



Home Repair Opportunity Program

Inspection Form and Certification of Satisfactory Completion

HeRO-410
Updated 5/15/2024

GENERAL INFORMATION

Grantee: _____ Grant Number: _____

Homeowner: _____

Address: _____

City: _____ County: _____ ZIP: _____

Time and Date of Initial Inspection: _____ Time and Date of Final Inspection: _____

1.0 LIVING ROOM		Initial		Repairs Required	Repair Fail Reason	Final		Bids		
Item	Description	P	F			P	F	1	2	3
1.1	Living Room Present									
1.2	Electricity									
1.3	Electrical Hazards									
1.4	Security									
1.5	Window Condition									
1.6	Ceiling Condition									
1.7	Wall Condition									
1.8	Floor Condition									
1.9	Lead Paint									
1.10	Doors									
LIVING ROOM TOTAL BIDS:										

NOTES:

If you or someone you know served in the U.S. Armed Forces, we encourage you to visit <http://veteranbenefits.mo.gov> or call (573) 751-3779 to learn about available resources.

2.0 KITCHEN		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
2.1	Kitchen Present									
2.2	Electricity									
2.3	Electrical Hazards									
2.4	Security									
2.5	Window Condition									
2.6	Ceiling Condition									
2.7	Wall Condition									
2.8	Floor Condition									
2.9	Lead Paint									
2.10	Stove or Range with Oven									
2.11	Refrigerator									
2.12	Sink									
2.13	Food Areas									
2.14	Doors									
2.15	Cabinets									
2.16	Countertops									
2.17	Dishwasher/Disposal									
2.18	Plumbing – Clogged Drains									
2.19	Plumbing – Leaks									
KITCHEN TOTAL BIDS:										

NOTES:

3.0 BATHROOM		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
3.1	Bathroom Present									
3.2	Electricity									
3.3	Electrical Hazards									
3.4	Security									
3.5	Window Condition									
3.6	Ceiling Condition									
3.7	Wall Condition									
3.8	Floor Condition									
3.9	Lead Paint									
3.10	Flush Toilet									
3.11	Wash Basin or Lavatory									
3.12	Tub or Shower									
3.13	Ventilation									
3.14	Cabinets									
3.15	Plumbing – Clogged Drains									
3.16	Plumbing – Leaks									
3.17	Doors									
BATHROOM TOTAL BIDS:										

NOTES:

4.0 OTHER ROOMS USED FOR LIVING SPACE										
Key				Room Code				Room Location		
4.1	1. Bedroom									
	2. Dining Room or Area									
3. Second Living or Family Room, Den, etc.										
4. Entrance Halls, Corridors, Halls, Staircases										
5. Additional Bathroom										
6. Other										
		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
4.2	Electricity									
4.3	Electrical Hazards									
4.4	Security									
4.5	Window Condition									
4.6	Ceiling Condition									
4.7	Wall Condition									
4.8	Floor Condition									
4.9	Lead Paint									
4.10	Smoke Detectors									
4.11	Doors									
4.12	Stairs									
OTHER ROOMS TOTAL BIDS:										

NOTES:

5.0 ALL SECONDARY ROOMS NOT USED FOR LIVING SPACE		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
5.1	None									
5.2	Security									
5.3	Electrical Hazards									
5.4	Doors									
SECONDARY ROOMS TOTAL BIDS:										

NOTES:

6.0 BUILDING EXTERIOR		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
6.1	Condition of Foundation									
6.2	Condition of Stairs, Rails and Porches									
6.3	Condition of Roof and Gutters									
6.4	Condition of Walls									
6.5	Lead Paint: Exterior Surfaces									
6.6	Manufactured Homes									
6.7	Doors									
6.8	Patio/Porch/Balcony									
6.9	Fire Escapes									
6.10	Lighting									
6.11	Exterior Windows									
BUILDING EXTERIOR TOTAL BIDS:										

NOTES:

7.0 HEATING, PLUMBING, INSULATION		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
7.1	Adequacy of Heating									
7.2	Safety of Heating Equipment									
7.3	HVAC – General Rust/Corrosion									
7.4	HVAC – Inoperable									
7.5	HVAC – Misaligned Chimney									
7.6	HVAC – Noisy, Vibrating, Leaking									
7.7	Water Supply									
7.8	Plumbing									
7.9	Sewer Connection									
7.10	Weather Stripping/Insulation									
7.11	Laundry Area Ventilation									
HEATING, PLUMBING, INSULATION TOTAL BIDS:										

