

## Individual Room Check

Fraternity/Sorority \_\_\_\_\_

Room # \_\_\_\_\_

Roommate #1 \_\_\_\_\_ (print) Roommate #2 \_\_\_\_\_ (print)

Roommate #3 \_\_\_\_\_ (print)

Please use the space between the items to write comments about the condition of the item and what needs to be fixed.

Walls – holes or cracks? ..... Yes \_\_\_

Ceiling – holes or cracks? ..... Yes \_\_\_

Floor – holes? ..... Yes \_\_\_

Windows – glass broken? ..... Yes \_\_\_

Screens in windows? ..... Yes \_\_\_

No \_\_\_

Door – does it close? ..... Yes \_\_\_

No \_\_\_

Door – is lock correct and stops in place? ..... Yes \_\_\_

No \_\_\_

Fire detector working? ..... Yes \_\_\_

No \_\_\_

Fire detector higher than the bed/loft? ..... Yes \_\_\_

No \_\_\_

Is loft chained to the ceiling? ..... Yes \_\_\_

Is mattress the same size as the loft? ..... Yes \_\_\_

No \_\_\_

Do light fixtures and bulbs have covers? ..... Yes \_\_\_

No \_\_\_

Are fire sprinkler pipes being used to hang clothes? ..... Yes \_\_\_

(NOTE: The answers in the **boxes** are the answers you should have checked off if the room is to pass inspection. If your responses are not the answers in **boxes**, you will need to fix the problems before the room will pass inspection. DO NOT mark the incorrect boxes because you will have to fix them anyway before your house passes inspection!)

**Please return to your house manager when completed.**

## Hallways

Walls – holes or cracks? ..... Yes\_\_\_  No\_\_\_

Ceiling – holes or cracks? ..... Yes\_\_\_  No\_\_\_

Floor – holes? ..... Yes\_\_\_  No\_\_\_

Windows – glass broken? ..... Yes\_\_\_  No\_\_\_

Screens in windows? .....  Yes\_\_\_  No\_\_\_

Carpet condition (class II carpet)? .....  Good\_\_\_  Poor\_\_\_

Condition of the floors in hallway? .....  Good\_\_\_  Poor\_\_\_

Is *anything* blocking the hallways? ..... Yes\_\_\_  No\_\_\_

Fire extinguishers clearly identified, charged, inspected?.....  Yes\_\_\_  No\_\_\_

Exit signs clearly marked and illuminated?.....  Yes\_\_\_  No\_\_\_

## Kitchen

Stove has functioning overhead exhaust system that has been inspected and tagged within the last year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Fire stopping in place?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
At least one electrical light fixture? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Covers on fluorescent lights?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Walls – holes or cracks? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ceiling – holes or cracks?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Floor – holes?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sufficient cold water?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hot water (between 110 – 130 F)?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Windows – glass broken? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Screens in windows? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Door – does it close? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Plumbing connections capped off and drains clear? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

### Social Event/Dining Area

Walls – holes or cracks?.....	Yes___	<input type="checkbox"/> No___
Ceiling – holes or cracks?.....	Yes___	<input type="checkbox"/> No___
Floor – holes?.....	Yes___	<input type="checkbox"/> No___
Windows – glass broken? .....	Yes___	<input type="checkbox"/> No___
Screens in windows? .....	<input type="checkbox"/> Yes___	No___
Locks on windows functioning? .....	<input type="checkbox"/> Yes___	No___
Door – does it close? .....	<input type="checkbox"/> Yes___	No___
Furniture in good condition?.....	<input type="checkbox"/> Yes___	No___
Sufficient lighting with covers? .....	<input type="checkbox"/> Yes___	No___
Emergency lights work? .....	<input type="checkbox"/> Yes___	No___
Fire extinguishers clearly identified, charged, inspected?.....	<input type="checkbox"/> Yes___	No___
Exit signs clearly marked and illuminated?.....	<input type="checkbox"/> Yes___	No___
Smoke detector working and secured? .....	<input type="checkbox"/> Yes___	No___

