



# Residential Rental Inspection Checklist

## Property contact information

Residential rental property primary address: \_\_\_\_\_

City: Denver

Zip: \_\_\_\_\_

Property owner/manager name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

## Inspection details

Type of inspection

Inspection

Re-inspection

Inspection date: \_\_\_\_\_

Total number of units: \_\_\_\_\_

Number of units inspected: \_\_\_\_\_

Inspected by (if multiple inspectors, list all):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Inspection company (if applicable):

\_\_\_\_\_  
Email: \_\_\_\_\_  
Phone: \_\_\_\_\_

The number of units inspected is 10% of the total units for the residential rental property plus any checklist items related to shared utilities or common areas. Note: For any residential rental property where there is a below grade unit, item 5.3 must be verified for all below grade units.

I certify that all items have been marked as compliant/correct or not applicable. Leave this box blank if items are non-compliant. Inspections submitted with checklist items marked non-compliant will be considered incomplete. Non-compliant items must be resolved within 90 days of application.

*By signing this form, the licensed inspector certifies that they performed the housing inspection for the rental property indicated following the requirements instructed in the checklist. The inspector also certifies that they have no financial interest in the property & is not related in any way to the owner/agent or tenant.*

Inspector signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Inspection report

List the unit numbers inspected. (This section must be completed if more than one unit was inspected)


*If inspecting more than 24 units, please add additional page and list all additional units inspected.*

**Legend:**
**C = Compliant/Correct**
**NC = Non-compliant**
**NA = Not applicable**

Item	Section 1 – Egress	C	NC	NA
1.1	Egress to Ground Level, Stairs in Good Condition & Emergency Exits Clear (RH, 2-202 A-C)			
1.2	Lighting of Halls & Stairways – Multi-Unit Dwellings (RH, 2-205 C)			
<b>Item</b>	<b>Section 2 – Water Systems</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
2.1	Dwelling connected to Municipal or approved Water System (RH, 2-203 A 1)			
2.2	Hot Water Minimum Temperature 110°F (RH, 2-207 C 1)			
2.3	Gas-Fired Water Heater Location (RH, 2-207 C 3)			
2.4	Water Heater provided with Pressure/Temp Relief Valve (RH, 2-207 C 8)			
2.5	Toilet Working Properly & Connected to Approved Water & Sewer System (RH, 3-301 B 1)			
2.6	Bathtubs & Showers in Good Condition (RH, 3-301 D 2)			
<b>Item</b>	<b>Section 3 - Electrical</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
3.1	Outlets & Fixtures Installed Properly (RH, 2-206 A 1)			
3.2	Total Circuitry Limits; No Make-Shift Outlets; Wiring in Good Condition (RH, 2-206 B 1-2)			
3.3	At least 1 GFCI Outlet in All Bathrooms (RH, 2-212 C)			
3.4	Free of Unsafe Extension Cords & Makeshift Wiring (RH, 2-206 B 4-5)			
<b>Item</b>	<b>Section 4 – Fire Safety</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
4.1	Smoke & CO Detector; Fire Extinguisher Present (DRMC, 27-195)			
4.2	Furnace Room Door Requirements are Met – Basement (RH, 2-201 C)			
4.3	Boiler/Furnace have approved Safety Devices (RH, 2-207 A 3-4)			
4.4	Gas Supply Pipes in Good Condition (RH, 2-207 A 1)			
<b>Item</b>	<b>Section 5 – Walls, Roof &amp; Foundation</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
5.1	Free of Holes in Walls or Roof; Deteriorating Paint (RH, 2-208 A)			
5.2	Free of Lead Hazards & Hazards Associated with Water Intrusion (RH, 2-209 A 2)			
5.3	Free of Leaks in Below Grade Units – Basement (RH, 2-201 B 1)			
5.4	Foundation Secure & Free of Visible Decay (RH, 2-208 B)			
<b>Item</b>	<b>Section 6 – Trash</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
6.1	Regular Trash Removal; Free of Excessive Odors & Accumulation (RH, 2-214 D-F)			
<b>Item</b>	<b>Section 7 – Pest Control</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
7.1	Free of Pest Infestation (RH, 2-215 A)			
7.2	Regular Pest Removal & Control Devices as Necessary (RH, 2-215 C)			
<b>Item</b>	<b>Section 8 – Required Utilities, Equipment and Services</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
8.1	Capable of Maintaining Minimum Room Heating Temperature of 70°F (RH, 2-207 B 1)			
<b>Item</b>	<b>Section 9 – Safe &amp; Sanitary</b>	<b>C</b>	<b>NC</b>	<b>NA</b>
9.1	Safe & Sanitary for Human Habitation (DRMC, 27-21)			

Initial inspection date	Non-compliant checklist item	Unit number	Verified resolved date (non-compliant items must be resolved within 90 days of application)	Inspector's initials

*If additional non-compliant checklist items have been found, please add more pages as necessary documenting all violations.*

Comments:

If submitting a re-inspection:

I certify all reinspect items have been resolved.

Inspector name: \_\_\_\_\_ Signature: \_\_\_\_\_

(non-compliant items must be resolved within 90 days of application)