Application for Residential Rental Property Inspection

Today's Date: ____________________________  Fee: $100.00 plus 1% State Fee= $101.00

PLEASE NOTE: All information contained within this application is public record. The City is obligated to provide a copy to anyone requesting this document for any purpose.

Address of Property: _____________________________________________________________

Titled Owner(s): ________________________________________________________________

Owner's Address: ________________________________________________________________

Home Phone: ____________________________ Work Phone: ____________________________

Type of Dwelling:  
- Single Family  
- Condominium  
- Two Family  
- Duplex

Does House Have:  
- Septic System  
- City Water  
- Sump Pump  
- Underground Sprinkler System

How long have you owned the house: __________ Date/Year of Purchase: ______________

House is occupied by: ____________________________________________________________

Number of tenants occupying dwelling: __________ Tenant’s phone number: __________

Lease start date: ___________ Lease end date: ___________ Month-to-Month: __________

Are you aware of any outstanding violations previously cited by the City?  ______ NO  ______ YES

If yes, please explain: ___________________________________________________________________

THE FOLLOWING QUESTIONS MUST BE ANSWERED:

1. Are you aware of any structural deficiencies in your house?  _____NO  _____YES
   If yes, please explain: ___________________________________________________________________

2. Do the roofs leak?  
   - House Roof: _____NO  _____YES  
   - Garage Roof: _____NO  _____YES
   If yes, please explain: ___________________________________________________________________

3. Is there water seepage or dampness in the basement or crawl space?  _____NO  _____YES
   If yes, please explain: ___________________________________________________________________

4. Is there a sewer problem or backup into the home?  _____NO  _____YES
   If yes, please explain: ___________________________________________________________________

5. Do all windows in the home open and close properly?  _____NO  _____YES
   If no, please explain: ___________________________________________________________________
6. Has the furnace/boiler been professionally cleaned, serviced or inspected within the last twelve months?  _____NO  _____YES

7. Has the air conditioning equipment been professionally cleaned, serviced or inspected within the last twelve months?  _____N/A  _____NO  _____YES

8. Has the hot water tank been professionally cleaned, serviced or inspected within the last twelve months?  _____NO  _____YES

9. Has the fireplace(s) in the home been inspected/cleaned within the last twelve months?  _____N/A  _____NO  _____YES

10. (a) Is there additional heating equipment in the home or garage?  _____NO  _____YES
    Location:________________________________________________________________________
    (b) Has this equipment been cleaned, serviced or inspected within the last twelve months?  _____NO  _____YES

11. Has the septic tank been inspected and approved by the local Department of Health?  _____N/A  _____NO  _____YES

12. I have answered these questions to the best of my knowledge  _____NO  _____YES
    If No, please explain: ______________________________________________________________________

Please accept this application for Certificate of Inspection in accordance with the provisions of Chapter 1440.09 of the Codified Ordinances of the City of Pepper Pike, which states, in part, as follows: No owner of a single family, two family, three family or condominium unit shall rent, lease or otherwise convey a dwelling structure or unit without first obtaining from the Inspector of Building a Certificate of Inspection of such dwelling structure. The issuance of a certificate of inspection does not guarantee compliance with the Housing Code nor does the Director of Building or his or her agent accept any liability for noncompliance with the Housing Code.

I hereby request a Residential Rental Property Inspection at the above mentioned property and agree to adhere to all rules, regulations and fees of said inspections required by the Codified Ordinances of the City of Pepper Pike, Ohio.

Signature of Owner or Authorized Agent __________________________ Date __________________________

NOTE: It is the responsibility of the property owner to contact the tenants and provide access to the property for inspection. The inspection is required to be completed within thirty (30) days of this application. Please call the Building Department at 216-896-6134 for appointment availability.

FOR OFFICE USE ONLY

Receipt Number: __________________________ Date of Inspection: __________________________
Permit #______________________________

Approved – Building Commissioner

PP01/09: form.rental.property.inspection, revised 08.04.11
RENTAL INFORMATION

Please read the following information to help assist you and our Department in performing the required Rental Inspection.

1. Only titled owner(s) or person(s) having legal authority over the property may make application for inspection. Fee ($101.00) and application must be received prior to the scheduling of an inspection. Application may be made in the Building Department Monday through Friday, between the hours of 8:00 a.m. and 4:00 p.m.

