Permit Number_____ **Date**_____

CITY OF LAKE SAINT LOUIS

Department of Community Development
200 Civic Center Drive, Lake Saint Louis, MO 63367
Phone: 636-625-1200 / Fax 636-625-7431 / E-mail: www.lakesaintlouis.com

RESIDENTIAL RENTAL INSPECTION / CERTIFICATE OF OCCUPANCY

PROPERTY ADDRESS _____APT # _____
SUBDIVISION _____ LOT # _____ COMPLEX _____

☐ **Full Occupancy Approved** ☐ **Temporary Occupancy Approved (requires re-inspection within _____days)**

☐ **Not Approved/Life Safety Deficiencies (requires re-inspection within _____days)**

EXTERIOR

- ☐ Improper address numbers
- ☐ Relocate trash cans
- ☐ Repair sidewalks or driveway
- ☐ Remove dead trees or limbs
- ☐ Repair/maintain exterior walls
- ☐ Inoperable/unlicensed vehicle
- ☐ Repair Chimney or chase
- ☐ Improper outdoor storage
- ☐ Repair retaining wall(s)
- ☐ Tall weeds and grass
- ☐ Repair/maintain pool/hot tub
- ☐ Repair stairs/porch/deck
- ☐ Remove garbage/rubbish
- ☐ Repair/maintain fence
- ☐ Roof/Gutters/Downspouts
- ☐ Repair/maintain foundation
- ☐ Improper site grading/drainage
- ☐ Accessory structure

INTERIOR

- ☐ Remove rubbish/garbage
- ☐ Repair handrails/guardrails
- ☐ Window screens or glazing
- ☐ Repair door operation/locks
- ☐ Repair floors/walking surface
- ☐ Repair stair treads/risers
- ☐ Repair window operation/locks
- ☐ Repair bathroom/kitchen plumbing
- ☐ Repair walls
- ☐ Rodent/insect infestation
- ☐ Ceiling Height/Repair
- ☐ Privacy

LIFE SAFETY REQUIREMENTS
NO OCCUPANCY WILL BE ISSUED WITH DEFICIENCIES IN THIS CATEGORY

- ☐ Minimum occupant living space
- ☐ Repair/replace Arc-fault breaker
- ☐ Repair/replace GFCI
- ☐ Unsafe equipment
- ☐ Endangerment/unsafe structure
- ☐ Clothes dryer exhaust
- ☐ Emergency escape openings
- ☐ Minimum ventilation
- ☐ Fire separation and/or repair
- ☐ Repair electrical panel
- ☐ Only one conductor per lug (panel)
- ☐ Combustion air (fuel fired appliances)
- ☐ Repair heating facilities
- ☐ Luminaries
- ☐ Minimum lighting
- ☐ Smoke alarms
- ☐ Label electrical panel
- ☐ CO detector
- ☐ Egress/ingress
- ☐ Building security
- ☐ Receptacles

COMMENTS/CODE SECTION_____ _____

_____ _____

_____ _____

SPECIMEN

The inspection associated with this report was conducted by a trained and certified professional in the employ of the City of Lake Saint Louis. The sole intended purpose of the inspection and report is to assure that the dwelling unit concerned and any appurtenances are in substantial compliance with the applicable Codes and Ordinances of the City of Lake Saint Louis. The inspection report is based solely upon the visual observation of conditions that existed at the time of the inspection. The inspection was noninvasive. The inspection excludes and does not intend to include any components, items and conditions which by their nature are concealed or are unreasonably difficult to access. The inspection did not include the removal or dismantling of any materials from the structure. This inspection report is not an appraisal to determine the value of the property. It is not intended to promote or deter the renting of the property. The inspection and report are not intended nor should they be considered to be a guarantee or warranty regarding the condition of the property. This inspection is not intended to take the place of a private home inspection, usually required by a lender at the execution of a property transfer. The individual receiving the report must be the property owner or property owners authorized agent. By signing below, the recipient acknowledges that the deficiencies noted in this report shall be corrected by the date stated to avoid further penalty.

RECIPIENT'S NAME (print)_____ (signature)_____
INSPECTOR'S NAME (print)_____(signature)_____