**Initial Inspection Checklist**

**Texas HOME Program**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Administrator:** | | | | | | **Contract/RSP Number:** | |
| **Homeowner Name:** | | | | | | | |
| **Assisted Property Address:** | | | | | | | |
| **Date of Physical Inspection of Property:** | **Total Square Footage of Property:** | | | | | | |
| **Inspector’s Name:** | | | | **Inspector’s Phone:** | | | |
| **Applicable Code Used - Year:** | | | |  | | | |
| **Applicable Code Amendments Used:** | | | |  | | | |
| Inspection Item | |  | | | | | | |
| PASS | FAIL | | COMMENTS | | | |
| PART A. GENERAL HEALTH AND SAFETY | | | | | | | | |
| Do all rooms that are used for living have fire exits? | |  |  | |  | | | |
| Lead-Based Paint: All painted surfaces free of deteriorated paint; or Deteriorated surfaces do not exceed exceed 2 square feet per room and/or more than 10% of a component: | |  |  | |  | | | |
| **PART B. MAJOR SYSTEMS** | | | | | | | | |
| 1. **Foundation – Pass requires a remaining useful life of five years or more** | | | | | | | | |
| Foundation Type: Slab on Grade  Pier and Beam | |  |  | | Repair | | Replace | |
|  | | | |
| No evidence of wood destroying insect damage: | |  |  | |  | | | |
| No water and/or fire damage or dry rot to wooden piers, beams, joists, and subfloor: | |  |  | |  | | | |
| Adequate support of beams, sills, and joists: | |  |  | |  | | | |
| No untreated wood in contact with soil: | |  |  | |  | | | |
| Drainage is away from the home: | |  |  | |  | | | |

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| Inspection Item |  | | | |
| PASS | FAIL | COMMENTS | |
| 1. **Roofing Systems and Attics – Pass requires a remaining useful life of five years or more** | | | | |
| Approximate age of roof:       YEARS |  |  | Repair | Replace |
|  | |
| Less than 2 layers of roof covering materials: |  |  |  | |
| No damage caused by leaks though the roofing system: |  |  |  | |
| No missing, worn, or upturned shingles: |  |  |  | |
| No damaged, missing, or improperly installed roof jacks, flashings, drip edges on both rakes and eaves: |  |  |  | |
| No exposed nails or other fasteners: |  |  |  | |
| No structural damage to trusses: |  |  |  | |
| No evidence of extensive patchwork or repairs: |  |  |  | |
| No missing, loose, damaged, leaking, blocked, or improperly sloped gutters and downspouts: |  |  |  | |
| 1. **Electrical Systems – Pass requires a remaining useful life of five years or more** | | | | |
| Type of wiring: |  |  | Repair | Replace |
|  | |
| Electrical system is properly grounded, free of hazards, and all components are properly secured: |  |  |  | |
| Condition of electrical components is without deterioration or outdated, and no short circuits: |  |  |  | |
| Current and voltage is adequate, consistent, and appropriate at each outlet, fixture, and piece of equipment for its intended use: |  |  |  | |
| Conductors, fixtures, boxes, and equipment are properly sized and rated for their intended use: |  |  |  | |
| System is adequate for current use and takes into consideration occupant behavior and lifestyles: |  |  |  | |
| Lighting, receptacles, and switches are appropriately located and are of an adequate number: |  |  |  | |

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| Inspection Item |  | | | | |
| PASS | | FAIL | COMMENTS | |
| 1. **Heating, Ventilation, and Air Conditioning Systems – Pass requires a remaining useful life of five years or more** | | | | | |
| Approximate age of system:       YEARS |  |  | | Repair | Replace |
|  | |
| There is a steady and dependable source of heating and cooling to all living areas: |  |  | |  | |
| Combustion gases vent to the exterior: |  |  | |  | |
| Heat exchanger does not leak and is not damaged or cracked: |  |  | |  | |
| Gas supply line does not leak and is not corroded or damaged: |  |  | |  | |
| Pilot or electric start function for their intended use: |  |  | |  | |
| Duct system supplies adequate conditioned air to all living spaces: |  |  | |  | |
| 1. **Plumbing System – Pass requires a remaining useful life of five years or more** | | | | | |
| Wastewater system code compliant: |  |  | | Repair | Replace |
|  | |
| No sewer gases are entering home: |  |  | |  | |
| No sewer leaks present: |  |  | |  | |
| Water supply code compliant |  |  | | Repair | Replace |
|  | |
| No water leaks present: |  |  | |  | |
| Water is free from hazardous contaminants and safe for drinking, bathing, and other uses: |  |  | |  | |
| Water supply is adequate for all water needs, including adequate pressure at each fixture: |  |  | |  | |
| Supply, drain, waste, and vent pipes do not interfere with the structural integrity of the home: |  |  | |  | |
| Water heater connected to gas/utility and code compliant: |  |  | |  | |
| Plumbing fixtures including toilets, urinals, faucets, lavatories, sinks, showers, bathtubs, and floor drains in good working order: |  |  | |  | |