2. Schedule your inspection one week in advance.

3. Appointments are available Monday, Tuesday, Wednesday, or Thursday, 9 am – 12 pm.

4. Please have an adult present at time of inspection. Inspectors will not perform inspections without a person over the age of 18 on the premises.

5. Inspectors perform a general inspection of the property to enforce the established minimum standards and the City of Pepper Pike Building and Housing codes necessary to make all homes safe, sanitary and free from fire and health hazards. It does not include inspection of the roof system and structural components of the house or the garage, nor the drainage system and condition of the waterproofing of the foundation. It also does not include a physical inspection of the mechanical systems of the home such as the furnace, hot water tank, plumbing, electrical panels, equipment and devices or their overall working condition. Inspectors do not remove furnishings, personal effects, or appliances, nor do they access roofs, crawl spaces or knee walls. Persons requesting specific or full home and system inspections should contact a specialist in those particular areas. The expense of such an inspection is the responsibility of the person requesting such an inspection.

6. Weather conditions may sometimes prohibit an exterior inspection of the property. This, however, does not interfere with the issuance of an inspection report.

7. We encourage you to go through your home with the inspector during the inspection to answer questions and access various areas of the house, garage and yard. However, you may sometimes disagree with an inspector’s findings or a particular violation. We ask for your full cooperation and courtesy when our inspector is performing his duty.

8. All corrections and work must be completed in a competent manner and comply with all applicable standards, codes and regulations as prescribed in the City of Pepper Pike Codified Ordinances. Permits may be required for certain repairs. The homeowner is to insure that all necessary permits are obtained prior to beginning work.

9. It is the responsibility of the owner to schedule all required re-inspections, as needed, on the home.

10. If you have questions regarding the inspection report, please call the Building Department.

11. Remember we are serving the interests of the City of Pepper Pike as a whole. Please comply with our notice in a timely fashion.
PLEASE NOTE: The City will provide one inspection report to the OWNER. Additional copies may be purchased in the Building Department for $.05 per page. Copies of inspection reports WILL NOT be faxed.

**Inspection includes, but is not limited to, the following:**

**Exterior areas:**
- Culvert
- Apron
- Driveway – walkway
- Exterior Lighting, outlets
- Exterior walls, windows, doors
- Roof
- Chimney
- Patios, decks

**Interior areas:**
- Garage
- Basement
- 1st floor
- 2nd floor

**The following systems will be inspected for safety:**
- Plumbing
- Electric
- HVAC
- Smoke detectors
RENTAL PROPERTY - INSPECTORS WORK SHEET

Type of Inspection:____________________________________________  

Date of Inspection: _______________________________________  Time:____________________AM/PM  

Address:________________________________________  Owner:________________________________  

Parcel Number:_______________________________  Type:_________________________________  

Phone:  Home:_____________________________________  Work:_______________________________  

EXTERIOR:  
_____ No Exterior Inspection at this time due to weather conditions.  
        Rain      Snow       Other:_________________________________________________  
_____ Install/Replace address numbers on house.   
_____ Existing address numbers not visible. Relocate/Reinstall.   
_____ Repair/Replace/Relevel driveway apron.   
_____ Repair/Replace/Relevel sidewalk block(s).  
_____ Repair/seal cracks of public sidewalk/driveway apron.   
_____ Repair/Replace/Relevel/Resurface driveway.  
______ Asphalt,      Concrete       Other:_______________________________________  
_____ Repair/seal cracks of driveway.  
_____ Repair/Replace/Relevel service walk:   
_____ Repair/Replace/Relevel patio.  
_____ Remove all vegetation growing between apron/driveway/sidewalk/other _______ blocks.  

