

QUARTERS APPEARANCE INSPECTION REPORT

TO:	
ADDRESS:	
Date:	Time:
From: DPW Housing Division	

Your quarters area was inspected by a representative of the DPW Housing Division this date. We noted that the following item(s) require your attention.

Lawn needs to be-- <input type="checkbox"/> Cut <input type="checkbox"/> Trimmed <input type="checkbox"/> Watered <input type="checkbox"/> Edged <input type="checkbox"/> Raked <input type="checkbox"/> Policed
Area Requires-- <input type="checkbox"/> Weeding <input type="checkbox"/> Debris hauled away <input type="checkbox"/> Other
Fence Requires-- <input type="checkbox"/> Removal <input type="checkbox"/> Repair
Garbage/Trash-- <input type="checkbox"/> Not in container <input type="checkbox"/> Improper container <input type="checkbox"/> Lid missing <input type="checkbox"/> Too full
Vehicles-- <input type="checkbox"/> Parked on lawn <input type="checkbox"/> Other
Antennas-- <input type="checkbox"/> Improperly erected <input type="checkbox"/> Not authorized
Utilities Conservation-- <ul style="list-style-type: none"> <input type="checkbox"/> Exterior lights burning during daylight hours <input type="checkbox"/> Excess water running in streets
Toys/Bicycles-- <input type="checkbox"/> Improperly stored
Firewood-- <input type="checkbox"/> Improperly stored
Name Tag-- <input type="checkbox"/> Missing <input type="checkbox"/> Requires repair
Other—

DPW Housing Division will reinspect above unsatisfactory condition(s) within the next 3 days to insure that corrective action was taken.

Notice Number	Inspectors—
	For Chief, DPW Housing Division
DISTRIBUTION:	
1 Copy – Occupant	
1 Copy – DPW Housing Division	