



Cass Township Board of Supervisors
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Residential Rental Property Inspection Form

To Be Completed By Applicant:

Note: Initial inspection fee \$95 per unit (Includes \$25 registration fee) and \$15 each additional unit on same site, must be paid at time of application.

Owner/Agent: _____ Occupant: _____

Address: _____ Address of Unit(s): _____

Phone No: _____ Phone No: _____

Date of Occupancy: _____

MUST BE FILLED OUT BY APPLICANT (WILL BE VERIFIED DURING INSPECTION BY THE TOWNSHIP CODE OFFICIAL). For questions, call Kyle Kehoe at 570-294-5514.

<u>BASIC FACILITIES</u>	<u>YES</u>	<u>NO</u>	<u>ELECTRIC SERVICE</u>	<u>YES</u>	<u>NO</u>
1. Kitchen Facilities			1. Minimum of (2) wall outlets and (1) light in each habitable room (all kitchen countertop, bathroom and at-grade receptacles must be GFCI protected).		
Sink	___	___			
Stove	___	___			
Refrigerator	___	___			
Cabinets	___	___			
Fire extinguisher	___	___			
2. Room affording privacy with properly operating:			2. Smoke Detectors (one in every sleeping area and min. one on every level, including basement)	___	___
Toilet	___	___			
Lavatory sink	___	___	3. Electrical Service	___	___
Bathtub or Shower	___	___	Minimum capacity (60 amps)	___	___
3. Hot and Cold Water supply to kitchen and bathroom	___	___	<u>SAFE SANITARY</u>	<u>YES</u>	<u>NO</u>
4. Heating System	___	___	<u>MAINTENANCE</u>		
Type _____			1. Every public walkway, driveway entrance and curb is free of tripping hazards and in good repair.	___	___
5. Central Air	___	___	2. Every foundation, roof, exterior wall, door, skylight and window in good repair	___	___
6. Safe unobstructed means to exit leading directly to ground level	___	___	3. Every interior wall, ceiling, stairs, and appurtenances are safe and in good repair.	___	___
7. Structurally sound handrails, balusters, stairways, decks and porches	___	___	4. Minimum (1) CO detector	___	___
8. House number clearly displayed	___	___			
9. Sump Pump	___	___			
10. Supplemental heat	___	___			

All facilities maintained in accordance with latest International Property Maintenance Code.

Date Applicant Inspected: _____

Date Codes Official Inspected: _____

Applicant's Signature

Inspector's Signature

Applicant's Name Printed

Inspector's Name Printed