NOTES:

8.0 ELECTRICAL SYSTEM		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
8.1	Blocked Access to Electrical Panel									
8.2	Burnt Breakers									
8.3	Evidence of Leaks/Corrosion									
8.4	Frayed Wiring									
8.5	GFI – Inoperable									
8.6	Missing Breakers/Fuses									
8.7	Missing Covers									
ELECTRICAL SYSTEM:										

NOTES:

9.0 GENERAL HEALTH AND SAFETY		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
9.1	Air Quality – Mold and/or Mildew									
9.2	Air Quality – Propane/Natural Gas/Methane Gas									
9.3	Air Quality – Sewer Odor									
9.4	Electrical Hazards – Exposed Wire/Open Panels									
9.5	Electrical Hazards – Water Leaks									
9.6	Flammable Materials									
9.7	Garbage and Debris									
9.8	Hazards - Other									
9.9	Hazards – Sharp Edges									
9.10	Hazards –Tripping									
9.11	Evidence of Infestation									
GENERAL HEALTH AND SAFETY TOTAL BIDS:										

NOTES:

10.0 HOT WATER HEATER		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
10.1	Misaligned Chimney/Ventilation System									
10.2	Inoperable Unit/Components									
10.3	Leaking Valves/Tanks/Pipes									
10.4	Pressure Relief Valve Missing									
10.5	Rust/Corrosion									
HOT WATER HEATER TOTAL BIDS:										

NOTES:

11.0 MAJOR SYSTEMS LIFESPAN OF FIVE YEARS OR MORE		Initial				Final		Bids		
Item	Description	P	F	Repairs Required	Repair Fail Reason	P	F	1	2	3
11.1	Structural Support									
11.2	Roofing									
11.3	Cladding									
11.4	Weatherproofing (windows, doors, siding, gutters)									
11.5	Plumbing									
11.6	Electrical									
11.7	Heating									
11.8	Ventilation									
11.9	Air Conditioning									
MAJOR SYSTEMS LIFESPAN OF FIVE YEARS OR MORE TOTAL BIDS:										

NOTES:

12.0 COMMENTS AND OTHER ISSUES TO BE ADDRESSED	
Item	Comments

CERTIFICATION-INITIAL INSPECTION

INITIAL INSPECTOR: The undersigned inspector certifies that he/she personally performed the Initial Inspection of the premises and that the foregoing is his/her true assessment of the conditions observed.

Inspector Signature: _____

Inspector Printed Name: _____ Date: _____

HOMEOWNER: The undersigned homeowner certifies that the assessment of the conditions of his/her property above is accurate.

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____

CERTIFICATION-FINAL INSPECTION

FINAL INSPECTOR: The undersigned inspector certifies that following completion of rehabilitation or repair activities that he/she performed the Final Inspection of the premises and that the foregoing is his/her true assessment of the conditions observed; that each area of each section listed above meets the criteria outlined in the HeRO Inspection Form Instructions; that each of the major systems identified in Section 11.0 has an expected lifespan of at least 5 years from the date of final inspection; that the work performed meets all local codes and rehabilitation standards or the International Building Code; and that the property has passed a lead clearance test.

Inspector Signature: _____

Inspector Printed Name: _____ Date: _____

CONTRACTOR: The undersigned certifies that all work has been satisfactorily completed in accordance with all applicable contracts and rehabilitation standards including any change orders; that the property meets all applicable codes; that the final cleaning passed HUD lead clearance standards; that appropriate warranties have been obtained or issued; and that there are no unpaid claims for materials, supplies, equipment, or claims of laborers or mechanics for unpaid wages.

Contractor Signature: _____ Date: _____

Contractor Printed Name: _____ Contractor Company: _____

HOMEOWNER: The undersigned homeowner certifies that the rehabilitation or repairs made to his/her property are complete and satisfactory.

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____

Homeowner Signature: _____

Homeowner Printed Name: _____ Date: _____