



All Active Award Programs:

Date of Inspection:

Type of Inspection: Initial Re-inspection RVI

Program (s) # Inspected (PI):	Project Name:
-------------------------------	---------------

Part A: Development Profile

<p>Project Location:</p> <p>Street _____</p> <p>City _____ State _____ Zip _____</p> <p>Site and Neighborhood conditions:</p> <p style="text-align:center">Good Average Poor</p> <p>Scope of Work</p> <p># of Buildings _____ # of Program Units: _____</p> <p># of Units _____ # of Units Inspected _____</p> <p>Construction</p> <p>Year Building(s) built: <input type="text"/> Verified? Yes No</p> <p>Accessibility:</p> <p>Were any building(s) built for 'First' occupancy after 3/13/1991? Yes No</p> <p>Does Development provide Accessibility or accommodations for their disabled residents? Yes No</p> <p>Are the buildings a part of Multiple building project in DMS? Yes</p>	<p>Owner's Information:</p> <p>Name _____</p> <p>Street _____</p> <p>City _____ State _____ Zip _____</p> <p>Management Agent's Information:</p> <p>Name _____</p> <p>Street _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone # _____ E-mail Address _____</p>
---	--

Housing Type:

Single Family	
Duplex	
Rowhouses	
Townhomes	

Walk-up (1- 2 Stories)	
Mid-Rise (3-4 stories)	
High-Rise (5+ stories)	

Occupancy Type

Multi-Family	
Single Family	
Independent Group	
Special Needs	
Senior	
Other	

Were any buildings built before 1978? Yes

Are there children under 6 yrs old? Yes

<p>Roof type: Flat-Accessible Flat-Not Accessible Flat-Partially Accessible Pitched Roof - Not Accessible</p>	<p style="text-align:center">Certificate Verifications</p> <table border="1" style="width:100%"> <tr> <th style="width:50%">Certificate Item</th> <th style="width:50%">Results (Acceptable/Unacceptable)</th> </tr> <tr><td>Boiler(s)</td><td></td></tr> <tr><td>Elevator(s)</td><td></td></tr> <tr><td>Fire Alarm(s)</td><td></td></tr> <tr><td>Sprinkler Systems</td><td></td></tr> <tr><td>Other (e.g., off-site monitoring)</td><td></td></tr> </table>	Certificate Item	Results (Acceptable/Unacceptable)	Boiler(s)		Elevator(s)		Fire Alarm(s)		Sprinkler Systems		Other (e.g., off-site monitoring)	
Certificate Item	Results (Acceptable/Unacceptable)												
Boiler(s)													
Elevator(s)													
Fire Alarm(s)													
Sprinkler Systems													
Other (e.g., off-site monitoring)													

Part B: Inspection Status

Inspectable Area:	Inspectable Area Status			Inspectable Area:	No. of Deficiency Breakdown		
	Pass	Fail	Poor Condition		# Deficiencies	# H&S	# EH&S
Site				Site			
Building Exterior				Building Exterior			
Building System				Building System			
Common Area				Common Area			
Units				Units			
Overall Status				Overall Status			

cdp09/27/2021

Part C: Signature

1. Inspection Performed by:

Physical Inspector Signature _____ Date _____

Jose Zavala Jr

Physical Inspection Supervisor (Fail Report Only)

_____ Date _____

Charlotte Pickens

2. Development Representative at Inspection:

Title _____

Name _____

Proxy Inspector Title _____

Proxy Inspector Name _____

Program Unit Sampling Identifier

Unit #	# Bedrooms	Occupied?	Uninspected reason?	Pass/Fail results	Unit Program

This report will not include individual unit report(s) for units denoted 'Pass' on this form

Part D: Physical Condition

Indicate if the physical condition of an item is Pass or Fail. If maintenance or repair is needed, describe on Deficiency List.

