



County of Sacramento  
**RENTAL HOUSING INSPECTION PROGRAM (RHIP)**

Code Enforcement Division  
 916.874.6444

**Interior Inspection -PART II: Unit Identification** (Print legibly)

Property Name:

Property Address:

Unit Number:

Tenant Name:

Phone Number:

**Check the box next to each item ONLY if the item is found to be in compliance**

<i>Interior Checklist</i>	<i>Comments</i>
<input type="checkbox"/> <b>Hot/Cold Running Water</b> (Unit must have hot and cold running water)	
<input type="checkbox"/> <b>Electrical Power</b> (Unit must have electrical power)	
<input type="checkbox"/> <b>Heat</b> (Unit must have a functioning adequate heating source *This excludes portable heating units)	
<input type="checkbox"/> <b>Sewage Systems</b> (Unit must have a proper sewer system and must be clear of any surfacing sewage indoors or outdoors)	
<input type="checkbox"/> <b>Entry Doors</b> (Must be in good condition- Locks on doors must not exceed 48" in height- There must not be any double key locks on any doors throughout the unit – The unit number must be present in a contrasting color)	
<input type="checkbox"/> <b>Vector Infestation or Rodent Harborage</b> (Unit must be clear of any infestations)	
<input type="checkbox"/> <b>Mechanical</b> (All mechanical equipment in the unit must properly function including; appliances, venting systems, thermostats, smoke detectors, air conditioning unit – if provided, etc.)	
<input type="checkbox"/> <b>Electrical</b> (All wiring must be in good working condition – no spliced wiring, no exposed wiring, and all outlets and switch plates must have appropriate coverings)	
<input type="checkbox"/> <b>Plumbing</b> (Unit must have proper plumbing throughout unit – no leaks, must have P-traps, must have proper caulking, toilets must be secured to ground and sinks must be secured to walls, etc.)	
<input type="checkbox"/> <b>Counters and Sink Surfaces</b> (Are required)	
<input type="checkbox"/> <b>Windows</b> (All windows must have proper weather protection, must be in good condition, must have proper locking mechanisms and they must properly function without use of key or special knowledge * this includes window bars and screens)	
<input type="checkbox"/> <b>Flooring</b> (Floors must be in good condition, free from holes, missing pieces.)	
<input type="checkbox"/> <b>Foundation/Sub-flooring</b> (Must be in good condition, must not be buckling or sagging)	
<input type="checkbox"/> <b>Walls</b> (Walls must be clear of holes, missing sections, etc)	
<input type="checkbox"/> <b>Roof/Ceiling</b> (Must be free from holes and in good repair, must not be collapsing, buckling or sagging)	

**I certify that I have inspected the aforementioned unit and that the information above is true and correct to the best of my knowledge.** (Please provide a copy of this form to the tenant and keep a copy for your files.)

Name (Please print): \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship to the Property: \_\_\_\_\_

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

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**RENTAL HOUSING INSPECTION PROGRAM (RHIP)**  
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**Exterior Inspection - PART I: *Unit Identification*** (Print legibly)

Property Name: \_\_\_\_\_

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

**Check the box next to each item ONLY if the item is found to be in compliance**

<i>Exterior Checklist</i>	<i>Comments</i>
<input type="checkbox"/> <b><u>Storage of Junk and rubbish and/or overgrown vegetation</u></b> (Household trash, tires, scrap wood, scrap metal, other items not intended for outdoor use – Property must be clear from any overgrown vegetation and/or weeds)	
<input type="checkbox"/> <b><u>Dumpsters</u></b> (Must be properly enclosed, free from trash overflow, and properly covered)	
<input type="checkbox"/> <b><u>Inoperable/Unregistered Vehicles</u></b> (DMV Non-op permits are not sufficient. Inoperable vehicles must be stored within a fully enclosed structure)	
<input type="checkbox"/> <b><u>Foundation Vent Screens/Crawl Space Covers</u></b> (Spaces must be properly covered. Screens must be in good working condition)	
<input type="checkbox"/> <b><u>Roof/Ceiling</u></b> (Must be free from any holes, leaks, etc.)	
<input type="checkbox"/> <b><u>Stairways – Landings/treads/risers/balusters</u></b> (Must not be rotting, deteriorating, loose, etc. and the balusters must not exceed 4” apart)	
<input type="checkbox"/> <b><u>Fire Extinguishers</u></b> - <i>Multi-Family Only</i> (Must be properly serviced, labeled, and stored)	
<input type="checkbox"/> <b><u>Exterior Lighting</u></b> (Must function properly and must have cover)	
<input type="checkbox"/> <b><u>Infestation of vectors or rodents</u></b> (Property must be clear of all vector or rodent infestations)	
<input type="checkbox"/> <b><u>Electrical/Gas Meters</u></b> - <i>Multi-Family Only</i> (Must have proper labeling, be properly protected, and must not be tampered with)	
<input type="checkbox"/> <b><u>Electrical Panel</u></b> (Must have a panel cover, and be labeled with appropriate identification)	
<input type="checkbox"/> <b><u>Exterior Walkways</u></b> (Must remain clear at all times)	
<input type="checkbox"/> <b><u>Water Heaters</u></b> (Must have proper strapping, proper drain lines, venting and a finalized building permit)	

**I certify that I have inspected the aforementioned unit and that the information above is true and correct to the best of my knowledge.** (Please provide a copy of this form to the tenant and keep a copy for your files.)

Name (Please print): \_\_\_\_\_ Signature: \_\_\_\_\_

Relationship to the Property: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date: \_\_\_\_\_