|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Print Name:  Building & Room#: | **SPONSOR** | | **ASSIGNMENT** | | **FINAL** | |  |
| **YES** | **NO** | **YES** | **NO** | **YES** | **NO** | **N/A** |
| **1. EXTERIOR** |  |  |  |  |  |  |  |
| Is the screen clean? |  |  |  |  |  |  |  |
| Is the window clean? |  |  |  |  |  |  |  |
| Is the window pane clean? |  |  |  |  |  |  |  |
| Is the window sill clean? |  |  |  |  |  |  |  |
| Is the door clean? |  |  |  |  |  |  |  |
| Has the area been policed for trash? |  |  |  |  |  |  |  |
| **2. INTERIOR** |  |  |  |  |  |  |  |
| Is the door and door frame clean (include bathroom, closet & kitchen doors)? |  |  |  |  |  |  |  |
| Have the windows been cleaned with glass cleaner? |  |  |  |  |  |  |  |
| **3. VENTS/HEATER** |  |  |  |  |  |  |  |
| Has the heater filter been cleaned/ changed? |  |  |  |  |  |  |  |
| Have all the vents been wiped down? |  |  |  |  |  |  |  |
| **4. CEILING** |  |  |  |  |  |  |  |
| Have all the cob webs been removed? |  |  |  |  |  |  |  |
| Is the smoke detector in working order/attached properly? |  |  |  |  |  |  |  |
| Has the ceiling fan been cleaned? |  |  |  |  |  |  |  |
| **5. LIGHTS** |  |  |  |  |  |  |  |
| Have all burned out bulbs been replaced? |  |  |  |  |  |  |  |
| Are the globes and fixtures clean? |  |  |  |  |  |  |  |
| **6. WALLS** |  |  |  |  |  |  |  |
| Are the walls clean and mark free? |  |  |  |  |  |  |  |
| Have all nails been removed? |  |  |  |  |  |  |  |
| Have all holes been spackled over? |  |  |  |  |  |  |  |
| Are the baseboards clean? |  |  |  |  |  |  |  |
| Are light switches, outlets, etc. wiped down? |  |  |  |  |  |  |  |
| **7. FLOORS** |  |  |  |  |  |  |  |
| Has the floor been swept and mopped (room, kitchen, bathroom)? |  |  |  |  |  |  |  |
| Has the floor been vacuumed (corner to corner)? |  |  |  |  |  |  |  |
| **8. FURNISHINGS** |  |  |  |  |  |  |  |
| Have all personal belongings been removed? |  |  |  |  |  |  |  |
| Has the exterior of furniture been wiped down? |  |  |  |  |  |  |  |
| Have all the drawers been vacuumed and wiped out? |  |  |  |  |  |  |  |
| Have all decals and stickers been removed? |  |  |  |  |  |  |  |
| Has bed been pulled from wall/mattress removed and cleaned underneath |  |  |  |  |  |  |  |
| **9. WARDROBES/CLOSETS** |  |  |  |  |  |  |  |
| Is the exterior of the wardrobe wiped down? |  |  |  |  |  |  |  |
| Is the interior of the wardrobe wiped down? |  |  |  |  |  |  |  |
| **10. REFRIGERATOR/MICROWAVE** |  |  |  |  |  |  |  |
| Have the outsides been wiped down? |  |  |  |  |  |  |  |
| Has the refrigerator been pulled out and cleaned behind? |  |  |  |  |  |  |  |
| Are all inside walls, drawers, and shelves wiped down? |  |  |  |  |  |  |  |
| Has the seal around the refrigerator been cleaned? |  |  |  |  |  |  |  |
| Is the bulb in the refrigerator working? |  |  |  |  |  |  |  |
| Has the inside of the microwave been cleaned? |  |  |  |  |  |  |  |
| **11. SINK/COUNTERTOP** |  |  |  |  |  |  |  |
| Is the countertop clean and dust free? |  |  |  |  |  |  |  |
| Is the sink clean and free of water stains? |  |  |  |  |  |  |  |
| Has the faucet been cleaned? |  |  |  |  |  |  |  |
| Has the drawers been vacuumed and wiped down? |  |  |  |  |  |  |  |
| Has the outside of cabinets been wiped down (including handles)? |  |  |  |  |  |  |  |
| Have the inside of the cabinets and doors been wiped down? |  |  |  |  |  |  |  |
| Is the mirror clean? |  |  |  |  |  |  |  |
| Has the outside of medicine cabinet been wiped down and cleaned? |  |  |  |  |  |  |  |
| Is the top of the medicine cabinet free of dust? |  |  |  |  |  |  |  |
| Is the inside of the medicine cabinet clean? |  |  |  |  |  |  |  |

**CONDITIONS CHECKLIST**

**\*\*\*Each Resident Shares Responsibility for Sanitation in Rooms w/ Shared Baths/Kitchens\*\*\***

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **SPONSOR** | | **ASSIGNMENT** | | **FINAL** | |  |
| **YES** | **NO** | **YES** | **NO** | **YES** | **NO** | **N/A** |
| **12. LATRINE AREA** |  |  |  |  |  |  |  |
| Is the inside of toilet clean and free of stains? |  |  |  |  |  |  |  |
| Has the exterior of the toilet been wiped down? |  |  |  |  |  |  |  |
| Has the floor around the toilet been cleaned? |  |  |  |  |  |  |  |
| **13. SHOWER/TUB** |  |  |  |  |  |  |  |
| Is the shower clean? |  |  |  |  |  |  |  |
| Have the fixtures been cleaned? |  |  |  |  |  |  |  |
| Has the floor been cleaned and stains removed? |  |  |  |  |  |  |  |
| **14. KITCHEN** |  |  |  |  |  |  |  |
| Have all personal belongings been removed? |  |  |  |  |  |  |  |
| Have all the countertops been wiped down? |  |  |  |  |  |  |  |
| Have the inside of drawers been cleaned? |  |  |  |  |  |  |  |
| Have the cabinet fronts been wiped down (including handles)? |  |  |  |  |  |  |  |
| Is the stove top clean? |  |  |  |  |  |  |  |
| Have the stove drip bowls been cleaned? |  |  |  |  |  |  |  |
| Has the stove been pulled out and cleaned behind? |  |  |  |  |  |  |  |
| Have the sides of the stove and cabinets been wiped down? |  |  |  |  |  |  |  |
| Is the inside of the oven clean? |  |  |  |  |  |  |  |
| Has the exhaust fan been cleaned? |  |  |  |  |  |  |  |
| Has the filter been cleaned or replaced? |  |  |  |  |  |  |  |
| Are the table and chairs clean? |  |  |  |  |  |  |  |
| **15. MISCELLANEOUS** |  |  |  |  |  |  |  |
| Is the entire room free of mold or mildew to include HVAC vent? |  |  |  |  |  |  |  |
| Has all work orders been submitted before final out inspection? |  |  |  |  |  |  |  |

***\*\*\*The purpose of this checklist is to identify the status of the room based on cleanliness and overall condition. The sponsor must sign the Sponsor portion to acknowledge that they have inspected the room. When a sponsor takes responsibility for a room, it is up to the sponsor to get discrepancies addressed. After that, the UH Office (Dorm Management) is no longer liable for cleanliness discrepancies. The resident may, if desired, address cleanliness discrepancies with their sponsor as they now belong to them. Maintenance requests with the room are a separate issue that can always be addressed with the UH Office (Dorm Management).***

Inspection Type Statement Resident or Sponsor Signature Manager’s Signature Date

Sponsor Sponsor’s signature signifies

above statement is acknowledged

Assignment Resident’s signature signifies

they accept the room.

Final Resident’s signature signifies

(pass/fail) requirements have been met

ADDITIONAL COMMENTS/FINDINGS: