



TOWN OF RIVERHEAD
TOWN ATTORNEY'S OFFICE DIVISION OF CODE ENFORCEMENT
200 HOWELL AVENUE
RIVERHEAD, NEW YORK 11901
(631) 727-3200 EXT. 670

LICENSED PROFESSIONAL'S RENTAL INSPECTION REPORT

PLEASE COMPLETE THIS APPLICATION AND ATTACH PHOTOS OF THE EXTERIOR OF THE RENTAL PROPERTY MAKING SURE DEPICTING ALL ELEVATIONS OF THE RENTAL PROPERTY AS WELL AS ANY OTHER STRUCTURES ON THE PROPERTY. FOR THIS REPORT TO BE CONSIDERED ACCEPTABLE, YOUR PROFESSIONAL STAMP MUST BE STAMPED ON THE REPORT (NEW YORK STATE CODE ENFORCEMENT OFFICIALS SHOULD PROVIDE THEIR DIVISION OF BUILDING STANDARDS & CODES TRAINING ID NUMBER, AKA "DBSC TRAINING ID NUMBER" FOUND ON THE DEPARTMENT OF STATE WEBSITE).

ONE INSPECTION REPORT SHOULD BE COMPLETED PER UNIT INSPECTED

PROPERTY INFORMATION

Property Address: _____

Suffolk County Tax Map No. 0600- _____ - _____ - _____

Type of Rental (check one):

<input type="radio"/> One Family Dwelling <input type="radio"/> Two Family Dwelling <input type="radio"/> Multiple Family Dwelling (# of Units _____) <input type="radio"/> Apartment Complex (# of Units _____)	<input type="radio"/> Town House <input type="radio"/> Condominium <input type="radio"/> Mixed Use Building (#of Units____) <input type="radio"/> Other _____
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LICENSED PROFESSIONAL'S INFORMATION

Name: _____

Address: _____

Phone Number: _____

License No./DBSC ID #: _____

Email _____

Licensed Professional Engineer __ Registered Architect __ NYS Certified Code Enforcement Official

Date of Inspection: _____ Start Time: _____ End Time: _____

I, _____ have photographed the entire exterior of the rental unit and have completed and initialed each Housing Inspection Report sheet after completing my inspection. I have inspected each of the items listed on the Housing Inspection Report Sheet and have provided copies of ALL inspections conducted on the above identified property. I have not omitted any photos or information that may be considered a code violation by the Town of Riverhead. I understand failing any aspect of this report is an automatic fail for the rental property and no Rental Occupancy Permit shall issue until said rental property passes inspection. For properties passing this inspection, I hereby certify that that the property is in compliance with all of the provisions of the Code of the Town of Riverhead, the laws and sanitary and housing regulations of the County of Suffolk and the laws of the State of New York.

I further certify that the contents of this form are true and correct under penalty of perjury.

FALSE STATEMENTS MADE HEREIN ARE PUNISHABLE AS A CLASS A MISDEMEANOR PURSUANT TO SECTION 210.45 OF THE PENAL LAW OF THE STATE OF NEW YORK

SIGNATURE _____ DATE _____

PASS FAIL COMMENTS: _____

Please complete all sheets per unit





TOWN OF RIVERHEAD – LICENSED PROFESSIONAL – HOUSING INSPECTION REPORT
TOWN ATTORNEYS OFFICE, RIVERHEAD, NEW YORK 11901 (631)-727-3200 Ext. # _____

SCTM # _____ - _____ - _____ DATE ____ / ____ / ____ LICENSED PROFESSIONAL: _____

ADDRESS: _____ LICENSE NO./DBSC ID #: _____

INSPECTION TYPE: RENTAL 1st RENTAL 2nd RENTAL 3rd PERSON PRESENT: _____

RESULTS: INSPECTION PASSED FAILED

EXTERIOR STRUCTURE & PROPERTY AREA(S)			CELLAR / BASEMENT/ MECH ROOM.		
IDC#	VIOLATION DESCRIPTION(S)	FAIL	IDC#	VIOLATION DESCRIPTION(S)	FAIL
1.	Structure is properly identified as per promulgated maps recorded in the Town, & Such must be min 3" for visibility.	<input type="checkbox"/>	31.	STAIRS must be sound and stable.	<input type="checkbox"/>
2.	Roof drains, gutters and downspouts present and in good repair with no obstructions	<input type="checkbox"/>	32.	<input type="checkbox"/> Railing must be provided on stairway. <input type="checkbox"/> Railing must be firmly fastened not loose.	<input type="checkbox"/>
3.	Roof Shingles do not exceed more than two layers	<input type="checkbox"/>	33.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
4.	Roof is in good repair no dry rot or deterioration on shingle Surfaces.	<input type="checkbox"/>	34.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into a outlet.	<input type="checkbox"/>
5.	ALL Exterior surfaces must be free from: <input type="checkbox"/> Peeling/Chipping Paint <input type="checkbox"/> Rust <input type="checkbox"/> Corrosion	<input type="checkbox"/>	35.	ELECTRICAL HAZZARD FOUND:	<input type="checkbox"/>
6.	ALL Exterior walls must be free from cracks, holes or loose and/or missing shingles or siding.	<input type="checkbox"/>	36.	Oil Fired Equip must be serviced annually (Certificate of Proof of Service must be provided or affixed to appliance	<input type="checkbox"/>
7.	ALL Exterior exposed wood surfaces must be suitably coated with paint or other suitable weather resistive compounds.	<input type="checkbox"/>	37.	Remove storage of combustible materials within 36 inches of any fuel or gas fired appliances	<input type="checkbox"/>
8.	ALL Screens must be present & in good repair and fit within the window(s) or doorframes firmly. (May 1 to October 1)	<input type="checkbox"/>	38.	Fuel or Gas appliances must in sound condition and capable of a safe operation. PM §603.1	<input type="checkbox"/>
9.	Decorative Trim and wall facings must be in good repair with the proper anchorage, and free from deterioration and rot.	<input type="checkbox"/>	39.	All fuel appliance vents must be properly installed, free of rust, holes and capable of discharging without hazard.	<input type="checkbox"/>
10.	Overhang Extensions including canopies & porches must be in good repair, properly anchored free from deformation & rot.	<input type="checkbox"/>	40.	Septic lines must be securely fastened, free of leaks, holes or cracks.	<input type="checkbox"/>
11.	Handrails and Guards must be firmly fastened and free from deterioration and unjust movement.	<input type="checkbox"/>	41.	Plumbing piping must be free of leaks, holes or cracks. Specifically:	<input type="checkbox"/>
12.	Handrail Required on any stairway with 4 or more risers.	<input type="checkbox"/>	42.	Any additional construction must have a Certificate of Occupancy, including any walls, electric, and sheetrock.	<input type="checkbox"/>
13.	Guards required on any deck, balcony or porch, which is over (30)-Inches in height.	<input type="checkbox"/>	43.	Cellar occupancy is prohibited without the proper Certificate of Occupancy for such use.	<input type="checkbox"/>
14.	Stairways, Porches or Balconies are of sound construction, firmly fastened with proper anchorage.	<input type="checkbox"/>	44.	Smoke detector is not installed and mounted accordingly.	<input type="checkbox"/>
15.	<input type="checkbox"/> Window frames and trim <input type="checkbox"/> Door Frames must be in sound condition weather tight and free from deterioration.	<input type="checkbox"/>	45.	Smoke detector is not operable at time of inspection.	<input type="checkbox"/>
16.	ALL Window GLASS and/or Glazing must be free from cracks, chips or holes.	<input type="checkbox"/>	46.	<input type="checkbox"/> Lighting must be provided within cellar. <input type="checkbox"/> Lighting must be operational (bulb working)	<input type="checkbox"/>
17.	Chimney must be in sound condition free from: <input type="checkbox"/> Cracks <input type="checkbox"/> Holes <input type="checkbox"/> Unsafe settlement/unplumbed	<input type="checkbox"/>	47.	Clear path of travel must be maintained to electrical panel, Furnace/Boiler and Water heating appliances.	<input type="checkbox"/>
18.	Exterior Vent piping is in good repair and installed Correctly.	<input type="checkbox"/>	48.	Interior Foundation walls must be free from: <input type="checkbox"/> Cracks <input type="checkbox"/> Step Fractures <input type="checkbox"/> Holes	<input type="checkbox"/>
19.	Connection of service utilities including Electric, Gas, Water or Fuel is connected properly.	<input type="checkbox"/>	NOTES / ADDITIONAL DEFICIENCIES		LOCATION
20.	ALL Exterior Door hardware and doors must be operational and securely fastened and locking.	<input type="checkbox"/>			
21.	Basement Hatchways (BILCO DOORS) must be securely fastened, free from rust and or decay, and rodent entry.	<input type="checkbox"/>			
22.	FOUNDATION walls must be free from cracks, holes or deficiencies which cause un-plumb walls.	<input type="checkbox"/>			
23.	PROVIDE ENGINEERS REPORT to this department that Certifies that the structure is not compromised and safe.	<input type="checkbox"/>			
24.	Unregistered Vehicles not permitted on property unless Appropriately screened.	<input type="checkbox"/>			
25.	Litter must be removed from property areas	<input type="checkbox"/>			
26.	Property must be free from weeds & or high grass in excess of (10) inches must be cut (mowed) accordingly.	<input type="checkbox"/>			
27.	Property must be free from physical hazards. Observed was:	<input type="checkbox"/>			
28.	Cesspool(s) must be capable of disposing waste without a Health hazard or overflow.	<input type="checkbox"/>			
29.	ALL ACCESSORY structures including decks must be structural sound and free from deterioration, and rot.	<input type="checkbox"/>			
30.	Driveway must be free from physical hazards and in good repair with no sinkholes and drainage problems.	<input type="checkbox"/>	Licensed Professional Initials:		

INTERIOR INSPECTION SHEET

SCTM# _____ - _____ - _____

ADDRESS:

DATE:

LIVING ROOM(S) DENS / COMMON AREA(S)			SLEEPING ROOM(S)		
IDC#	VIOLATION DESCRIPTION(S)	FAIL	IDC#	VIOLATION DESCRIPTION(S)	FAIL
49.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	82.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>
50.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	83.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>
51.	Exit Doors must be free and clear of obstructions.	<input type="checkbox"/>	84.	<input type="checkbox"/> Smoke Detector(s) is not installed and mounted correctly <input type="checkbox"/> Smoke Detectors was not operable at time of inspection	<input type="checkbox"/>
52.	<input type="checkbox"/> Carbon monoxide alarm(s) required (must be placed on each story of a sleeping area & within 15 ft of every sleeping area or bedroom. (one may suffice if it meets above standard)	<input type="checkbox"/>	85.	<input type="checkbox"/> Extension cords must not be used as permanent wiring and be eliminated. (Provide fixed grounded receptacles) <input type="checkbox"/> Electrical Hazards see below notes.	<input type="checkbox"/>
53.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	86.	<input type="checkbox"/> Non-fused cube adaptors/surge protectors are prohibited. <input type="checkbox"/> UL rated surge protector must be plugged into an outlet.	<input type="checkbox"/>
54.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	87.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
55.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>	88.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locking prohibited)	<input type="checkbox"/>
56.	Extension cords must not be used as permanent wiring and be eliminated. (Provide fixed grounded outlets)	<input type="checkbox"/>	89.	Keyed Entry to Sleeping rooms is prohibited. (Exception : Hotels, Motels, Dormitories)	<input type="checkbox"/>
KITCHEN(S)			90.	Sleeping Rooms must have a minimum of (7) feet width in any plan dimension. Discontinue use of same.	<input type="checkbox"/>
57.	All interior surfaces must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	91.	Sleeping Rooms must have a minimum ceiling height of (7) Feet. (Discontinue use if such is under min dimension)	<input type="checkbox"/>
58.	All interior surfaces were not free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	92.	SLEEPING ROOM(S) IS/ARE OVEROCCUPIED (Based on formula of square feet per person)	<input type="checkbox"/>
59.	Area and interior of structure must be free from infestation Rodents. (Exterminate and provide copy of such to this dept.)	<input type="checkbox"/>	93.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
60.	Walking surfaces (floors) must be in good repair without defects. Tiles must be presently in good repair.	<input type="checkbox"/>	94.	Occupants cannot exit a sleeping room through another sleeping room. (Discharge must be through a common area)	<input type="checkbox"/>
61.	ELECTRICAL HAZARDS :	<input type="checkbox"/>	COMMON HALL(S)		
62.	SINK(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	95.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
63.	SINK(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	96.	Adequate lighting is not provided for and functional. <input type="checkbox"/> Fixture Missing <input type="checkbox"/> Bulb Inoperable	<input type="checkbox"/>
64.	Exhaust Fan (if provided) must be operational.	<input type="checkbox"/>	97.	Hallway is not free and clear of obstructions	<input type="checkbox"/>
65.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>	STAIRWAY(S)		
66.	Door Hardware must be intact, not loose and capable of performing its intended function(s).	<input type="checkbox"/>	98.	<input type="checkbox"/> Smoke Detector is not installed and mounted correctly. <input type="checkbox"/> Smoke Detector is not operable at time of inspection	<input type="checkbox"/>
