The Borough of Hightstown

Code Enforcement Office

156 Bank Street, Hightstown, NJ 08520
(609) 490-5100 Ext. 617
Website: Hightstownborough.com

Rental Registration Inspection Checklist

PROPERTY LOCATION: _____ INSPECTION DATE: _____

Rental Re-inspection: Tenant change – per unit - $35.00 _____ Violation $25.00 _____ (cash/check #_____)

Prior to scheduling the inspection, please obtain the following: Furnace/Boiler certification and fireplace chimney certification (if applicable) and provide a copy to the Housing Office.

Furnace or Boiler Certification by an HVAC Contractor or Licensed Plumber. Date received_____
Fireplace/Chimney Certification by a Nationally Certified Chimney Sweep Contractor. Date received_____

TO BE COMPLETED BY THE HOUSING INSPECTOR

_____ Smoke detectors on each level and outside each bedroom
Attic ____ Basement ____
_____ Exits should not be blocked with any items.
_____ Doors and windows open, stay open and close properly.
_____ No broken or cracked glass in any windows or doors.
_____ Interior and exterior stairways are structurally sound with proper handrails.
_____ GFCI (Ground Fault Circuit Interrupter) where required and operating properly.
_____ Plumbing fixtures do not have any leaks, clogs or broken handles.
_____ No garbage disposal.
_____ Sump pump discharged per Borough Ord.
_____ Walls, ceilings and floors are in good repair with no peeling paint.

_____Carbon monoxide detectors outside bedroom
_____ ABC type fire extinguisher mounted within 10' of the kitchen area.
_____Screens on all windows.
_____No keyed locks on any interior doors.
_____Cover plates on all switches and outlets.
_____Hot and cold running water to all fixtures.
_____Hot water temperature is below 120 degrees.
_____Toilets, sinks, tubs and showers are not cracked and are clean.
_____Dryer vent connector must be metal.
_____ Rental unit is free of rodent, vermin and insect infestation
_____Unit is clean.

_____ Porches, balconies and steps have adequate railings.
_____ Sidewalks and curbs are in good condition.

_____ Accessory buildings/units on property
_____ Overall condition of exterior is good

BEDROOM LOCATION	SIZE	# OF OCCUPANTS

COMMENTS: _____
_____
_____

INSPECTION RESULTS: APPROVED: YES _____NO _____ SEE ITEMS LISTED ABOVE.
The landlord has **two weeks** from the inspection date to comply with the above items and you **MUST** call to schedule your re-inspection. A Certificate of Occupancy will be issued once the inspection is completed.

_____	_____	_____
PRINT NAME - Landlord	**Landlord's Signature**	**Dave Bell, Housing Inspector**