

**Texas State Affordable Housing Corporation**  
 “Bringing Affordable Housing Closer to Home”

<b>Owner:</b>	<b><u>Name</u></b> <b>Address</b> <b>City State Zip</b> <b>Bond ID:</b> <b>INSPECTION DATE/ TIME:</b> <b>Inspector’s Name:</b>	<b>Date Built:</b>
<b>Number of Units:</b>	<b>Occupancy at Time of Report:</b> %	<b>Average Occupancy Over Last 12 Months:</b> %
<b>Number of One Bedrooms:</b>	<b>Number of Two Bedrooms:</b>	<b>Number of Three Bedrooms:</b>

PHYSICAL INSPECTION	YES	NO	N/A
1) Are grounds and landscaping in acceptable condition?			
2) Is the exterior paint, siding, wood and trim free from cracking, scaling, chipping, peeling or loose paint?			
3) Is parking lot clean and in good repair?			
4) Are all signs clean and in good repair with EHO logos?			
5) Are recreational/common areas clean, maintained and accessible?			
6) Are laundry facilities clean, maintained and accessible?			
7) Are hallways clean and maintained?			
8) Are storage/maintenance areas clean, maintained and organized?			
9) Are all sidewalks clean and in good repair?			
10) Do the roofs on all of the buildings appear to be in good condition?			
11) Do all balconies and upper level walkways appear to be in good condition?			
12) Have repairs or corrections recommended or required from the last physical inspection been satisfactorily completed?			
13) Are there any improvements/renovations since the last inspections?			
14) Are there any improvements/renovations budgeted for this year?			
15) Are there any other health, fire or safety concerns that need to be addressed?			
<b>COMMENTS:</b>			

SECURITY PROGRAM	YES	NO	N/A
1) Is the property suffering from:			
- Break-ins?			
- Auto Theft?			
- Vandalism?			
-Personal Assault?			
-Drug Activity?			
- Gunfire?			
-Other?			
2) Is the type and level of security appropriate for this community?			
3) Did the review of the police reports address the following:			
- Violent Crime?			
- Drug Activity?			
-Family Violence?			
- Other?			
4) Are criminal background checks being conducted on all residents over 18 years of age?			
5) Is the property suffering from the effects of criminal activity?			
6) List all security services being used.			
<b>COMMENTS:</b>			

OFFICE	YES	NO	N/A
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1) Is the office neat, the desk uncluttered?			
2) Are accurate office hours posted?			
3) Are emergency phone numbers posted?			
4) Are the following displayed in full view:			
Fair Housing Poster?			
Occupancy Qualifications?			
5) Are property licenses and permits on file and renewed on a timely basis?			
6) Are insurance binders maintained on vendors?			
7) Are proper procedures in place to ensure compliance with the set aside requirements and rent requirements?			
<b>COMMENTS:</b>			

KEY CONTROL	YES	NO	N/A
1) Are all property keys properly coded?			
2) Is key box locked and secured?			
3) Is the key code list kept separate from the key box?			
4) Are locks being changed during turnover of vacant units and turnover of staff?			
<b>COMMENTS:</b>			

MAINTENANCE PROGRAM	YES	NO	N/A
1) Is there a schedule for preventive maintenance/servicing? (Please include a copy of the schedule)			
2) Are exterminator services provided regularly?			
3) Are roof gutters and downspouts cleaned periodically?			
4) Is recreational/maintenance equipment serviced/stored as seasonal changes dictate?			
5) Is there a schedule for exterior painting?			
6) Does management have a system for receiving, assigning and completing work orders and following up on completed work orders?			
7) Is there an after hours emergency policy in effect?			
8) Has the need for capital improvements been addressed and have adequate reserves been set aside?			
<b>The following information was reported for the month of</b>			
Number of service requests completed in the past 30 days:			
Number of service requests completed within 24 hours:			
Number of outstanding service requests:			
<b>COMMENTS:</b>			

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MARKETING			
1) Complete the table below with the most recent information available.			
SOURCE	COST	# of Prospects	# of Leases
Drive-By/Word of Mouth			
Flyers			
Resident Referral			
Other (friend, relative, etc.)			
Housing Authority			
Locator Service			
Apartment Digest/For Rent/ Senior Living			
Greensheet			
Local Newspaper			
Internet			
Preferred Employer			
Other Source (list)			
TOTAL			
<b>(The rental activity reflected in the above table was for the month of .)</b>			
	<b>YES</b>	<b>NO</b>	<b>N/A</b>
2) Is the property doing any bilingual advertising?			
3) Is market survey being updated monthly?			
4) Are competitors being "shopped" regularly?			
<b>COMMENTS:</b>			

LEASE RENEWAL	YES	NO	N/A
1) Is an effective lease renewal program in place? What percentage of residents renew last month, past 6 months and past 12 months?			
2) Is proper notification given to residents regarding lease renewal terms and/or rental increases? (At minimum, 60-90 days written notification.)			
3) Are individual files being reviewed to determine renewal/non-renewal status?			
4) Are renewals being tracked and monitored correctly?			
5) Are rate increases being implemented?			
6) Number of month-to-month leases.			
7) Is a premium being charged for a month-to-month lease?			
<b>COMMENTS:</b>			



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Gross Potential	\$	Gross Potential	\$
Budgeted		Budgeted	
Variance + (-)		Variance + (-)	
Collected to Date		Collected to Date	
Other Revenue		Other Revenue	
Total Collected		Total Collected	
Budgeted		Budgeted	
Variance + (-)		Variance + (-)	
Comments:			

DELINQUENCIES	YES	NO	N/A
1) Is the delinquency report up to date?			
2) Have proper steps been taken to collect outstanding rents?			
3) Has legal action been taken against delinquent accounts in a timely manor?			
4) What is the total dollar amount currently under eviction?			
5) Does housing have any outstanding balances? If yes, how much?			
6) List delinquency information below.			
<b>COMMENTS:</b>	Current:		\$
	30 Days:		\$
	60 Days and Over:		\$
	TOTAL		\$

RETURNED CHECKS	YES	NO	N/A
1) Total number of returned checks in the past 3 months:			
2) Has manager collected and deposited all returned checks?			
3) Is manager following company policy on returned checks?			
<b>COMMENTS:</b>			

PERSONNEL	YES	NO	N/A
1) Does owner/agent have a system/procedure for providing field supervision of on-site personnel?			
2) Does the property appear to be adequately staffed?			
3) Is overtime being controlled?			
4) Were requested pre-audit reports submitted on time?			
5) Does it appear that personnel are team oriented?			
6) Do personnel appear to be dressed appropriately?			
7) Are name tags/photo IDs being worn?			
8) Are staff meetings being scheduled weekly, monthly or quarterly?			
9) Have personnel been trained in Fair Housing?			
10) List all training staff has received in the past three years.			
<b>COMMENTS:</b>			

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<b>OWNER PARTICIPATION</b>	<b>YES</b>	<b>NO</b>	<b>N/A</b>
1) Is the development owner actively involved in day-to-day affairs of the property?			
2) Does management agent submit reports to owner? If so, what reports are submitted and how often?			
3) Does the agent submit written requests for release of funds when needed?			
4) Does the owner respond to the requests in writing?			
5) Is the owner releasing funds for needed capital improvement items, turning of units, sufficient marketing campaigns, etc?			
<b>COMMENTS:</b>			

<b>SUMMARY OF OBSERVATIONS AND FINDINGS</b>