



REQUEST FOR SERVICE

Housing Inspection Request

Residential Rental Units

Planning & Development Department
Building & Safety Division
Housing Code Enforcement

PROPERTY ADDRESS: _____ DATE: _____

Reported By: Tenant Other _____

Name: _____

Phone: _____

Address: _____ Zip: 947 _____

Home Cell Office Other

Email Address: _____

Phone: _____

Home Cell Office Other

Owner/Property Manager: _____

Phone: _____

Address: _____

Home Cell Office Other

City/State/Zip: _____

Phone: _____

Home Cell Office Other

Email Address: _____

INVESTIGATE:

- | | |
|--|--|
| <input type="checkbox"/> Inoperable/Damaged Windows | <input type="checkbox"/> Lack of/Damaged water fixtures or piping |
| <input type="checkbox"/> Deficient/Damaged stairs, railing or decks | <input type="checkbox"/> Lack of/Inoperable carbon monoxide alarm |
| <input type="checkbox"/> Deficient/Damaged walls or ceiling | <input type="checkbox"/> Lack of/Inoperable smoke detector alarm |
| <input type="checkbox"/> Deficient/Damaged door or entry | <input type="checkbox"/> Resident manager (16 or more units) |
| <input type="checkbox"/> Lack of/Damaged door locks or hardware | <input type="checkbox"/> Visible Mold or Mildew |
| <input type="checkbox"/> Lack of/Damaged electrical fixtures or wiring | <input type="checkbox"/> Water leaks visible from walls or ceiling |
| <input type="checkbox"/> Lack of/Damaged gas equipment or piping | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Lack of/Damaged heating equipment | <input type="checkbox"/> Other _____ |

TENANTS ONLY:

Be advised that prior to submittal of the Request for Service, you must certify/consent to the following:

- I certify in making this complaint that I am the lease holder/tenant at the address I am reporting.
- I certify that I have notified the owner/representative of the problem(s) I am reporting.
Date Owner Notified: _____
Notification Method: Phone In-Person E-mail Mail Other _____
- I certify I will allow the owner and/or their representatives, with proper notice as governed by State law, to enter my unit to make all necessary repairs.
- I consent for City inspectors to access my unit.

Signature: _____

Date: _____

White – Case File

Yellow – Complainant