67.	COOKING APPLIANCE IS: <input type="checkbox"/> Missing <input type="checkbox"/> Igniter Inoperable <input type="checkbox"/> Not Functional	<input type="checkbox"/>	99.	<input type="checkbox"/> Adequate lighting not provided for and/or functional. <input type="checkbox"/> Stairway is not free and clear of obstructions.	<input type="checkbox"/>
68.	REFRIGERATION APPLIANCE <input type="checkbox"/> Missing <input type="checkbox"/> Not Functional <input type="checkbox"/> Unsanitary	<input type="checkbox"/>	100.	Railings and Guards were: <input type="checkbox"/> NOT SECURELY FASTENED <input type="checkbox"/> NOT PROVIDED	<input type="checkbox"/>
BATHROOM(S) AND TOILET ROOM(S)			PORCHE(S) /BALCONY(S)/SCREEN ROOM(S)		
69.	All interior surfaces i.e. walls, ceilings, floors must be : <input type="checkbox"/> Clean and Sanitary <input type="checkbox"/> Free from Mold and Mildew	<input type="checkbox"/>	101.	Said area is deemed a non-habitable space for sleeping Discontinue the use of this area for sleeping purposes.	<input type="checkbox"/>
70.	All interior surfaces ie walls, ceilings, fixt. must be free from: <input type="checkbox"/> Peeling Paint <input type="checkbox"/> Corrosion <input type="checkbox"/> Rust <input type="checkbox"/> Cracks & Holes	<input type="checkbox"/>	102.	<input type="checkbox"/> EXIT DOORS MUST BE CLEAR OF OBSTRUCTION <input type="checkbox"/> WINDOWS MUST BE CLEAR OF OBSTRUCTIONS	<input type="checkbox"/>
71.	Walking surfaces (floors) must be in good repair without defects. Tiles must be present and non-absorbent to water.	<input type="checkbox"/>	103.	Extension cords must not be used as permanent wiring. (Provide proper fixed grounded outlets)	<input type="checkbox"/>
72.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have : <input type="checkbox"/> Adequate Water Pressure <input type="checkbox"/> Free from leaks	<input type="checkbox"/>	104.	Multi-Plug adaptors must be eliminated and such appliance or device must be plugged directly into an outlet.	<input type="checkbox"/>
73.	<input type="checkbox"/> SINK(S) & <input type="checkbox"/> BATH(S) did not have <input type="checkbox"/> HOT WATER SUPPLIED <input type="checkbox"/> COLD WATER SUPPLY	<input type="checkbox"/>	105.	Windows must be open-able and capable of being held in place. Locking hardware and pulleys must be operational	<input type="checkbox"/>
74.	Mechanical Ventilation is required were a window is not and <input type="checkbox"/> Clean free of dust <input type="checkbox"/> Provided for <input type="checkbox"/> Operational	<input type="checkbox"/>	106.	LOCKED DOORS must be readily open-able from the side In which is being exited from. (Hasp locks prohibited)	<input type="checkbox"/>
75.	Windows must be open-able and capable of being held in Place. Locking Hardware and pulleys must be operational.	<input type="checkbox"/>	NOTES / ADDITIONAL DEFICIENCIES		LOCATION
76.	TOILET(S) DID NOT: <input type="checkbox"/> FLUSH PROPERLY <input type="checkbox"/> BE FREE FROM LEAKS	<input type="checkbox"/>			
77.	Must Contain (1) electrical receptacle (new bathroom must be ground fault)	<input type="checkbox"/>			
78.	ELECTRICAL HAZARDS :	<input type="checkbox"/>			
LAUNDRY ROOM AREA(S)					
79.	Clothes Dryer must be exhausted properly in accordance with the Manufacturers guidelines.	<input type="checkbox"/>			
80.	GAS DRYERS (gas feed line) must contain a safety control Shut off line valve.	<input type="checkbox"/>			
81.	WASHER HOOKUPS DID NOT HAVE <input type="checkbox"/> HOT & COLD PROVIDED <input type="checkbox"/> FREE FROM LEAKS	<input type="checkbox"/>	Licensed Professional Initials:		

EXPLANATION INSTRUCTIONS FOR CODES IN THE FAIL COLUMN

1. ANY ITEM WITH A CHECKED SQUARE IN THE FAIL COLUMN MEANS THAT THE ITEM WAS OBSERVED TO BE IN VIOLATION AT THE TIME OF THE INSPECTION. (SEE IDC # EXPLANATION BELOW)
2. IF THE SHADED SQUARE IN THE FAIL COLUMN IS NOT CHECKED OFF, THE ITEM WAS NOT OBSERVED TO BE IN VIOLATION AT THE TIME OF THE INSPECTION.

