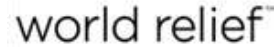


Site Visit Housing Checklist



Case Number: _____

____ Check here if transitional housing (*hotel, relative, host family*)

____ Check here if transitional housing (*hotel, relative, host family*)

1st Residence		Circle Yes / No
Client Address: _____		
EXPENSES	Will housing be affordable at the end of the R&P Period?	Y / N / N/A
	Rent per month	\$
	Approximate utilities per month (electric, gas, water)	\$
SAFETY	Appropriate # of working smoke detectors?	Y / N
	Fire extinguishers where required?	Y / N / N/A
	Identified & accessible emergency escape route?	Y / N
	Working locks on windows & outside doors?	Y / N
	Windows in working order?	Y / N
	Visible bare wiring, peeling or flaking interior, visible mold, detectable dangerous or unsanitary odors?	Y / N
UTILITIES	Adequate heat, ventilation, lighting, hot/cold water in working order?	Y / N
	Electrical fixtures in good repair?	Y / N
	Sink, flush toilet, shower or bath in working order?	Y / N
	Is there an accessible storage or disposal facility for garbage?	Y / N
SPACE	Please <u>circle</u> "federal" or "local/state" standards. If hotel, circle "local/state".	Federal Local / State
	Does the home provide minimum habitable area for each occupant, including sleeping areas, based on above standards?	Y / N
	Number of people living in the home?	#
	Number of bedrooms?	#
	Number of bathrooms?	#
OTHER	Are there rodents or insects in the residence?	Y / N
	If yes, has property management been notified?	Y / N / N/A
	If there are housing problems, has property management been made aware?	Y / N / N/A
	In cases of refugees with disabilities, is housing appropriate to their needs, to the extent required by law?	Y / N / N/A
Please explain all follow-up in the R&P Case Notes		

2nd Residence		Circle Yes / No
Client Address: _____		
EXPENSES	Will housing be affordable at the end of the R&P Period?	Y / N / N/A
	Rent per month	\$
	Approximate utilities per month (electric, gas, water)	\$
SAFETY	Appropriate # of working smoke detectors?	Y / N
	Fire extinguishers where required?	Y / N / N/A
	Identified & accessible emergency escape route?	Y / N
	Working locks on windows & outside doors?	Y / N
	Windows in working order?	Y / N
	Visible bare wiring, peeling or flaking interior, visible mold, detectable dangerous or unsanitary odors?	Y / N
UTILITIES	Adequate heat, ventilation, lighting, hot/cold water in working order?	Y / N
	Electrical fixtures in good repair?	Y / N
	Sink, flush toilet, shower or bath in working order?	Y / N
	Is there an accessible storage or disposal facility for garbage?	Y / N
SPACE	Please <u>circle</u> "federal" or "local/state" standards. If hotel, circle "local/state".	Federal Local / State
	Does the home provide minimum habitable area for each occupant, including sleeping areas, based on above standards?	Y / N
	Number of people living in the home?	#
	Number of bedrooms?	#
	Number of bathrooms?	#
OTHER	Are there rodents or insects in the residence?	Y / N
	If yes, has property management been notified?	Y / N / N/A
	If there are housing problems, has property management been made aware?	Y / N / N/A
	In cases of refugees with disabilities, is housing appropriate to their needs, to the extent required by law?	Y / N / N/A
Please explain all follow-up in the R&P Case Notes		

Date of Home Visit

Date of Home Visit

WR Staff / Volunteer / Co-sponsor (GNT) Signature Date
Please circle which

WR Staff / Volunteer / Co-sponsor (GNT) Signature Date
Please circle which

To be completed **between** 5 working days before arrival **or** 5 working days after arrival, **and** 5 working days after moving within the R&P Period. For further information, review the Guidelines for the Site Visit Housing Checklist.

To be completed **between** 5 working days before arrival **or** 5 working days after arrival, **and** 5 working days after moving within the R&P Period. For further information, review the Guidelines for the Site Visit Housing Checklist.