



CITY OF RED WING RENTAL HOUSING HEALTH & SAFETY INSPECTION CHECKLIST



Date:	TIME:
Address:	
Unit #:	PIN:
License #:	

Category	PASS?		Comments
	Yes	No	
	Page 1		
A. General / Structure			
A.1 - Roof: Weathertight <i>(No visible leaks.)</i>			
A.2 - Exterior Walls: Weathertight <i>(No visible holes or leaks; no missing siding.)</i>			
A.3 - Stairs: Integrity and Lighting <i>(Handrails present; no broken steps/supports; is illuminated)</i>			
A.4 - Glass: Integrity <i>(No broken glass.)</i>			
A.5 - All Rooms: Working Light or Window <i>(One working light or window in each room.)</i>			
A.6 - House Numbers <i>(All numbers intact and visible.)</i>			
B. Plumbing			
B.1 - Sinks/Tubs/showers: Operable at Proper Temps. <i>(Operable faucets with hot and cold water.)</i>			
B.2 - Toilets: Operable <i>(At least one toilet is operable.)</i>			
B.3 - Water Heater Pressure & Temp. Relief Valve <i>(Automatic valve is located in top 6 inches of water heater.)</i>			
B.4 - Water Pipes: Free From Leaks <i>(All water pipes shall be free of any leaks.)</i>			
B.5 - Sanitary System: Proper Drainage <i>(Fixtures drain properly; main service has no back up.)</i>			
C. Mechanical System			
C.1 - Furnace <i>(Must be fully operational.)</i>			
C.2 - Furnace & Water Heater: Appropriate Space <i>(No items are stored within 3 feet of heater. Walls are fine.)</i>			
C.3 - Appliances: Venting <i>(Chimney is attached and vents to exterior; no holes or sags.)</i>			
C.4 - Appliances: Gas Valves <i>(A proper gas valve is located at each appliance.)</i>			

Everyone has the right to a safe and healthy place to live.

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	Yes	No	
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D. Electrical System			
D.1 - Wiring: Proper Protection <i>(All wiring shall be fully covered and protected.)</i>			
D.2 - Fixtures: Proper Installation <i>(Cover plates on all receptacles, switches & junction boxes.)</i>			
D.3 - Electric Panels: Proper Covers & Access <i>(Panel covers present with at least 30 inches clear access.)</i>			
E. Fire and Life Safety			
E.1 - Exit Doors: Operable <i>(Exit doors must have working positive latches and locks.)</i>			
E.2 - Sleeping Rooms: Egress Window <i>(At least one code-compliant egress window.)</i>			
E.3 - Guardrails on Stairs and Landings <i>(On open side of stairs; on areas 30" or more above floor/ground</i>			
E.4 - Smoke and CO Detectors:			
<i>(a) smoke detector outside each bedroom</i>			
<i>(b) smoke detector inside each bedroom</i>			
<i>(c) smoke detector on each floor without a bedroom</i>			
<i>(d) CO detector within 10 feet of each bedroom</i>			
F. Exterior / Outside			
F.1 - Rodents: Free of Infestation <i>(Premises are free of insect & rodent infestation.)</i>			
F.2 - Garbage: Contained <i>(Garbage is in approved containers.)</i>			
F.3 - Outdoor Walkways: Clear Access <i>(Walkway access is clear of obstructions, snow, and ice.)</i>			
G. Other			
G.1 - Sprinkler & Alarm Panels at Multifamily Units <i>(For buildings of 8 units or more. Must be tested annually.)</i>			
G.2 - Exit Signs at Multifamily Units <i>(For buildings of 8 units or more. Working backup battery.)</i>			
G.3 - Emergency Lights at Multifamily Units <i>(For buildings of 8 units or more. Lights in working order.)</i>			
G.4 - Fire Extinguisher: Operable <i>(For buildings of 8 units or more. Must be operable.)</i>			
G.5 - City Water / Meter Connection <i>(No unlawful bypass by owner.)</i>			
G.6 - Visible Mold Observed by Inspector <i>(Inspector will provide mold information if mold is a concern.)</i>			
G.7 - Visible Peeling, Chipping Paint on Interior Surface <i>(Must be adequately treated and covered.)</i>			

Owner/Agent Name:	Inspector Name:
Owner/Agent Signature:	Inspector Signature:
Owner/Agent Has Obtained Permission from Tenant for Inspection:	<i>Owner signature</i>
OR	
Tenant Hereby Approves Entry for Inspection by the City:	<i>Tenant Signature</i>