EXPLANATION OF IDC # COLUMN (ITEM DEFICIENCY CODE(S))

- A **BLANK SPACE** IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED NO DEFICIENCY REF. ITEM.
 A NUMBER "1" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED SUCH DEFICIENCY IN **ONE LOCATION ONLY**.
 A NUMBER "2" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED THE MARKED VIOLAON IN **TWO OR MORE LOCATIONS**.
 A NUMBER "3" IN THE IDC # COLUMN INDICATES THAT THE INSPECTOR OBSERVED THE MARKED DEFICIENCY **WAS CORRECTED** AT THE TIME OF THE INSPECTION.
 A NUMBER "4" IN THE IDC # COLUMN INDICATES THAT THE DEFICIENCY WAS NOT APPLICABLE, REVIEWED OR OBSERVED AT THE TIME OF INSPECTION.

SECTIONS OF LAW

<p>EXTERIOR STRUCTURE & PROPERTY AREAS</p> <ol style="list-style-type: none"> 1. PM§ 304.3 TC§ 217-51 (A) 2. PM§ 302.7 TC§ 217-18 (C) 3. RR§ 907.3 (3) 4. PM§ 304.7 TC§ 217-18 (C) 5. PM§ 304.2 TC§ 217-34 6. PM§ 304.6 7. PM§ 304.2 8. TC§ 217-35 (C) 9. PM§ 304.8 10. PM§ 304.9 11. PM§ 304.12 12. PM§ 306.1 TC§ 217-15 (B) 13. PM§ 306.1 TC§ 217-15 (B) 14. PM§ 304.10 TC§ 217-34 15. PM§ 304.13 16. PM§ 304.13.1 17. PM§ 304.11 TC§ 217-27 (A) 18. PM§ 304.11 TC§ 217-27 (A) 19. PM§ 104.1 20. PM§ 304.15 21. PM§ 304.16 22. PM§ 304.5 TC§217-18 (A) 23. PM§ 107.1 24. TC§ 100-3 25. PM§ 302.11 TC§ 98-4 26. PM§ 302.4 TC§ 217-33 (E) 27. TC§ 217-33 (D) 28. PM§ 506.2 TC§ 217-24 (C) (2) 29. PM§ 302.7 TC§ 217-34 (C) 30. PM§ 302.3 	<ol style="list-style-type: none"> 39. PM§ 304.11 TC§ 217-27 (A) (1) 40. PM§ 506.1 TC§ 217-24 (A) (1) 41. PM§ 504.1 TC§ 217-24 (A) (1) 42. TC§ 52-14 43. PM§ 404.4.4 TC§ 217-11 (B) 44. PM§ 704.2 45. PM§ 704.1 46. PM§ 605.3 47. PM§ 702.1 - PM§ 702.2 48. PM§ 107.1.1 PM§ 304.5 TC§ 217-18(A) 	<p>BATHROOM(S) & TOILET ROOMS</p> <ol style="list-style-type: none"> 69. PM§ 305.1 TC§ 217-34 (B) 70. PM§ 305.3 TC§ 217-34 (A) 71. PM§ 503.4 TC§ 217-19 (D) 72. PM§ 505.3 TC§ 217-24 (B) (2) 73. PM§ 505.1 TC§ 217-24 (E) (1) 74. A. PM§ 305.1 TC§ 217-34 (B) B. PM§ 403.2 TC§ 217-14 (C) (1) 75. PM§ 304.13.2 76. PM§ 504.1 TC§ 217-24 (A) 77. PM§ 605.2 78. PM§ 604.3 TC§ 217-28 (A) 	<p>PORCHE(S) / BALCONY(S) SCREENROOM(S)</p> <ol style="list-style-type: none"> 101. PM§ 404.1 - PM§ 404.5 TC§ 217-12 102. PM§ 702.1 TC§217-20 (B) 103. F§ 605.5 104. F§ 605.4 105. PM§ 304.13.2 106. PM§ 702.3 TC§217-20 (B)
