

LRMF Initial Inspection Form: Mutual Agreement of Unit Condition

Date: _____ Head of Household: _____

Address: _____

Item	Yes	No	N/A
Is there adequate lighting in the kitchen? Comments:			
Is there an electrical outlet in the kitchen that works? Comments:			
Is there a sink with hot and cold running water; does it drain quickly? Comments:			
Is the stove in good working condition? Comments:			
Is the refrigerator in good working condition? Comments:			
If there is a dishwasher, is it in good working condition? Comments:			
If there is a garbage disposal, does it work? Comments:			
BATHROOM			
Is the toilet in adequate condition? Comments:			
Is there a sink with hot and cold running water? Comments:			
Is there a tub/shower with hot and cold running water? Comments:			
Is there ventilation from a fan or window in the bathroom? Comments:			
GENERAL UNIT CONDITION			
If there is air conditioning, does it work? Comments:			
Does the furnace work? Comments:			
Do all of the windows open, close, and lock? Comments:			
Are any of the windows broken? Comments:			
Do you see any water stains on the walls or ceilings? If so, has the leak been fixed? Comments:			
Do you see any deep scratches, burns, stains, or places where the flooring is worn? Comments:			