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| Inspection Item | | |  | | | | | |
| PASS | | FAIL | | COMMENTS | |
| 1. **Optional Systems – Pass requires a remaining useful life of five years or more** | | | | | | | | |
| Private water wells present and operational: Type of pump:  Type of storage equipment: | N/A | |  | |  | | Repair | Replace |
|  | |
| Private sewage disposal system present and operational: Type of private sewage disposal system:  Septic Aerobic  Location of drain/spray field: | N/A | |  | |  | | Repair | Replace |
|  | |
| **PART C. ADDITIONAL INSPECTION ITEMS** | | | | | | | | |
| 1. **Site** | | | | | | | | |
| Premises is free from accumulations of rubbish and garbage that present health and safety hazards: | | |  | |  | |  | |
| Premises is free from trees and shrubs that are damaging the dwelling or present a hazard: | | |  | |  | |  | |
| Surface drainage is diverted to a storm sewer or other approved point of collection that drains surface water away from the foundation: | | |  | |  | |  | |
| If rain gutters are present, downspouts are discharging water at least 5’ from the foundation: | N/A | |  | |  | |  | |
| Premises free from infestation of vermin and wood-boring insects: | | |  | |  | |  | |
| 1. **Driveways, Sidewalks, and Patios** | | | | | | | | |
| Existing paved surface slopes away from the structure so that water does not collect or drain towards the foundation: | |  | |  | |  | | |
| Existing paved surface is free from hazards which can cause tripping and falling: | |  | |  | |  | | |

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| Inspection Item | |  | | | | |
| PASS | | FAIL | | COMMENTS |
| 1. **Walls and Ceilings – Pass requires a remaining useful life of five years or more** | | | | | | |
| No evidence of water damage or dry rot of siding, trim, or interior wall coverings: | |  | |  | |  |
| No exposed nails or popped seams: | |  | |  | |  |
| No evidence of peeling or chipped paint, holes, cracks or gaps in interior wall coverings or exterior cladding: | |  | |  | |  |
| No evidence of broken, fire damaged or missing exterior cladding: | |  | |  | |  |
| No sagging or missing ceiling sections: | |  | |  | |  |
| No evidence of wood destroying insect damage to the exterior cladding: | |  | |  | |  |
| 1. **Flooring – Pass requires a remaining useful life of five years or more** | | | | | | |
| No evidence of damaged, rotted, loose, weak or otherwise deteriorated subfloor: | |  | |  | |  |
| No evidence of torn, missing, broken, or otherwise damaged floor covering that creates a tripping hazard: | |  | |  | |  |
| No missing baseboards, shoe molding, or transition strips: | |  | |  | |  |
| 1. **Kitchen** | | | | | | |
| Appliances (stove, cook top, refrigerator, and exhaust vent, garbage disposal, dishwasher, water softener) operating in a safe manner: |  | |  | |  | |
| Cabinet doors and pull out drawers function in the way they are intended: |  | |  | |  | |
| Countertops level and at appropriate height to the needs of the occupant: |  | |  | |  | |

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| Inspection Item | | |  | | | | | | | | |
| PASS | | FAIL | | COMMENTS | | | | |
| 1. **Doors and Windows – Pass requires a remaining useful life of five years or more** | | | | | | | | | | | |
| No broken, missing or cracked window panes: | | |  | |  | |  | | | | |
| No rotten or deteriorated sills, frames or trim: | | |  | |  | |  | | | | |
| No missing seal or sealant or dried, cracked or missing putty or caulking around window panes: | | |  | |  | |  | | | | |
| No inoperable or painted shut windows which make them difficult to open or close: | | |  | |  | |  | | | | |
| No security bars that do not open from the inside without any special knowledge or tools: | | |  | |  | |  | | | | |
| Windows and exterior doors can be locked: | | |  | |  | |  | | | | |
| No broken, damaged, or deteriorated doors: | | |  | |  | |  | | | | |
| Doors shut and latch or lock smoothly with the strike plate: | | |  | |  | |  | | | | |
| No rotted, deteriorated or damaged thresholds, jambs, frames, or trim: | | |  | |  | |  | | | | |
| All exterior doors listed as exterior doors: | | |  | |  | |  | | | | |
| 1. **Additional Comments and Observations** | | | | | | | | | | | |
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| **Inspector Certification** | | | | | | | | | | | |
| **I hereby certify the above-referenced property was inspected in accordance with requirements of the HOME program.**  ***WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.*** | | | | | | | | | | | |
|  | | | | | | | | | | | |
| **Signature of Inspector** | | | |  | | | | Date | | | |
| **Administrator Certifications** | | | | | | | | | | |
| I hereby certify the findings of the Inspector are true and correct; and  I certify that I understand the mitigation requirements resulting from the HUD environmental review process (24 CFR Part 58) and will meet or exceed the recommended mitigation requirements. | | | | | | | | | | |
| **Hazard Type:** | | **Mitigation Measures Required:** | | | | | | | | |
| **None** | | **Not Applicable** | | | | | | | | |
| **Flood** | |  | | | | | | | | |
| **Noise** | |  | | | | | | | | |
| **Other: Describe** | |  | | | | | | | | |
| ***WARNING: Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government.*** | | | | | | | | | | |
| **Signature of Administrator** | | | | | |  | | | Date | |
|  | |  |  |  | | --- | --- | --- | | **SimpleSeal BLACK med res.jpg** | *Reasonable accommodations will be made for persons with disabilities and language assistance will be made available for persons with limited English proficiency.*  **Texas Department of Housing and Community Affairs**  Street Address: 221 East 11th Street, Austin, TX 78701 Mailing Address: PO Box 13941, Austin, TX 78711  Main Number: 512-475-3800 Toll Free: 1-800-525-0657 Email: info@tdhca.texas.gov Web: [www.tdhca.texas.gov](http://www.tdhca.texas.gov) | Eq Hsng logo transparant | | | | | | | | | |  |