



**CITY OF MILFORD
RENTAL UNIT INSPECTION FORM**

Date: _____

Appt. Time: _____

Pass/Fail: _____ Ward: _____ Inspector: _____

Contact Name: _____ Phone #: _____

Rental Property Location: _____

Street Address Apt. Complex/Unit

Email Address: _____ Inspection #: _____ Bed/Bath#: _____

GENERAL EXTERIOR

	PASS	FAIL	NOTES
PM.302.4 Weeds	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.308.1 Accumulation of Rubbish and Garbage	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.302.3 Sidewalks and Driveways	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.7 Roofs and Drainage	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.11 Chimneys and Towers	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.9 Overhang Extensions	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.2 Protective Treatment	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.13 Windows, Skylight, and Door Frames	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.18.1 Access Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.10 Stairways, Decks, Porches, Balconies	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.4 Structural Members	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.5 Foundation Walls	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.604.3 Electrical System Hazard	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.304.12 Handrails and Guards	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.702.3 Locked Doors / Egress	<input type="checkbox"/>	<input type="checkbox"/>	_____

GENERAL INTERIOR

	PASS	FAIL	NOTES
PM.304.15 Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.305.3 Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.305.4 Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.305.5 Handrails and Guards	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.701.2 Fire Safety Requirements	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.305.6 Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.309.1 Infestation	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.602.3 Heat Supply	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.603.1 Mechanical Appliances	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.603.2 Removal of Combustion Products	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.605.1 Electrical Equipment - Installation	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.403.5 Clothes Dryer Exhaust	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.704.2.1.2 Smoke Detector	<input type="checkbox"/>	<input type="checkbox"/>	_____
PM.505.4 Hot Water Heater	<input type="checkbox"/>	<input type="checkbox"/>	_____

LIVING ROOM

		PASS	FAIL
PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazard	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>

NOTES

DINING ROOM

		PASS	FAIL
PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazard	<input type="checkbox"/>	<input type="checkbox"/>

NOTES

KITCHEN

		PASS	FAIL
PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.504.1	Plumbing Systems and Fixtures - General	<input type="checkbox"/>	<input type="checkbox"/>
PM.505.1	Water System – General	<input type="checkbox"/>	<input type="checkbox"/>
PM.603.1	Mechanical Appliances	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>

NOTES

HALLWAYS

		PASS	FAIL
PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>
Title 16-6602C	Carbon Monoxide Detector	<input type="checkbox"/>	<input type="checkbox"/>

NOTES

BATHROOM #1

		PASS	FAIL
PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.6	Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>
PM.403.2	Operational Exhaust	<input type="checkbox"/>	<input type="checkbox"/>
PM.504.1	Plumbing Systems & Fixtures	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>

NOTES

BATHROOM #2

PASS FAIL

NOTES

PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.6	Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>
PM.403.2	Operational Exhaust	<input type="checkbox"/>	<input type="checkbox"/>
PM.504.1	Plumbing Systems & Fixtures	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>

BEDROOM #1

PASS FAIL

NOTES

PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.6	Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>

BEDROOM #2

PASS FAIL

NOTES

PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.6	Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>

BEDROOM #3

PASS FAIL

NOTES

PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.6	Interior Doors	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>

FAMILY ROOM / BEDROOM #4 / BASEMENT

PASS FAIL

NOTES

PM.304.13.2	Openable Windows	<input type="checkbox"/>	<input type="checkbox"/>
PM.304.14	Insect Screens	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.3	Interior Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.305.4	Stairs and Walking Surfaces	<input type="checkbox"/>	<input type="checkbox"/>
PM.604.3	Electrical System Hazards	<input type="checkbox"/>	<input type="checkbox"/>
PM.704.2	Single and Multiple Station Smoke Alarms	<input type="checkbox"/>	<input type="checkbox"/>

OTHER VIOLATIONS

CODE SECTION: _____ VIOLATION: _____

NOTES: _____

NOTES:

Rental unit is found to be in compliance with all codes/ordinances. **No Further action required.**

The above non-compliant items must be remedied within _____ calendar days from the date of inspection. The Inspection Office will contact you in regards to scheduling a re-inspection. Be advised that if the property is still not found to be in compliance, a \$50 fee will be assessed for each additional re-inspection scheduled.

I, the owner/caretaker of the above referenced rental unit, acknowledges the property must comply at all times with Chapter 174 (Property Maintenance), including the 2015 International Property Maintenance Code (IPMC), Chapter 230 (Zoning) and other City ordinances. By signing below, I acknowledge that the residential rental unit inspection has been performed by the Inspection Official in my presence and agree that any non-compliant items must be corrected within the time frame provided above.

Property Owner/Landlord

Date

Signature

Inspector

Date