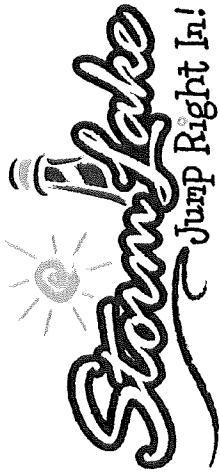


**CITY OF STORM LAKE
RENTAL INSPECTION FORM**



Rental Address: [] Inspection Date: [] # of Units: []
 Owner Name: [] Re-inspection Date: []
 Representative Name: [] Inspector Name: []

EXTERIOR PROPERTY/AREA

Property Maintenance Code:

Approved Status YES NO REIN	Description/Detail
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has no broken windows or doors
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property does not have unpainted or peeling paint in excess of 50% of the area
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has a paved approach from street to property line
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has all vehicles parked on approved surfaces
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property does NOT have an accumulation of weeds and brush
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property does NOT have an accumulation of garbage or debris
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property does NOT have any Junk Vehicles on site
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property is NOT providing habitat for rodents or wild animals
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has house numbers clearly visible from the street
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Exterior Structural Issues:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has no loose or crumbling plaster

Approved Status YES NO REIN	Description/Detail
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property is properly waterproofed both on the exterior walls and roof
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has NO broken, rotted, split or buckled exterior walls
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	All fences and retaining walls are maintained and NOT in need of repair
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Chimney is not in danger of falling down or bulging
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Property has no unsafe storage of combustible materials
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Porch and Deck flooring supports are not defective or deteriorated
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Porch and Deck flooring supports are of sufficient size to support loads imposed
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Sidewalk Compliance:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Sidewalks do not present any tripping or falling hazards <input type="checkbox"/> N/A
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	INTERIOR PROPERTY/AREA
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Electrical Safety Items:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Electrical panel is clearly labeled with all circuits marked
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Electrical service is sized to handle loads imposed by the property
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Extension cords are sized properly and not running under rugs or furniture
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Unused openings in the electrical panel or cutout boxes are properly closed
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	The proper over current protection is installed
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Disconnection points are clearly marked and labeled for each service, feed, or branch circuit

Approved Status YES NO REIN	Description/Detail
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Electrical room is clearly marked and accessible
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	There is a clear and unobstructed means of access to the control panel
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Plumbing/Heating Items:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Water heaters and boilers have pressure relief valves piped to within 6" - 24" of the floor
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Fuel fired equipment does not have missing or corroded flues
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Fuel fired equipment has a shutoff valve installed in the gas piping within 3' (feet) of the appliance
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Fire Safety:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	A minimum of three (3) fire extinguishers are present <input type="checkbox"/> N/A
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Fire alarm system, when required, is present and in good operating condition <input type="checkbox"/> N/A
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Class 1 liquids are not stored in building (ex: gasoline)
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Smoke Detectors are operational
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Smoke Detectors are located in required locations
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Structural Items:
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Flooring supports are of sufficient size to support loads imposed
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Flooring supports are not defective or deteriorated
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Walls and partitions are of sufficient size to carry imposed loads

Approved Status
YES NO REIN

Description/Detail

Ingress/Egress Items:

- All sleeping quarters have appropriate egress exits
- Living and sleeping space is in allowable areas

Sanitation Items:

- Bathroom facilities have working toilets, sinks and bathing facilities
- Kitchen area has a working sink and drain
- Structure has a working properly sized heating unit
- Structure has hot and cold water to all fixture units
- Structure is connected to proper sanitary sewer system
- No illicit discharge of sanitary sewer material is entering public ROW or storm water system

Address:

Notes:

Inspection Date:

Notes:

I, as the authorized representative or owner of this property, understand the inspection deficiencies that have been identified during this inspection and what I need to do to correct the deficiencies prior to the scheduled Re-Inspection date and time outlined below. Should I not be able to complete the repairs needed by the re-inspection date I understand and agree that I will be subject to a Municipal Infraction for each day there after in which the deficiencies are not repaired. In addition, I agree that I will be responsible for any additional re-inspection fees in excess of the first one at the current rate of \$_____ per inspection. I do understand that I have the option of requesting an extension to repair non-life threatening items provided I request an extension at least three business days prior to the date of the re-inspection listed below.

Should I fail to show up (on time or at all) for a scheduled re-inspection I understand and agree that I will be subject to the payment of a No-show Fee in the amount of \$50.00 per event. Failure to pay any fees or penalties may result in legal action being taken by the City of Storm Lake.

This property requires a re-inspection

RE-INSPECTION DATE

REINSPECTION TIME

Property Rep. Signature

Date

All items have been RESOLVED at time of re-inspection

Inspection entered in database

No-Show for Initial Inspection

GIS Parcel #

There are still outstanding items at the time of re-inspection

Municipal Infraction Issued

No-Show for re-inspection

Turned over to Property Maintenance

Billed for no-shows

Paid for no-shows

Cash

Credit

Check

CK #