

# DECENT, SAFE AND SANITARY INSPECTION CERTIFICATION

RE1950 10/2019

Wisconsin Department of Transportation

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Owner/Tenant		Replacement Property Address			
Asking Price		Selling Price \$0.00		Monthly Rental Rate	
<b>TYPE OF REPLACEMENT</b>		<b>NUMBER OF OCCUPANTS</b>		<b>LIVING AREA AND ROOM COUNT</b>	
Single Family Residence	Apartment	No. Male Adults	No. Female Adults	Living Room	Bdrm. No. 1
				SF	SF
Duplex	Mobile Home	No. Male Children	No. Female Children	Dining Room	Bdrm. No. 2
				SF	SF
Room	Other	Total Number of Occupants		Family Room	Bdrm. No. 3
				SF	SF
Dwelling (Brick, Frame, etc.)	Condition	Rooms Needed for Occupants		Kitchen	Bdrm. No. 4
				SF	SF
Approx. Age	Type of Neighborhood	D.S.S. Area Required		Other	Habitable Area
				SF	SF

## PHYSICAL STANDARDS – Based on Visual Inspection

Yes	No	<b>1. Structure</b>	Yes	No	<b>5. Kitchen</b>
<input type="checkbox"/>	<input type="checkbox"/>	Foundation, exterior walls, and roof structurally sound, reasonably weather-tight, rodent proof and in good state of maintenance & repair.	<input type="checkbox"/>	<input type="checkbox"/>	For exclusive use of household.
<input type="checkbox"/>	<input type="checkbox"/>	Interior and exterior stairs and porches are adequate, safe and in good state of repair.	<input type="checkbox"/>	<input type="checkbox"/>	Sink connected to hot and cold running water.
<input type="checkbox"/>	<input type="checkbox"/>	Interior walls, ceilings and floors in good state of repair.	<input type="checkbox"/>	<input type="checkbox"/>	Space for stove and refrigerator with necessary service hookups.
<input type="checkbox"/>	<input type="checkbox"/>	Dwelling has adequate number of unobstructed means of egress.	<input type="checkbox"/>	<input type="checkbox"/>	If provided, stove and refrigerator in good working order.
		<b>2. Heating</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>6. Bath</b>
		<input type="checkbox"/> Space <input type="checkbox"/> Central	<input type="checkbox"/>	<input type="checkbox"/>	For exclusive use of household and offers user privacy.
<input type="checkbox"/>	<input type="checkbox"/>	Is adequate, safe and in good working order.	<input type="checkbox"/>	<input type="checkbox"/>	Lavatory, tub or shower connected to hot and cold running water.
		<b>3. Electrical</b>	<input type="checkbox"/>	<input type="checkbox"/>	Adequate ventilation (operable window or exhaust fan).
<input type="checkbox"/>	<input type="checkbox"/>	Electric service is adequate, safe and in good state of repair.	<input type="checkbox"/>	<input type="checkbox"/>	Access is not through a sleeping room.
		<b>4. Plumbing</b>	<input type="checkbox"/>	<input type="checkbox"/>	<b>7. Light and Ventilation</b>
<input type="checkbox"/>	<input type="checkbox"/>	Has continuing and adequate supply of drinkable water.	<input type="checkbox"/>	<input type="checkbox"/>	All habitable rooms have adequate light and ventilation.
<input type="checkbox"/>	<input type="checkbox"/>	Fixtures in good state of repair and maintenance.	<input type="checkbox"/>	<input type="checkbox"/>	Windows in good state of repair and maintenance.
<input type="checkbox"/>	<input type="checkbox"/>	Sewage system is adequate and in good working order.	<input type="checkbox"/>	<input type="checkbox"/>	<b>8. Premises</b>
			<input type="checkbox"/>	<input type="checkbox"/>	Free from adverse environmental effects and conditions constituting a fire, health or safety hazard.

MOBILE HOME DATA				
Manufacturer & Model Year	Size:	Length X	Width =	Sq. Ft.
			Habitable Area =	Sq. Ft.
				D.S.S. Area Required for Occupants
SLEEPING ROOM DATA				
Yes	No	Habitable Floor Space		D.S.S. Area Required for Occupants
<input type="checkbox"/>	<input type="checkbox"/>	Has lockable door, if bathroom facilities are separate.		

ATTACH PHOTOGRAPH TO FORM and/or ATTACH SKETCH OF FLOOR PLAN TO REVERSE

### Comments:

This dwelling does / does not meet the requirements for decent, safe and sanitary housing in accordance with existing standards.

By (Provide Signature: Do Not Print)	Company/Title	Date
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Project ID

Project

County

Parcel