
4 ELECTRICAL, AIR CONDITIONING AND HEATING				
Units are free of bare wires, uncovered outlets or other evident safety hazards	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Switches working properly without evidence of arcing	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Light fixtures are unbroken and operable	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Heating and cooling modes function properly, including thermostats	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
5 WATER HEATERS				
Water heaters operate properly, do not leak and supply adequate hot water	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Water heaters are supplied with temperature/pressure relief valves	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
6 SMOKE ALARMS				
Properly located according to local code	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Operating properly	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
7 EMERGENCY CALL SYSTEM (IF INSTALLED)				
Operating properly		no	<input type="checkbox"/>	<input type="checkbox"/>
Switches located in bathroom and bedroom		no	<input type="checkbox"/>	<input type="checkbox"/>
Switches furnished with pull cord and the down position is "ON"		no	<input type="checkbox"/>	<input type="checkbox"/>
8 INSECT/VERMIN INFESTATION				
Units free of visible signs of insects or rodents	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>
Units free of signs of insect or rodent damage	i p w	l m h	<input type="checkbox"/>	<input type="checkbox"/>

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Apartment Units – Kitchen

	frequency / severity	F / V	F	V
9 RANGE AND RANGE HOOD			<input type="checkbox"/>	<input type="checkbox"/>
Housing is sound and finish is free of chips, damage or signs of rust	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical connections secure and insulated	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All range elements operable	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doors and drawers secure	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Control knobs and handles in place and secure	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Range hood fan and light are operable	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10 REFRIGERATOR			<input type="checkbox"/>	<input type="checkbox"/>
Housing is sound and finish is free of chips, damage or signs of rust	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooler and freezer operating satisfactorily	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelves and door container secure and free of rust	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Door gaskets in good condition and functioning properly	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Apartment Units - Kitchen and Bathroom

	frequency / severity	F / V	F	V
11 SINKS			<input type="checkbox"/>	<input type="checkbox"/>
Finish is free of chips, damage or signs of rust	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sink is free of cracks, breaks and leaks	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strainer in good condition and in place	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fittings working properly and free of leaks	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing connections under cabinet are free of leaks	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sink secured to wall, counter or vanity top	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12 CABINETS			<input type="checkbox"/>	<input type="checkbox"/>
Cabinets and vanities are secure to walls and floor	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cabinet faces, doors and drawer fronts in good condition, and free of breaks and peeling	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All drawers and doors are in place and working properly	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Counter tops secure and free of burn marks or chips	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shelves in place, fastened securely and free of warps	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bottoms under sink are free of evidence of warping, breaks or being water soaked	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchen counter and vanity top and back splash are properly caulked	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Apartment Units – Bathroom

	frequency / severity	F / V	F	V
13 WATER CLOSET			<input type="checkbox"/>	<input type="checkbox"/>
Stool is free of cracks, breaks and is securely fastened to the floor	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seat is secure and in good condition	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tank is free of cracks or leaks and the lid fits and is in good condition	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flushing mechanism is in good condition and operates properly	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Water closet base at floor is properly caulked	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14 BATHTUB AND SHOWER STALL			<input type="checkbox"/>	<input type="checkbox"/>
Finish is free of chips, damage or signs of rust	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tub and shower stall are free of cracks, breaks and leaks	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strainer in good condition and in place	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walls and floors of bathtub are properly caulked	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Top and sides of shower stall are properly caulked	<input type="checkbox"/> p <input type="checkbox"/> w <input type="checkbox"/> o	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Fully Accessible Units

	frequency / severity	F / V	F	V
15 FULLY ACCESSIBLE UNITS			<input type="checkbox"/>	<input type="checkbox"/>
Unit is accessible through walks, ramps, landings, floor coverings, door lever handles, thresholds and door widths	No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Kitchens have lever faucets, maneuvering room at sinks and counters, accessible counter heights, controls and insulated pipes	No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bathrooms have maneuvering room at sinks, toilets and showers or tubs, grab bars and lever faucets, insulated pipes, and mirrors at accessible height	No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Switches, outlets, thermostats and controls at accessible heights	No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Functional emergency call system in bedroom and bathroom	No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS: