

«mgmt_company»
Pre-REAC Checklist (page 1 of 2)

«community», «unit_address_line1», «unit_city», «unit_state», «unit_zip»

Item #	Inspectable Area	Inspectable Item	Yes	No	Remarks
1	Dwelling Unit	Exterior Doors: Looking from the inside, can you see daylight around the closed door?			If yes, list where.
2	Health and Safety	Tripping Hazards: Are there any cords (cable, phone, extension) or excessive debris in any intended walk areas?			If yes, list where.
3	Dwelling Unit	Outlets and Switches: Are there any damaged outlets or switch covers?			If yes, list where.
4	Health and Safety	Sharp Hazards: Are there any broken windows, mirrors, or glass of any kind that could cause injury?			If yes, list where.
5	Dwelling Unit	Blocked Egress/Exits: Every room must have 2 means of escape. Do you see any rooms that have all windows inoperable or blocked (i.e., A/C unit present, furniture blocking, sheets or bedspreads nailed/taped over window) that would prevent escape in an emergency situation?			If yes, list where.
6	Dwelling Unit	Blocked Egress/Exits: (2) Are there any double cylinder deadbolts installed? Is either the front or rear door blocked by trash, bicycles, furniture, or appliances that would prevent escape in an emergency situation?			If yes, list where.

US Inspection Group, Inc.
Pre-REAC Checklist (page 2 of 2)

Unit Address: _____

Item #	Inspectable Area	Inspectable Item	Yes	No	Remarks
7	Dwelling Unit	Mold and Mildew: Is there any mold or mildew present in the bathroom, on appliances or anywhere in the unit?			If yes, list where.
8	Dwelling Unit	Infestation: Do you see any signs of roaches?			
9	Building System	Water Heater: Is the temperature pressure relief valve more than 18" inches from the floor?			
10	Kitchen	GFCI: Test all GFCIs? Using the test and reset buttons, are any inoperable?			
11	Kitchen	Range Burners: Do any burners not light properly?			
12	Bathroom	GFCI: Test all GFCIs? Using the test and reset buttons, are any inoperable?			
13	Dwelling Unit	Smoke Alarms: Are any missing or inoperable?			If yes, list where.
14	Dwelling Unit	Housekeeping: Are there indications that the residents lack proper housekeeping skills?			If yes, please provide some details.
15	Building System	Hose Bibs: Are there any hose bibs on the exterior of the building that are leaking?			If yes, list where.
16	Building System	Sewer Cleanout Covers: Are the sewer cleanout covers missing or damaged?			If yes, list where.

Signature: _____ **Date:** _____