<p>CELLAR/ BASEMENT/MECH. ROOM</p> <ol style="list-style-type: none"> 31. PM§ 305.4 TC§ 217-15 (B) 32. PM§ 305.5 TC§ 217-15 (B) 33. FC§ 605.5 34. FC§ 605.4 35. PM§ 604.3 TC§ 217-28 (A) 36. TC § 64-13 (E) (1) 37. PM§ 603.3 TC§ 217-26 (D) 38. PM§ 603.1 	<p>LIVING ROOMS / DENS / COMMON AREAS</p> <ol style="list-style-type: none"> 49. PM§ 305.1 TC§ 217-34 (B) 50. PM§ 305.3 TC§ 217-34 (A) 51. PM§ 702.1 TC§ 217-16 (A) 52. PM§ 604.3 TC§ 217-28 (A) 53. PM§ 304.13.2 54. PM§ 304.15 55. A. PM§ 704.2 B. PM§ 704.1 56. F§ 605.5 <p>KITCHENS</p> <ol style="list-style-type: none"> 57. PM§ 305.1 TC§ 217-34 (B) 58. PM§ 305.3 TC§ 217-34 (A) 59. PM§ 308.1 PM§ 308.5 TC§217-35(A) 60. PM§ 305.4 61. PM§ 604.3 TC§ 217-28 (A) 62. PM§ 505.3 TC§ 217-24 (B) (2) 63. PM§ 505.1 TC§ 217-24 (E) (1) 64. PM§ 603.1 TC§ 217-14 (C) (1) 65. PM§ 304.13.2 66. PM§ 304.15 <p>67. A. TC§ 217-29 (A) B. TC§ 217-29 (B) C. TC§217-34 (B)</p> <p>68. A. TC§ 217-29 (A) B. TC§ 217-29 (B) C. TC§ 217-34 (B)</p>	<p>LAUNDRY ROOM AREAS</p> <ol style="list-style-type: none"> 79. PM§ 403.5 TC§ 217-28 (A) (1) 80. PM§ 603.4 TC§ 217-27 (A) (2) 81. A. PM§ 505.1 TC§ 217-24 (E) (1) B. PM§ 504.1 TC§ 217-24 (A) <p>SLEEPING ROOM(S)</p> <ol style="list-style-type: none"> 82. PM§ 305.1 TC§ 217-34 (B) 83. PM§ 305.3 TC§ 217-34 (A) 84. A. PM§ 704.2 B. PM§ 704.1 85. F§ 605.5 86. F§ 605.4 87. PM§ 304.13.2 88. PM§ 702.3 89. TC§ 108 (Zoning Violation) 90. PM§ 404.2 91. PM§ 404.3 92. PM§404.4.1 TC§217-10 93. PM§ 702.1 TC§ 217-20 (B) 94. PM§ 404.4.2 <p>COMMON HALL(S)</p> <ol style="list-style-type: none"> 95. A. PM§ 704.2 B. PM§ 704.1 96. PM§ 402.2 TC§ 217-13 (B) (2) 97. PM§ 702.1 TC§ 217-20 (B) 	<p align="center">***PLEASE NOTE***</p> <p align="center">ANY REPAIRS, MAINTENANCE WORK, ALTERATIONS OR INSTALLATIONS WHICH ARE CAUSED DIRECTLY OR INDIRECTLY BY THE DEFICIENCIES NOTED ON THIS REPORT SHALL BE EXECUTED AND INSTALLED IN ACCORDANCE WITH THE CODE STATE OF NEW YORK, THE MANUFACTURER'S INSTALLATION INSTRUCTIONS AND IN A SKILLFUL MANNER WITH LIKE MATERIALS BY A QUALIFIED PERSON(S) TO PERFORM SUCH.</p> <p align="center">(PURSUANT TO PM§103.3)</p>
<p>Mail to:</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>*NOTE: PLEASE COMPLETE THIS INSPECTION REPORT FOR EACH UNIT AND ATTACH PHOTOS OF THE EXTERIOR OF THE RENTAL PROPERTY MAKING SURE TO COVER ALL SIDES OF THE PROPERTY AS WELL AS ANY OTHER STRUCTURES ON THE PROPERTY. FOR THIS REPORT TO BE CONSIDERED ACCEPTABLE</p>		