

Rental Housing Inspections

Inspector: _____ Inspection Date: _____

A. General Information

Address of Unit: _____
Bloomfield, IA 52537
Davis County

Name of Owner: _____

Type of Inspection:	Housing Type
_____ Initial	_____ Single Dwelling
_____ Reinspection	_____ Manufactured Home
_____ Additional Unit	_____ Multi-Dwelling

B. Summary of Decision on unit (To be completed after inspection)

_____ PASS Issue Certificate / Permit (Good for 4-Years)

_____ FAIL 24 Hour Emergency Notice to Repair

30 Day Notice to Repair

Heat Source Form (**Check only if form has been received**)

This inspection form is only a guide for the inspector and is not intended to encompass the Bloomfield Rental Inspection Coded in the entirety.

Inspection Report

	Room	Pass	Fail	Comments
1	Living Room			
2	Kitchen			
3	Bathroom #1			
4	Bathroom #2			
5	Bedroom #1			
6	Bedroom #2			
7	Bedroom #3			
8	Other			
9	Other			
10	Other			
11	Other			
12	Other			
13	Exterior House Number			
14	Exterior			

	Room	Pass	Fail	Comments
15	Rails			
16	Steps			
17	Windows			
18	Doors			
19	Foundation			
20	Roof			
21	Vegetation			
22	Trash / Garbage			
23	Plumbing			
24	Fire			
25	Water Heater			
26	Electric			
27	Heat Source			

Comments and Notes

Signature of Inspector: _____ Date: _____