N/A = Not Applicable

	Pass	Fail	N/A		Pass	Fail	N/A
1. SITE				K.) Boiler/Mechanical Room			
A.) Fencing				1.) Ceiling			
B.) Gates				2.) Doors			
C.) Grounds				3.) Electrical			
1.) Landscaping				4.) Floors			
2.) Sidewalks				5.) Lighting			
3.) Mailboxes				6.) Smoke Detectors/CO2			
4.) Project Signs				7.) Stairs			
5.) Pkng Lts/Driveways/Rdways				8.) Walls			
a.) Curbs & Gutters				9.) Windows			
b.) Lighting/Electrical				L.) Health & Safety			
c.) Pot Holes				1.) Air Quality			
6.) Steps & Handrails				2.) Electrical/Other Hazards			
7.) Graffiti				3.) Emergency Fire Exits			
8.) Play Lots				4.) Flammable Materials			
9.) Refuse Areas/Enclosures				5.) Infestation			
10.) Retaining Walls				4.) COMMON AREAS			
11.) Storm Drainage				A.) Basement			
D.) Health & Safety				1.) Ceiling			
1.) Tripping Hazards				2.) Doors			
2.) Electrical/Other Hazards				3.) Electrical			
3.) Flammable Materials				4.) Floors			
4.) Infestation				5.) Lighting			
2.) BUILDING EXTERIOR				6.) Smoke Detectors/CO2			
A.) Doors				7.) Stairs			
B.) Fire Escapes & Foundations				8.) Walls			
C.) Roofs				9.) Windows			
1.) Gutters & Downspouts				C.) Community Room			
2.) Soffits/Facia/Flashing				1.) Ceiling/Walls			
D.) Exterior Lighting/GFCI				2.) Doors & Windows			
E.) Chimney				3.) Electrical			
F.) Exterior Walls/Windows				4.) Floors			
G.) Health & Safety				5.) HVAC			
1.) Electrical/Other Hazards				6.) Lighting			
2.) Emergency Fire Exits				7.) Smoke Detector/CO2			
3.) Flammable Materials				8.) Call for Aid System			
4.) Tripping Hazards				D.) Day Care (Tenant use only)			
5.) Infestation				1.) Ceiling			
3.) BUILDING SYSTEMS				2.) Doors			
A.) Domestic Water, Cold				3.) Electrical			
1.) Water Service/Leaks				4.) Floors			
2.) Water Meter				5.) HVAC			
B.) Domestic Water				6.) Lighting			
1.) Hot Water Heater				7.) Smoke Detector/CO2			
C.) Electrical System				8.) Stairs			
1.) Panel Covers				9.) Walls			
2.) Ground Cable				10.) Windows			
D.) Elevator(s)				E.) Common Halls, Corridors, Stairs			
E.) Emergency Power				1.) Ceiling			
F.) Exhaust Fan(s)				2.) Doors			
G.) Fire Protection				3.) Electrical			
1.) Fire Extinguishers				4.) Floors			
2.) Sprinkler Heads				5.) Graffiti			
3.) Smoke Detectors/CO2				6.) HVAC			
H.) Pumps				7.) Lighting			
I.) HVAC				8.) Smoke Detector/CO2			
1.) Boilers				9.) Stairs			
2.) Furnace/Air Conditioner				10.) Walls/Windows			
3.) Vents to Chimney				11.) Call for Aid System			
J.) Sanitary System				F.) Community Kitchen			
1.) Vents				1.) Cabinets/Countertop/Sink			
2.) Drains				2.) Smoke Detector/CO2			
3.) Man Hole Covers				3.) Ceiling/Walls/Floors			
				4.) Doors/Windows			
				5.) Electrical/Appliances			

Part D: Physical Condition, Con't. Indicate if the physical condition of an item is Pass or Fail. If maintenance or repair is needed, describe on Deficiency List.

N/A = Not Applicable

	Pass	Fail	N/A		Pass	Fail	N/A
G.) Laundry Room				M.) Carport			
1.) Ceiling				1.) Ceiling			
2.) Doors				2.) Lighting			
3.) Dryer Vent				N.) Pools & Related Structure			
4.) Electrical				1.) Fencing			
5.) Floors				2.) Pool			
6.) GFI				O.) Community Restrooms			
7.) HVAC				1.) Ceiling/Walls/Windows			
8.) Lighting				2.) Doors & Floors			
9.) Smoke Detector/CO2				3.) Electrical			
10.) Stairs				4.) GFI & HVAC			
11.) Walls/Windows				5.) Sink			
12.) Call for Aid System				6.) Lighting & Smoke Detector			
H.) Lobby				7.) Plumbing			
1.) Ceiling				8.) Cabinets			
2.) Doors				9.) Shower/Tub/Toilet			
3.) Electrical				10.) Ventilation/Exhaust			
4.) Floors				11.) Call for Aid System			
5.) HVAC				P.) Storage/Closet/Utility Rooms			
6.) Lighting				1.) Ceiling			
7.) Smoke Detector/CO2				2.) Doors			
8.) Stairs				3.) Electrical			
9.) Walls/Windows				4.) Floors			
10.) Call for Aid System				5.) HVAC			
I.) Office				6.) Lighting			
1.) Ceiling				7.) Smoke Detector/CO2			
2.) Doors				8.) Plumbing/Sink			
3.) Electrical				9.) Walls			
4.) Floors				10.) Windows			
5.) HVAC				Q.) Trash Collection Areas			
6.) Lighting				1.) Chutes/Exterior Enclosure			
7.) Smoke Detector/CO2				R.) Health & Safety			
8.) Stairs				1.) Air Quality			
9.) Walls				2.) Electrical/Other Hazards			
10.) Windows				3.) Emergency Exits			
J.) Other Community Spaces				4.) Flammable Materials			
1.) Ceiling				5.) Infestation			
2.) Doors				S.) Deteriorated Paint Visual Assessment:			
3.) Electrical				Are all painted surfaces free of deteriorated paint?			
4.) Floors				Yes No N/A			
5.) HVAC				If not, do building(s) common areas deteriorated surfaces exceed 2 square feet per room and/or is more than 10% of a component?			
6.) Lighting				Yes No			
7.) Smoke Detector/CO2				If not, do building(s) exterior deteriorated surfaces exceed 20 square feet of total exterior surface area?			
8.) Stairs				Yes No			
9.) Walls/Windows				Lead-Based Paint Owner's Certification			
10.) Call for Aid System				Yes No			
K.) Patio/Porch/Balcony				T.) General Physical Condition of the site:			
1.) Railings				Are grounds and landscaping in acceptable condition?			
2.) Ceilings				Yes No			
3.) Doors				Is the development free of obvious fire/safety/health hazards?			
4.) Electrical/GFCI				Yes No			
5.) Floors/Decking/Concrete				Are playground equipment, pool, tennis, and basketball courts			
6.) Lighting				in acceptable condition? Yes No N/A			
7.) Stairs				Are hallways, stairwells, elevators, lobbies, laundry rooms, garbage			
8.) Walls				areas, maintenance/work storage areas and other public areas clean?			
9.) Windows				Yes No N/A (see deficiency list for additional comments)			
L.) Garage/Sheds							
1.) Ceiling							
2.) Doors							
3.) Electrical/GFCI							
4.) Floors							
5.) Lighting							
6.) Smoke Detectors/CO2							
7.) Walls/Windows							
8.) Roof/Fascia/Soffit							
9.) Gutters/Downspouts							

Part E: Comments

	Inspection Status: PASS Fail	Year of Next Inspection:	Year of Last Inspection:
--	---	--------------------------	--------------------------

Overall Site/Building(s) Conditions Comments: Portfolio Risk Mgmt Request - **Poor Cond.**

Town/Municipality Code Inspection

Has development had a Town/Municipality Code Inspection? Yes No

Did development pass the code inspection? Yes No

Did development provide the inspection report? Yes No

Is representative aware if a municipal inspection was conducted? Yes No

Was violation correction documentation provided? Yes No

Is a copy of the report included in the inspection folder? Yes No

Additional Comments (if applicable):

SEE PHYSICAL INSPECTION DEFICIENCY CHECKLIST FOR INSPECTABLE AREA BREAKDOWN