

## BALTIMORE CITY RENTAL LICENSE INSPECTION FORM

One form must be returned for each unit inspected

### Inspector Information:

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Company Name: \_\_\_\_\_

State License #: \_\_\_\_\_

### By signing this inspection form, I hereby certify the following:

Authorization: I certify that I am a Maryland State Licensed Home Inspector who has registered with Baltimore City Department of Housing and Community Development.

Interest: I certify that neither I, nor any partner, director, officer employee or agent of mine or my business has any financial interest in: the rental dwelling inspected; the owner or operator of the rental dwelling; or any owner, partner, director, officer, employee, or agent of the rental dwelling's owner or operator.

Inspection Result: I certify that the following is the result of the inspection I have performed. The unit passed all items on the Rental Inspection Checklist Yes or No

Signature: \_\_\_\_\_ Inspection Date: \_\_\_\_\_

### Property Information:

Physical Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

Home Type: 1-2 Family Detached 1-2 Family Rowhome Duplex Multi-Unit Rowhome  
 Multi-Unit High Rise  Multi-Unit Garden Style Apts. Condo

Number of bedrooms in unit: \_\_\_\_\_ Number of units in building: \_\_\_\_\_

Was the property built before 1978? Yes or No

Is there active Gas and Electric service? Yes or No

### Requestor Information:

Name of person requesting inspection: Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Check one: Owner Manager Resident Agent Other (specify) \_\_\_\_\_

### RENTAL INSPECTION CHECKLIST

Item	Inspection		Re-inspection (if necessary)	
	Pass or Fail	Date	Pass or Fail	Date
A. Railing is present for interior and exterior steps with more than 3 risers.				
B. The interior of the property is clean and sanitary. *A property may pass inspection if there are interior sanitation violations that are solely the responsibility of the tenant to abate, unless the conditions create an imminent threat to life.				
C. The interior of the property free of all signs of infestation by rodents, insects, or pests.				
D. Gas and electric service is properly installed and ready for service.				
E. Electrical wires are not visible in living areas				
F. All electrical outlets are grounded and protected by cover plates. All lighting fixtures are functional and switches protected by cover plates.				
G. Smoke Detectors are properly installed and in proper working order. There is one smoke alarm on every level of the home and inside each sleeping area.				
H. Carbon Monoxide Alarms are properly installed and in proper working order. Carbon Monoxide Alarm is located outside of sleeping area and near fuel-burning heating units. (Enter N/A if not required because there is: no fossil fuel burning devices; no fireplaces; no attached garages).				
I. There is both hot and cold running water with the hot water having a minimum temperature of 110°F. Adequate water pressure throughout with no leaks below fixtures and all toilets properly flush.				
J. If there is a bedroom in the basement, there is proper egress in case of fire. (Enter N/A if no basement bedroom.)				
K. Property is free of interior leaks. No standing water in the basement				
L. Windows function properly with locking mechanism.				

Item	Inspection		Re-inspection (if necessary)	
	Pass or Fail	Date	Pass or Fail	Date
M. Interior walls are free of holes that will allow rodents, insects, or pest to enter.				
N. Exterior walls are free of holes that will allow weather, rodents, insects, or pest to enter.				
O. Exterior gutter and downspout system is installed and designed to channel water away from the property.				
P. The exterior is clean, sanitary, and free of rodent burrows and all trash and debris that could attract infestation by rodents, insects, or pest.				
Q. If property built prior to 1978, no peeling, flaking or chipping paint on the interior or exterior. (Enter N/A if not required)				
R. If the inspection is being conducted during the period of October 1 and April 30 <sup>th</sup> , inclusive, the property must have a sufficient heat supply to maintain an average temperature of 70°F in all habitable rooms, bathrooms and toilet rooms and 65°F in all other rooms. (Enter NA if the inspection is conducted outside this timeframe.)				
S. Are there any other readily observable problems that don't meet the <b>minimum requirements of the Baltimore City Building, Fire, and Related Codes</b> that in the inspector's opinion represent an immediate threat to the health or safety of the occupant? If "yes" please describe on separate sheet and submit with this inspection form.				

**NOTE:**

1. This inspection is limited to the checklist items and has been performed to the requirements set forth by the Baltimore City DHCD as required under Article 13 Subtitle 5 of the Baltimore City Code.
2. This inspection shall not be construed as a home inspection as defined under Maryland law.
3. The Inspector completing this report may not repair, or recommend any person to repair, any of the items listed below that fail.
4. If scanning multiple forms please keep them in one pdf.
5. Photographs are not required.