

ASTON TOWNSHIP RENTAL PROPERTY INSPECTION

3264 Concord Road, Aston, PA 19014 Phone: 610-494-0384 Fax: 610-494-8853

Initial Inspection Date: _____ Time: _____ Re-Inspection Date: _____ Time: _____

Folio #: _____ Receipt #: _____ Student Housing: Yes No Single Duplex Quad Other _____

RENTAL PROPERTY ADDRESS: _____

Property Owner: _____ Phone: _____ Email: _____

Property Owner Address: _____

Tenant: #1: _____ Phone: _____ Email: _____

Tenant: #2: _____ Phone: _____ Email: _____

Tenant: #3: _____ Phone: _____ Email: _____

Tenant: #4: _____ Phone: _____ Email: _____

Agent/Contact: _____ Phone: _____ Email: _____

Pass / Fail

- 1. Address Numbers: Affixed to exterior of building, 4" high, visible/contrasting background.
- 2. Plumbing: Sewer vent cap installed (mushroom type cap or equivalent).
- 3. Public Sidewalks in good repair
- 4. Curb at Street in good repair
- 5. Exterior Decks/Handrail/Stairs in good repair
- 6. Exterior Porches in good repair
- 7. Interior Steps / Handrails in place and in good repair – mounted at proper height 34-38 inches
- 8. Bathrm has working Exhaust Fan / Window
- 9. Water Heater: Relief Valve Extension Drops to between 6in. and 8in. from the floor
- 10. Electric Service: Visual Inspection for recent work or tampering / missing breakers/fuses

Pass / Fail

- 11. Dryer vent must discharge to exterior: 8ft max flex- metal at dryer; balance must be stiff pipe.
- 12. Installed GFCI's must function properly - Kitchen / Bath / Laundry
- 13. Sump Pump must discharge to the exterior, may NOT discharge to sewer system drains
- 14. Dead Bolts at Exits – Thumb locks only
- 15. Charged Fire Extinguisher Mounted in accessible location in Kitchen
- 16. In multi-family units - Charged Fire Extinguisher(s) in shared halls, laundry, etc.
- 17. Smoke Detectors: 1 Each Bedrm / 1 Outside sleeping areas / 1 Each additional level
- 18. Carbon Monoxide Alarms: 1 outside each sleeping area / 1 near fuel burning appliances
- 19. Exterior Building Maintenance
- 20. Interior Building Maintenance

NOTE: THIS IS A LIMITED VISUAL INSPECTION OF THE PROPERTY. BEDROOMS: _____

General Comments: _____

FAIL _____ RE-INSPECTION FEE REQUIRED: YES _____ NO _____ PASS _____ DATE: _____

Township Inspector: _____ Signature Owner/Manager/Tenant: _____