Planning and Community Development Department
809 Center Street Room 107, Santa Cruz, CA 95060
831.420.5140 phone 831.420.5101 fax

Residential Rental Inspection Program
Rental Property Self-Certification Checklist
www.cityofsantacruz.com/rentalinspections

Owner Information (Please print legibly)		
First Name:	Last Name:	OWN ID: (found on letter)
Property Address	**Please use one form per address / unit**	
Street Address:		Unit #:

Item #	Part I: Exterior Inspection	Pass	Fail	N/A	Comments
1.1	**Legible and Visible address number and unit identification** (Address numbers clearly visible from street/number or letters for units- minimum 4 in high, if new)				
1.2	**Roof** (Must be free from any visible holes or penetrations that allows outside elements - rain & cold - in and heated air out.)				
1.3	**Storage of Junk and rubbish and/or overgrown vegetation** (Household trash, tires, scrap wood, scrap metal, etc. shall be stored and protected in an orderly fashion as to not be an attractive nuisance – Property must be clear from any overgrown/dry vegetation and/or weeds capable of being ignited and endangering the property)				
1.4	**Dumpsters/Trash Cans** (Must be in enclosure if provided/stored out of public right-of-way/ free from trash overflow)				
1.5	**Inoperable/Unregistered Vehicles** (Inoperable vehicles must be stored out of the front yard or exterior side yard and on a paved surface)				
1.6	**Foundation Vent Screens/Crawl Space Covers** (Spaces must be properly covered. Screens must be in good working condition)				
1.7	**Stairways – Landings/treads/risers/balusters** (Should be in good condition/free from visible structural defects (loose threads, missing balusters or handrails, rotting or deteriorating materials) and anything that could cause a trip or fall hazard.)				
1.8	**Exterior Walkways/Exit Passageways/Common Areas** (Must remain clear at all times and in a safe and sanitary condition)				
1.9	**Exterior Lighting** (Approved lighting fixtures at entrance/exiting doors, all exterior hallways, as applicable)				
1.10	**Electrical Panel** (Must have a panel cover and breakers labeled with appropriate identification, as applicable)				
1.11	**Water Heaters** (Must have proper strapping, proper drain lines, and venting)				
1.12	**Required Covered Parking** (Garage doors operable, parking available if needed, not in front yard or exterior side yard)				
1.13	**Infestation** (Property must be clear of all infestations - insect, rodent, etc.)				
	For Multi Family (3+ units) Only				
1.14	**Fire Extinguishers** (Must be properly serviced, labeled, and stored – minimum size 2A10-BC)				
1.15	**Fire Sprinkler System** (If provided – Certification of 5 year inspection required)				
1.16	**Electrical/Gas Meters**s (Must have proper labeling, be properly protected, and must not be tampered with. Utilities in an exterior closet or room may require signage)				
1.17	**Existing Fire Lanes clearly marked** (Signage or paint or both needed)				

I certify and declare under penalty of perjury that I have inspected the aforementioned unit and that the information above is true and correct to the best of my knowledge.

Name *(Please print)*:_____ **Relationship to Property:** _____

Phone Number: _____ **Date:** _____

Signature: _____

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Item #	Part II: Interior Inspection	Pass	Fail	N/A	Comments
2.1	**Hot/Cold Running Water** (Unit must have hot and cold running water)				
2.2	**Electrical Power** (Unit must have electrical power)				
2.3	**Heat** (Unit must have a functioning adequate heating source – This excludes portable heating units)				
2.4	**Sewage System** (Unit must have a functioning sewage system and must be clear of any surfacing sewage indoors or outdoors)				
2.5	**Entry Doors** (Must be in good condition – Locks on doors must not exceed 48" in height, unless otherwise allowed. No double key lock on entry door)				
2.6	**Exits** (One main door per unit & escape/rescue window per bedroom. There must not be any double key locks on any exit doors throughout the unit)				
2.7	**Infestation** (Unit must be clear of any infestations – insect, rodent, etc.)				
2.8	**Smoke Alarms** (Must be working and located in hallways leading to rooms used for sleeping or installed and maintained in compliance with Code in effect at time of installation)				
2.9	**Carbon Monoxide Alarms** (Must be working, in good condition and properly installed at every level including basements)				
2.10	**Mechanical** (All mechanical equipment in the unit must properly function including; appliances, venting systems, thermostats, air conditioning unit – if provided, etc.)				
2.11	**Electrical** (All wiring and electrical components must be in good working condition – no spliced wiring, no exposed wiring, and all outlets and switch plates must have appropriate coverings/GFCI in bath and kitchen operational, if applicable)				
2.12	**Electrical Sub Panel** (All breakers to be properly labeled and identified, no open slots or exposed wires)				
2.13	**Plumbing** (Unit must have proper plumbing throughout unit – sink, toilet, bathtub or shower, no leaks, must have P-traps, toilets must be secured to ground and sinks must be secured to walls, etc.)				
2.14	**Counter and Sink Surfaces** (Are required in kitchens)				
2.15	**Windows** (All windows must have adequate weather protection – no broken glass/plastic coverings, etc. - be in good condition and have locking mechanisms that function without use of key or special knowledge. If window bars or screens are present, they too must function without use of key or special knowledge.)				
2.16	**Flooring** (Floors must not be in a defective or deteriorating condition that could cause a trip or fall hazard or impact sub-flooring)				
2.17	**Sub-flooring** (Must be in good condition without buckling or sagging which suggests structural defects)				
2.18	**Walls** (Must be good habitable condition clear of large holes, missing sections, etc.)				
2.19	**Ceiling** (Must be in good repair, must not be collapsing, buckling or sagging suggesting structural defects or roof leakage)				

CLEAR FORM

PRINT