GAIINESVILLE HOUSING AUTHORITY UNIT INSPECTION FORM

INITIAL	ANNUAL VACANCY	QUALITY O	CONTROL	
Resident:		Unit #	AI WO #	
Inspection Date:	Inspected By:	I		
Start Time:	_ End Time:			
		s No N/A #_ ident Yes No N/A uired: Yes No N/A		

Re-inspection Required: Yes No N/A Date							
INSPECTABLE ITEMS	N/A	NOD	OD	DESCRIPTION			
DWELLING UNIT	IV/A	NOD	OD	DESCRIPTION			
BATHROOM							
GFI- Inoperable							
Cabinets – Damaged/Missing							
Lavatory sink/Damaged/Missing							
Plumbing – Clogged Drains							
Plumbing – Clogged Drains Plumbing – Leaking Faucet/Pipe							
Shower/Tub – Damage/Missing							
Ventilating/Exhaust system – inoperable							
Water closet – Damaged/Clogged/Missing							
CEILING							
Water Stains/Water Damage/Mold/Mildew							
Bulging/Bucking Holos/Missing tiles/Papals	_	-					
Holes/Missing tiles/Panels DOORS		-	 				
	_	-					
Damaged Surface – Holes/Paint/Rusting Glass Damaged Frames/Threshold/Trim			 				
Damaged Hardware/Lock							
Deteriorated/Missing Seals (entry only)							
Door inoperable							
Missing Door							
FLOORS							
Bulging/Bucking							
Floor Covering Damage							
Holes/Missing Tiles							
Rot/Deteriorated Flooring							
HOT WATER HEATER							
Inoperable Unit/Components							
Leaking Values/Tanks/Pipes							
Pressure Relief Value Missing							
Rust/Corrosion							
KITCHEN							
Countertops/Cabinets Missing/Damaged							
Exhaust Systems Excessive Grease/ inoperable							
KITCHEN (Con't)							
GFI – inoperable							
Plumbing – Clogged Drains							
Plumbing – Leaking Faucet/Pipes							
Range Stove Missing/Damaged/inoperable							
Refrigerator Missing/Damaged/inoperable		1					
Sink – Damaged/Missing		1					
WALLS		1					
Bulging/Bucking							
Need Paint							
Damaged							
Water Stains/ Water Damaged/Mold/Mildew							
WINDOWS							

Inoperable/ Not lockable											
Cracked/Broken/Missing											
Damaged Sill											
Security Grills Prevent Egress											
Deteriorated/Missing Caulking/Seals											
HVAC											
Inoperable											
Noisy/Vibrating/Leaking											
Covers Missing/Damaged											
Rust/Corrosion											
LIGHTING											
Missing/Inoperable Fixtures											
STAIRS											
Broken/Damaged/Missing Steps											
Railing – Damaged/Missing											
ELECTRICAL SYSTEM											
Blocked Assess to Electrical Panel											
Frayed Wiring											
Panel Breaker Missing/Damaged											
OUTLEST/SWITCHES											
Missing/Broken Cover Plates											
HEALTH AND SAFETY DEFICIENCIES											
EXIGENT/LIFE THREATENING											
Air Quality Propane/natural Gas/Methane Gas Detected											
Electrical Hazards Exposed Wire/Open Panels											
Water Leaks on/near Electrical Equipment FIRE SAFE											
Emergency Equip/Fire Exits/Fire Escapes											
Emergency/Fire Exits/Blocked/Unusable Fire Escapes											
Window Security Bars Prevent Bldg Ingress/Egress											
Blocked Egress/Ladders											
Fire Extinguishers Expire											
SMOKE DETECTORS											
Inoperable											
Missing Exit Signs											
NON-LIFE THREATENING ELEVATOR											
HAZARDS/TRIPPING											
Sharp Edges											
Others											
INFESTATION											
Rats/Mice/vermin											
Insects											
GARBAGE and DEBRIS											
Indoors											
AIR QUALITY											
Sewer Odor Detected											
Mold and/or Mildew Observed											
HANDRAILS											
Missing /Broken											
EMERGENCY FIRE EXITS											
Missing Exit Signs											
FLAMMABLE MATERIALS											
Improperly Stored Materials											
NA = Not Applicable COMMENTS:	NOD=	No Obs	erved I	Deficier	ncy	OD =	Obse	rved	Defici	ency	_
											_
				_							
Resident Signature:				Date: _							
Housekeeping Good Fair	Po	oor		Pass		F	ail				