YARD AREA:  
______ Remove all trash, debris and/or non-usual from:  
______ Remove all dead tree(s), brush, overgrowth from:_________________________________________  
______ Cut grass and weeds:________________________________________________________________  
______ Remove and detour the further growth of weeds throughout.  
______ Remove or properly store fire wood 8” above grade.  
______ Remove or properly keep and maintain compost pile.  
______ Remove all animal feces throughout property.  
______ Scrape and paint house.  
______ Scrape and paint wood trim of house.  
______ Repair/Replace damaged, deteriorated wood siding:  
______ Clean/Refinish aluminum_____, vinyl_____, siding.  
______ Repair/Replace/Secure deteriorated, damaged or missing siding panels.  
______ Replace damaged/deteriorated corner flashing(s):_______________________________  
______ Caulk the following:  
______ Install/Repair/Replace/Secure gutters and downspouts:  
______ Paint/Refinish Clean/Clear gutters and downspouts:  
______ Seal downspouts to sewer crock(s):_______________________________  
______ Repair/Replace roof:  
______ Foundation:  
______ Scrape and paint handrail(s):  
______ Install/Repair/Replace/Secure handrail(s):
TUCKPOINTING:
____ Foundation
____ Chimney
____ Steps
____ Porch
____ Window lintels
____ Walls of house
____ Repair/Rebuild Chimney. _____ Replace flue liner.
____ Repair/Replace/Install: ______ steps: ___________
____ Repair/Replace windows:___________________________________________________________
____ Repair/Replace – Scrape and Paint doors:________________________________________
____ Lamp post(s) _____ Gas _____ Electric
____ Awnings:
____ Shutters: _____________________________
____ Fence Maintenance:___________________
____ Scrape and paint. ________ Repair/Replace or Remove
____ Does not meet Building/Zoning requirements. Remove this fence.

EXTERIOR ELECTRICAL:
____ Repair/Replace/Secure light fixture(s):
____ Repair/Replace/Secure receptacle outlet(s):
____ Install Ground Fault Circuit Interrupt (G.F.C.I.) type receptacles.
____ Replace all exterior non-grounded outlets with G.F.C.I. types.
____ Install weather proof/resistant cover(s):
____ Protect non-metallic sheathed cable:
____ Remove all improperly installed wiring:
____ Raise conductors from house to garage.
____ Replace conductors from house to garage (Minimum #10 wire).
____ Discontinue use of extension cord(s).
____ Remove temporary decorative or holiday lighting.
____ Secure service mast _____ Conductor rack ______
____ Contact Power Company to raise service lines.

GARAGE MAINTENANCE:
____ No garage on premise.
____ Garage interior not accessible at time of inspection.
____ Garage floor not visible at time of inspection.
____ Replace demolished garage (minimum size 400 sq. ft.)
____ Scrape and paint.
____ Repair damaged/deteriorated wood/vinyl siding:
____ Repair/Replace/Install gutters and downspouts:
____ Tie in drainage system of garage to storm system of house.
____ Repair/Replace – scrape and paint overhead door(s).
____ Replace broken windows on: _____ overhead door _____ side wall(s)
____ Repair/Replace or properly close off mandoor.
____ Repair/Replace roof structure:
____ Repair/Replace garage floor (Concrete only).
____ Replace rotted and deteriorated wood members:
____ Remove all unapproved wiring in garage and install to conform to National Electrical code requirements.
____ Install properly grounded outlet for door opener.
____ Repair/Replace/Secure light fixtures:
____ Repair/Replace/Secure receptacle outlet(s):
____ Replace all non-dedicated non-grounded garage outlets with G.F.C.I. types.
____ Protect non-metallic sheathed cable:
____ Remove and discontinue use of extension cord(s).
____ Remove/Verify/Remove and terminate back to the panel; electrical service to garage.
**MISCELLENOUS:**

- Swimming Pool/Hot tub:____________________________________________________________
- Storage shed:______________________________________
- Outside storage:__________________________________________________________________
- Motor vehicles:___________________________________________________________________
- Install vacuum breaker on exterior water spigots to insure backflow prevention.
- No exterior violations at time of inspection

**NOTES:** ______________________________________________________________________________

**INTERIOR:**

**BASEMENT:**

- No apparent violations at time of inspection.
- No basement. ______Crawl space only not accessible for inspection.
- Repair/Replace staircase:___________________________________________________________
- Install/Replace/Relocate smoke detector.

**MAIN AND SUB ELECTRICAL PANEL(S):**

- Label panel(s) to identify circuits.
- Replace plug type fuses with Type S fuses.
- Properly size amps of fuses for ___________________________ circuits.
- Install missing spacers/fuses/knockouts in ___________________________ panel.
- Install main grounding electrode conductor or verify connection.
- Install secondary main grounding electrode conductor or verify existing connection.
  (#6 copper Conductor to 8’ driven copper rod)
- Bond water meter. (#6 Solid Copper Conductor)
- Provide and maintain clear access to and clearances about panels.
- NOTE: Have panel(s) and electrical systems and devices of the home professionally inspected by a licensed/certified electrician who is registered in the City.

**FURNANCE AND HOT WATER TANK:**

- Seal flue connection(s) at chimney.
- Maintain minimum 3’ clearance about this equipment.
- Install ¾ turn shut off valve on gas line:
- Provide combustion air ventilation for gas fueled equipment.
  (Refer to manufacturers specifications for this requirement).
- Install compatible to the name plate rating, a properly sized Temperature and Pressure relief valve for hot water tank.
- Install a metallic discharge line to within 6” of floor for hot water tank.
- NOTE: It is recommended that the furnace/hot water tank/air conditioner be professionally inspected, cleaned and serviced.
- Remove incinerator and seal flue opening and cap gas line
- NOTE: Remove stove and cap gas line. It is recommended that cooking be performed in the kitchen area only.
- Strap/Support gas line(s).
- Strap/Support water line(s).
- Repair leaking water line/fixture(s):
- Provide air gap at drain for discharge line (minimum 2”).
- Install vacuum breaker on:__________________________________________________________
INTERIOR SURFACES:
Floors:__________________________________________________________________________
Walls:___________________________________________________________________________
Ceilings:_________________________________________________________________________
Windows:________________________________________________________________________
Doors:__________________________________________________________________________
Handrail:________________________________________________________________________
Bathroom:______________________________________________________________
NOTE: Evidence of water damage and seepage in basement.

BASEMENT ELECTRICAL DEVICES AND EQUIPMENT:
Remove and discontinue use of extension cord(s) for:_____________________________________
Remove and discontinue use of current taps/ground plug taps.
Repair/Replace/Secure light fixture(s):_________________________________________________
Repair/Replace/Secure receptacle outlet(s):___________________________________________
Install Ground Fault Circuit Interrupt (G.F.C.I.) type receptacle:
Install properly grounded outlet for:
Protect non-metallic sheathed cable:
Remove all improperly installed wiring:
Install missing cover plates/junction box covers/knock-out closures:
Secure conduit:_____________________________________________

FIRST FLOOR:
Install/Replace/Relocate smoke detector.
Re-install/Repair/Replace garbage disposal.
Properly wire garbage disposal. Disposals must be cord and plug connected.
Install properly grounded outlet for:
Microwave ______ Refrigerator ______ Other ______________________________
Kitchen plumbing fixtures:___________________________________________________________
Lighting fixtures and switches:_____________________________________________________
Receptacle outlets:_______________________________________________________________
Remove and discontinue use of extension cord(s) for ________________________________
Install additional properly grounded receptacle outlet in the following rooms:____________

INTERIOR SURFACES:
Floors:__________________________________________________________________________
Walls:___________________________________________________________________________
Ceilings:_________________________________________________________________________
Windows:________________________________________________________________________
Doors:__________________________________________________________________________
Handrail:________________________________________________________________________
Bathroom:________________________________________________________________________

SECOND FLOOR: Crawl space only – not accessible.
No apparent violations at time of inspection.
Install/Replace/Relocate smoke detector.
Install properly grounded outlet for:
Lighting fixtures and switches:_____________________________________________________ 
Receptacle outlets:_______________________________________________________________
Remove and discontinue use of extension cord(s).
Install additional properly grounded receptacle outlet in the following rooms:____________
INTERIOR SURFACES:

Floors:__________________________________________________________________________

Walls:___________________________________________________________________________

Ceilings:_________________________________________________________________________

Windows:________________________________________________________________________

Doors:__________________________________________________________________________

Handrail:________________________________________________________________________

Bathroom:_______________________________________________________________________

THIRD FLOOR: Crawl space only – not accessible.

No apparent violations at time of inspection.

Install/Replace/Relocate smoke detector.

Install properly grounded outlet for:

Lighting fixtures and switches:

Receptacle outlets:

Remove and discontinue use of extension cord(s).

Install additional properly grounded receptacle outlets in the following room(s):

INTERIOR SURFACES:

Floors:__________________________________________

Walls:__________________________________________

Ceilings:_______________________________________

Windows:_______________________________________

Doors:_________________________________________

Handrail:_______________________________________

Bathroom:_______________________________________

MISCELLANEOUS INTERIOR:

Fireplace(s):____________________________________

NOTES:

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________

_________________________________________________________________________________