

APPENDIX 44

**Property Maintenance
Inspection Report**

**U.S. Department of Housing
and Urban Development
Office of Housing
Federal Housing Commissioner**

OMB Approval No. 2502-0306

Public reporting burden for the collection of information is estimated to average 0.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Reports Management Officer, Office of Information Policies and Systems, U.S. Department of Housing and Urban Development, Washington, D.C. 20410-3600 and to the Office of Management and Budget, Paperwork Reduction Project (2502-0306), Washington, D.C. 20503. Do not send this completed form to either of these addresses.

1. Property Address			2. Case Number				
3. Real Estate Asset Manager			4. Is the property occupied?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
Exterior Inspection	Yes	No	Interior Inspection	Yes	No		
5. Is the lawn cut?			19. Is the interior broom-clean and free of debris?				
6. Is the yard free of debris?			20. Are the Kitchen and bath rooms acceptable?				
7. Does the roof look okay?			21. a. Is the heating/cooling system on? b. Is the water on? c. Is the electricity on?				
8. Are the appropriate signs posted?			22. a. Is the heating/cooling system in good working condition? b. Is the plumbing in good condition? c. Is the electrical system in good working condition?				
9. Are all exterior doors secure?			23. Any evidence of roof leaks or damage caused by leakage?				
10. Is the appropriate lock box being used to allow access to the property?			24. Any evidence of flooding/water damage?				
11. If there is a garage, is it secured?			25. Any major structural damage?				
12. Are the windows boarded?			26. Any vandalism?				
13. Are all windows secured?			27. Are emergency or preventive maintenance repairs needed?				
14. Any there any problems/hazards in the yard or with the exterior of the property?			28. Any defective interior paint?				
15. If there is a pool or spa, is it covered and are all gates secure?			29. Is the property's general interior appearance good?				
16. Any defective exterior paint?			30. Is the REAM or a representative making regular inspections?				

31. Check items present:

<input type="checkbox"/> Refrigerator	<input type="checkbox"/> Dishwasher	<input type="checkbox"/> Garbage Disposal	<input type="checkbox"/> Oven/Range	<input type="checkbox"/> Microwave	<input type="checkbox"/> Kitchen Vent Fan
<input type="checkbox"/> A/C Condenser	<input type="checkbox"/> Heating Unit	<input type="checkbox"/> Water Heater	<input type="checkbox"/> Other include personal property and list below		

Remarks/Observations

Certification

By signing below the undersigned certifies that the information on this form is based on an actual site inspection of the property and is complete and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Signature of: REAM Realty Specialist Realty Specialist Supervisor Fee Inspector HUD Staff Date:Form HUD-8818-4
Rev. Handbook 4310.5