## Bathrooms

Walls – holes or cracks?.....	Yes___	<input type="checkbox"/> No___
Ceiling – holes or cracks?.....	Yes___	<input type="checkbox"/> No___
Floor – holes?.....	Yes___	<input type="checkbox"/> No___
Sufficient cold water?.....	<input type="checkbox"/> Yes___	No___
Hot water (between 110 – 130 F)?.....	<input type="checkbox"/> Yes___	No___
Windows – glass broken?.....	Yes___	<input type="checkbox"/> No___
Screens in windows?.....	<input type="checkbox"/> Yes___	No___
Door – does it close?.....	<input type="checkbox"/> Yes___	No___
Plumbing connections capped off and drains clear?.....	<input type="checkbox"/> Yes___	No___
Sufficient ventilation?.....	<input type="checkbox"/> Yes___	No___
Sufficient lighting with covers?.....	<input type="checkbox"/> Yes___	No___
Sink clean and drain clear?.....	<input type="checkbox"/> Yes___	No___
Shower tub intact and clean?.....	<input type="checkbox"/> Yes___	No___
Non-absorbent walls in shower area?.....	<input type="checkbox"/> Yes___	No___
Toilet seat intact and clean with bowl and tank cover?.....	<input type="checkbox"/> Yes___	No___

## Living Area

Walls – holes or cracks? .....	Yes___	<input type="checkbox"/> No___
Ceiling – holes or cracks? .....	Yes___	<input type="checkbox"/> No___
Floor – holes? .....	Yes___	<input type="checkbox"/> No___
Windows – glass broken? .....	Yes___	<input type="checkbox"/> No___
Screens in windows? .....	<input type="checkbox"/> Yes___	No___
Locks on windows functioning? .....	<input type="checkbox"/> Yes___	No___
Door – does it close? .....	<input type="checkbox"/> Yes___	No___
Sufficient lighting with covers? .....	<input type="checkbox"/> Yes___	No___
Room temperature (68 F daytime and 64 F night time)? .....	<input type="checkbox"/> Yes___	No___
Furniture in good condition? .....	<input type="checkbox"/> Yes___	No___
Carpet condition? .....	<input type="checkbox"/> Good___	Poor___
Smoke detector working? .....	<input type="checkbox"/> Yes___	No___
Emergency lights work? .....	<input type="checkbox"/> Yes___	No___
Fire Extinguishers clearly identified, charged, inspected? .....	<input type="checkbox"/> Yes___	No___
Exit signs clearly marked and illuminated and in good condition? .....	<input type="checkbox"/> Yes___	No___
Emergency exit clearly marked and accessible? .....	<input type="checkbox"/> Yes___	No___

## Commons Area and Exit

Walls – holes or cracks? .....	Yes___	<input checked="" type="checkbox"/> No___
Ceiling – holes or cracks? .....	Yes___	<input checked="" type="checkbox"/> No___
Floor – holes? .....	Yes___	<input checked="" type="checkbox"/> No___
Windows – glass broken? .....	Yes___	<input checked="" type="checkbox"/> No___
Screens in windows? .....	<input checked="" type="checkbox"/> Yes___	No___
Locks on windows functioning? .....	<input checked="" type="checkbox"/> Yes___	No___
Door – does it close? .....	<input checked="" type="checkbox"/> Yes___	No___
Sufficient lighting with covers? .....	<input checked="" type="checkbox"/> Yes___	No___
Carpet condition? .....	<input checked="" type="checkbox"/> Good___	Poor___
Recycling bins – clean around barrels? .....	<input checked="" type="checkbox"/> Yes___	No___
Smoke detector working? .....	<input checked="" type="checkbox"/> Yes___	No___
Emergency lights work? .....	<input checked="" type="checkbox"/> Yes___	No___
Fire extinguishers clearly identified, charged, inspected?.....	<input checked="" type="checkbox"/> Yes___	No___
Exit signs clearly marked and illuminated?.....	<input checked="" type="checkbox"/> Yes___	No___
Emergency exit clearly marked and accessible?.....	<input checked="" type="checkbox"/> Yes___	No___
Stairway in good condition and clear of debris?.....	<input checked="" type="checkbox"/> Yes___	No___

## General House Inspection

Fire sprinkler system checked within the last year?.....  Yes  No

Alarm system checked and functioning?.....  Yes  No

All smoke detectors functioning .....  Yes  No

All fire doors leading to stairwells close completely  
and on their own.....  Yes  No

All fire extinguishers have been inspected within  
the last year with inspection tags attached.....  Yes  No

All fire extinguishers have a sign above them with an  
arrow pointing to the fire extinguisher .....  Yes  No

All exits are identified by an exit sign.....  Yes  No

All emergency exits sign lights are working .....  Yes  No

All emergency lights work.....  Yes  No

All light bulbs, fluorescent lights, and light fixtures  
have covers on them .....  Yes  No

All wires and/or pipes that pass through walls from room  
to room must fire caulked/stopped? .....  Yes  No