

<u>Life Safety Checklist</u>			
			<u>Comments</u>
	Date		
	Address of Unit		
	Apartment #		
	Weather		
	Resident at Home		
	Did Resident Exhibit any Obvious Signs of Major Distress		
	Client		
	Prepared By		
Purpose:			
To highlight potentially imminent life safety risks in order to establish work plan for very early ownership period			
in order to preserve life, reduce liability, and fulfill the mandate of providing decent, safe and sanitary housing			
even during the period of very early ownership of distressed housing.			
	<u>Category</u>	<u>Apartment</u>	<u>Comments</u>
<input type="checkbox"/>	ADA	If Grab Bars are in Place are They Secure	
<input type="checkbox"/>	ADA	If Handrails are in Place are They Secure	
<input type="checkbox"/>	Appliances	Stove - gas or electric	
<input type="checkbox"/>	Appliances	Dryer - gas or electric	
<input type="checkbox"/>	Carpentry	Are Closet Shelves Secure	
<input type="checkbox"/>	Carpentry	Are Kitchen Cabinets Secure and Not Sagging	
<input type="checkbox"/>	CO Safety	CO Detector #1 Operational (battery or hard-wired)	
<input type="checkbox"/>	CO Safety	Co Detector #2 Operational (battery or hard-wired)	
<input type="checkbox"/>	Egress	Any Restrictions to Emergency Egress	
<input type="checkbox"/>	Electrical	Extension Chords Present	
<input type="checkbox"/>	Electrical	Circuit Breaker Panel - All Breaker Slots Covered	
<input type="checkbox"/>	Electrical	Evidence lose or hanging electrical outlets	
<input type="checkbox"/>	Electrical	GFI's In Place and Operational	
<input type="checkbox"/>	Emergency Lighting	Emergency Lighting Present and Operational	
<input type="checkbox"/>	Extermination	Infestations Present	
<input type="checkbox"/>	Fire Safety	Space Heaters Present	
<input type="checkbox"/>	Fire Safety	Candles Present	
<input type="checkbox"/>	Fire Safety	Smoke Detector #1 Operational (battery, hard-wired, intercon)	
<input type="checkbox"/>	Fire Safety	Smoke Detector #2 Operational (battery, hard-wired, intercon)	
<input type="checkbox"/>	Fire Safety	Smoke Detector #3 Operational (battery, hard-wired, intercon)	
<input type="checkbox"/>	Fire Safety	Heat Detector Present	

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<input type="checkbox"/>	Fire Safety	Fire Sprinklers Present	
<input type="checkbox"/>	Fire Safety	Evidence of improper handling of smoking material	
<input type="checkbox"/>	Fire Safety	Evidence of Oxygen in Use	
<input type="checkbox"/>	Flooring	Any Evidence of Warping or Sagging of Floors	
<input type="checkbox"/>	Flooring	Any Evidence of Trip Hazards	
<input type="checkbox"/>	Haz Mat	Evidence of any hazardous material being stored	
<input type="checkbox"/>	Haz Mat	Floors tiles likely to be ACM vs. VCT (9" vs. 12")	
<input type="checkbox"/>	Housekeeping	Evidence of excessive hoarding	
<input type="checkbox"/>	HQS	Evidence of Flaking Paint of any Kind	
<input type="checkbox"/>	HQS	Visual Evidence of Mold	
<input type="checkbox"/>	HQS	Smell Evidence of Mold	
<input type="checkbox"/>	Laundry	Unvented Laundry Equipment	
<input type="checkbox"/>	Leaks	Evidence of water leaks of any kind	
<input type="checkbox"/>	Lease	Evidence of over-crowded conditions	
<input type="checkbox"/>	Medical	Emergency Medical Chord Present and Operational	
<input type="checkbox"/>	Public Safety	Front Door Peep Hole Present and Working	
<input type="checkbox"/>	Public Safety	Locks Operational on Apartment Entry Doors	
<input type="checkbox"/>	Public Safety	Any Signs of Prior Forced Entry	
<input type="checkbox"/>	Stove	Evidence that Stove is Being Used for Heating	
<input type="checkbox"/>	Stove	Excessive Grease Build-up on Stove or Stove Fan Unit	
<input type="checkbox"/>	Windows	Indicate # of missing window screens	
<input type="checkbox"/>	Windows	Are Child guards in place at all windows	
<input type="checkbox"/>	Windows	Indicate any broken window panes	

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<u>Category</u>	<u>Common Areas</u>	<u>Comments</u>	
<input checked="" type="checkbox"/>	CO Safety	CO Detectors Present and Operational and How Many	
<input type="checkbox"/>	Egress	Confirm that all Stairs are properly illuminated	
<input type="checkbox"/>	Egress	Is access to roof restricted	
<input type="checkbox"/>	Egress	Is roof an emergency egress and if so are handrails present	
<input type="checkbox"/>	Egress	Basement Egress Unobstructed	
<input type="checkbox"/>	Egress	Safety of Basement Stairs	
<input type="checkbox"/>	Egress	Illumination of Basement Stairs	
<input type="checkbox"/>	Electrical	Electrical Hazards	
<input type="checkbox"/>	Electrical	Electrical Panel Secure with Full Protective Coverage	
<input type="checkbox"/>	Electrical	Electrical Junction Boxes Properly Secured	
<input type="checkbox"/>	Electrical	Electrical Wiring Intact	
<input type="checkbox"/>	Emergency Lighting	Emergency Lighting Present and Operational	
<input type="checkbox"/>	Emergency Lighting	Emergency Generator Present/Other Observation about EG.	
<input type="checkbox"/>	Extermination	Evidence of Infestation of Any Kind	
<input type="checkbox"/>	Fire Safety	Improper storage	
<input type="checkbox"/>	Fire Safety	Smoke Detectors Present and Operational - How Many	
<input type="checkbox"/>	Fire Safety	Fire Blocking Intact throughout	
<input type="checkbox"/>	Fire Safety	Fire Panel Present/Other Observations About Panel Condition	
<input type="checkbox"/>	Fire Safety	Fire Pump Present/Other Observations About Fire Pump	
<input type="checkbox"/>	Ground Water	Sump Pumps Present for Ground Water	
<input type="checkbox"/>	Haz Mat	Oil Tanks Present/Condition	
<input type="checkbox"/>	HVAC	Evidence of Flue Pipe Sag that Might Indicate Excessive Soot	
<input type="checkbox"/>	HVAC	Is Basement Laundry Equipment Property Vented	
<input type="checkbox"/>	HVAC	Inspection Service Tags in Place for Heating System	
<input type="checkbox"/>	Public Safety	Are Locks to Enter the Property Secure (Front and Rear)	
<input checked="" type="checkbox"/>	Roof	General Condition of Roof	
<input type="checkbox"/>	Sewer Ejector	Sump Pumps Present for Sewer Ejection	
<input type="checkbox"/>	Structural	Evidence structural deficiencies esp. porch/deck structures	