

Checksheet for the Physical Inspection of LIHTC Properties

Physical Inspection Review Summary

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|--------------------------------------|----------------|--------------------------------|----------------|
| Project Name: | | Project #: | |
| BIN: | | Inspection Date: | |
| Address: | | Inspector: | |
| City/State/Zip: | | Total # Bldgs/Units Inspected: | |
| Owner Contact: | | Total Units in BIN: | |
| Phone: | Email: | Tax Credit Units: | |
| | Finding | | Finding |
| SITE: | | COMMON AREAS: | |
| Fencing & Gates | | Basement/Garage/Carport | |
| Grounds | | Closet/Utility/Mechanical | |
| Health & Safety | | Community Room | |
| Mailboxes/Project Signs | | Day Care | |
| Market Appeal | | Halls/Corridors/Stairs | |
| Parking Lots/Driveways/Roads | | Kitchen | |
| Play Areas & Equipment | | Laundry Room | |
| Refuse Disposal | | Lobby | |
| Retaining Walls | | Office | |
| Storm Drainage | | Other Community Spaces | |
| Walkways/Steps | | Patio/Porch/Balcony | |
| | | Restrooms | |
| BUILDING SYSTEMS: | | Storage | |
| Domestic Water | | Health & Safety | |
| Electrical System | | Pools & Related Structures | |
| Elevators | | Trash Collection Area | |
| Emergency Power | | | |
| Fire Protection | | BUILDING EXTERIOR: | |
| Health & Safety | | Doors | |
| Heating/Ventilation/Air Conditioning | | Fire Escapes | |
| Roof Exhaust System | | Foundations | |
| Sanitary System | | Health & Safety | |
| | | Lighting | |
| | | Roofs | |
| | | Walls | |
| | | Windows | |

Findings:

Marked each item with a "1", "2" or "3" to identify the level of deficiency or "NOD" for No Observable Deficiency. All deficiencies should also be marked as "NLT" (Non-Life Threatening or "LT" (Life Threatening).

Buildings:

One form for each building.

Observations/Findings: