

# TEMPORARY HOUSING UNIT INSPECTION FORM

1. Temporary Housing Unit No.

2. Serial No./VIN

3. TYPE OF INSPECTION			4. TYPE OF FACILITY		5. APPLIANCES			6. UNIT INFO	
Transport	Dispatch	Receipt	<input type="checkbox"/> Other <input type="checkbox"/> Mobile Home <input type="checkbox"/> Travel Trailer	Type	Manufacturer	Model	Serial No	a. Manufacturer	
Storage	<input type="checkbox"/>	<input type="checkbox"/>		Furnace				b. Year	
Staging	<input type="checkbox"/>	<input type="checkbox"/>		Range				c. Size (Ft., inc. towing hitch)	
Site	<input type="checkbox"/>	<input type="checkbox"/>		Microwave				d. Number of Bedrooms	
RFO		<input type="checkbox"/>		Refrigerator					
Move In		<input type="checkbox"/>		A/C					
Move Out		<input type="checkbox"/>	Water Heater						

7. INSPECTIONS				8. CONDITION OF FURNISHINGS, INTERIOR & EXTERIOR								Handicap	
<input type="checkbox"/> Disaster		<input type="checkbox"/> Storage		N = NEW G = GOOD P = POOR D = DAMAGED M = MISSING								<input type="checkbox"/> Yes <input type="checkbox"/> No	

FURNISHINGS		STO	DIS	REC	FURNISHINGS		STO	DIS	REC	FURNISHINGS		STO	DIS	REC
Kitchen & Dining		Condition			First Bedroom		Condition			Bathroom		Condition		
Dinette Table					Double Bed					Complete Commode				
Dinette Chairs (6 for 3 BR)					Mirror					Tub/Shower				
Range					Cabinets Storage					Lavatory				
Range Hood & Vent Fan					Curtains & Rods					Cosmetic Cabinet				
Refrigerator					Light Fixtures					Mirror				
Curtains & Rods					Second Bedroom					Curtains & Rods				
Cabinets					Double Bed, Complete					Light Fixtures				
Sink					Mirror					Exterior Condition				
Light Fixtures					Cabinet Storage					Water Heater				
Fire Extinguisher					Curtains & Rod					Doors				
A/C					Light Fixtures					2 Key Per Door				
Couch					Third Bedroom					Windows				
Arm Chair					Double Bed, Complete					Screens				
End Table					Mirror					Front Panels				
Coffee Table					Cabinet Storage					Left Side Panels				
Curtains & Rods					Curtains & Rods					Rear Panels				
Light Fixtures					Light Fixtures					Right Side Panels				
Hall					Interior Condition					Roof Vents				
Furnace					Floor Covering					Towing Hitch				
Smoke Detector					Wall Panels					Axles & Springs				
Light Fixtures					Ceiling Panels					Wheels & Tires				

9. MARK LOCATION OF EXTERIOR DAMAGE ON DIAGRAM BELOW:



NOTE: Tail light harness furnished by:  Towing Contractor

10. COMMENTS (if more space is needed, continue on reverse)

11. READY FOR OCCUPANCY	CONTRACT W.O. No.	INSPECTOR SIGNATURE	DATE
12. OCCUPANT NAME	ADDRESS		THA No.

13. REPRESENTATIVES ACKNOWLEDGING CONDITIONS ABOVE:

NAME (Contractor)	SIGNATURE AND DATE (Contractor)	SIGNATURE AND DATE (State/County Rep.)
Dispatch To/From Storage		
Receipt To/From Storage		
Dispatch To/From Site		
Occupant SIGNATURE (Move In or Out)	DATE	STATE/COUNTY REP. SIGNATURE
		DATE