



## Rental Housing Inspection Program Self-Certification Checklist

Date of Inspection: \_\_\_\_\_

**PROPERTY INFORMATION**

ADDRESS: \_\_\_\_\_ UNIT/APT: \_\_\_\_\_

OWNER: \_\_\_\_\_

**SELF-CERTIFICATION**

Owners of rental housing properties must certify each and every rental housing unit on the property at least once every calendar year and upon each change in tenancy. Self-certification requires the following: Inspect each rental housing unit on the property for compliance with this checklist; Immediately make repairs to the housing unit in order to achieve compliance with the requirements on this checklist; Upon completion of this checklist, provide a copy of the completed checklist to the occupants of the corresponding rental unit and to the City of Fort Madison.

Check the box next to each item or area that is inspected and found to be in compliance. Please use a separate Self-Certification Checklist form for each rental housing unit inspected.

<input type="checkbox"/> <b>ADDRESS NUMBER.</b> Address numbers are required on all properties and units. Numbers are required to be 2" wide by 3" long and posted on the 1st story of the building.  <input type="checkbox"/> <b>PREMISES.</b> No abandoned or inoperable vehicles, overgrown vegetation, infestation of insects or vermin, discarded household items, trash, debris or any graffiti.  <input type="checkbox"/> <b>EXTERIOR WALLS.</b> In good condition, no peeling paint. holes, missing sections or deterioration.  <input type="checkbox"/> <b>EXTERIOR LIGHTING.</b> All lights function and have proper covers, no exposed wiring.  <input type="checkbox"/> <b>ENTRY DOORS.</b> All doors and door jambs have strike plates that are secure, not loose; entry doors have a standard deadbolt with thumb latch at interior, a viewer and are weather sealed.  <input type="checkbox"/> <b>ROOFS &amp; CEILINGS.</b> In good condition without any leaks.  <input type="checkbox"/> <b>WINDOWS &amp; WINDOW LOCKS.</b> Windows can be opened and closed easily and have no missing or broken glass. Bedroom egress windows are not blocked by furniture or air conditioners.  <input type="checkbox"/> <b>STAIRWAY, LANDING, TREAD, RISERS, GUARDRAILS &amp; HANDRAILS.</b> In good condition, well secure, not loose or deteriorated.  <input type="checkbox"/> <b>SCREENS.</b> No missing or damaged crawl space, attic or foundation vent screens. All windows other than 1st floor are required to have screens.  <input type="checkbox"/> <b>KITCHEN COUNTERS &amp; SINK SURFACES.</b> Surfaces are in good condition; no significant cracked, chipped or missing pieces.  <input type="checkbox"/> <b>FLOOR COVERINGS.</b> Coverings do not create tripping hazards or unsanitary conditions.	<input type="checkbox"/> <b>BATHROOM VENTILATION.</b> Bathrooms have operable window or exhaust fan.  <input type="checkbox"/> <b>GFCI REQUIRED LOCATIONS.</b> GFCI properly function and have been installed where outlets have been replaced in the bathrooms, on kitchen counters, on the exterior and in garages.  <input type="checkbox"/> <b>SMOKE DETECTORS.</b> Smoke detectors are working and are located in hallways leading to rooms used for sleeping purposes, in sleeping rooms and one located on each level.  <input type="checkbox"/> <b>FIRE EXTINGUISHER.</b> One fire extinguisher is required in every kitchen area. Extinguisher must be mounted per installation instructions. If stored in a cabinet or closet, door must be labeled.  <input type="checkbox"/> <b>CARBON MONOXIDE DETECTORS.</b> Carbon monoxide detectors are required on every floor that gas appliances are on and outside bedrooms. (Not required if house does not have gas service)  <input type="checkbox"/> <b>PLUMBING FIXTURES/PIPING.</b> Properly installed and in good condition without any leaks or clogs, no missing handles or spouts.  <input type="checkbox"/> <b>WATER HEATERS.</b> Water heaters are installed in an approved location and have seismic strapping, operable temperature relief valve & drain line, venting and a minimum 120° degrees water temperature.  <input type="checkbox"/> <b>ELECTRICAL.</b> General outlets, lights, switches and cover plates are installed properly and in good condition; no exposed wiring.  <input type="checkbox"/> <b>ELECTRICAL PANEL.</b> Multi-unit panels are identified, all breakers/fuses are labeled and there is no exposed wiring.  <input type="checkbox"/> <b>HEATERS.</b> Are permanently installed and properly functioning.
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I certify that I have inspected the aforementioned unit and that the unit complies with all the checklist items listed above. In addition, I have provided a copy of this completed checklist to the occupants of the unit inspected.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINT NAME