EXHIBIT A

RESIDENTIAL RENTAL UNIT INSPECTION CHECKLIST

BOROUGH OF MACUNGIE
21 LOCUST STREET
MACUNGIE, PA 18062
Phone: 610-966-2503
Emaill: zoning@macungie.pa.us

Date of Inspection: _____   Inspector: _____

Apartment Address: _____

Landlord Address: _____

Landlord Name: _____

Landlord Phone #: _____   Landlord E-Mail: _____

ALL ROOMS			
ITEM	YES	NO	COMMENT
2 Working outlets or 1 outlet and 1 light fixture ?			
GFCI Outlets where req. ? See Attachment 1			
Free from electrical hazards ?			
Windows and doors lockable ?			
1 operational window windows in good condition no missing or broken panes ?			
Are the ceilings, walls, floors sound and free from major cracks, holes, or hazardous defects?			
Are Railings and Bannisters secure and sturdy?			
Are interior surfaces free from significant peeling or chipping paint?			
Are there working smoke and CO detectors per IPMC 704.2 ?			
BUILDING EXTERIOR			
Are the foundation and exterior walls free of hazards?			
Are all exterior stairs, rails, and porches free from hazards			
Are the roof, gutters, and downspouts free from hazards?			
Is the chimney free from hazards?			
Are all exterior surfaces, incl. stucco and siding reasonably weather tight?			

BATHROOM			
ITEM	YES	NO	COMMENT
Is there a working toilet in the unit for the exclusive private use of the tenant?			
Is there a working permanently installed sink with hot & cold running water?			
Is there a working tub or shower with hot & cold running water?			
Are all plumbing fixtures free from leaks, internal and external?			
Are there windows that open or a working exhaust system ?			
Is there a GFCI outlet? See Attachment 1			

KITCHEN			
Is there a sink with hot & cold running water?			
Are all plumbing fixtures free from leaks, internal and external?			
Is there an appliance for cooking?			
Is there a fire extinguisher?			