

2015 Single-Family Rental Registration Form

Building Inspections 265 E Parkway Blvd. Coppell, TX 75019 Phone: 972-304-3500 Fax: 972-462-5318

e-mail: inspect@coppelltx.gov
website: www.coppelltx.gov

Permit ID:		

Please fill out this form in its entirety and either mail it to our office with the \$5.00 registration fee included (mailing address is City of Coppell, Building Inspections, 265 E Parkway Blvd, Coppell, TX 75019) or you may e-mail the completed form to inspect@coppelltx.gov or fax to 972-462-5318 and pay the \$5.00 registration fee on-line using your credit card*.

Rental Property Address:			
Property Owner Name (required)			
Property Owner Mailing Address (required)			
Property Owner Phone Number (required)			
Property Owner e-mail address (op	tional)		
Property Owner's Representative (if than above)	other		
Representative's Mailing Address (required)			
Representative's Phone Number (re	equired)		
Representative's e-mail (optional)			
Tenant name and number if availab	ole:		
each rental property must be registed inspected when there is tenant chan inspection fee must be paid prior to inspected which includes the required each sleeping area: http://www.cop. Check the appropriate box below. I certify that I am representing. I certify that I am the properties (before the tenant moves in their bedied bedied prior to an inspection upon a time of the inspection must be represented before the Rental Registration and Instant water utilities not approved.	ered with the orge (prior to a scheduling are required elongings). To change of teaired and insiduled by the process	City each January, rentanew tenant moving in orental inspection. Plea orking smoke detector intal-registation-program. In a listed above as the strength of t	or moving in belongings). A \$20.00 se see our website for a list of the items in each bedroom and in the area outside html. The property owner's representative. The property owner's representative. The \$20 inspection fee with each year. The \$20 inspection fee with each year. A Code Officer will return to resentative. I understand that failing to complete, the unit not being approved for occupance.
Signature of Owner or Represen Payment received by:	tative Date:		Date Signed Amount:
r ayment received by.	Dale.		Amount.

Inspection Checklist	Address/Unit#:		
Exterior – Main Structure	Pass	Fail	Comments
Locking hardware works.			
2. Locks on doors.			
3. Doors and windows are weather-tight.			
Exits clear and unobstructed.			
5. Window and door condition acceptable.			
6. Street numbers visible from street &			
alley.			
7. Windows operable in sleeping rooms.			
8. Foundation free from obvious disrepair.			
9. Exterior free from holes or gaps (i.e.			
holes in brick, siding, stucco, etc.)			
10. Roof free of obvious disrepair or			
missing shingles.			
11. Chimney (if any) in good condition and			
free of obvious disrepair.			
12. Handrails existing if 4 or more steps			
and securely attached.			
13. Guardrails required if deck or platform			
is over 30 inches above grade.			
Exterior – Sanitation			
Property free of junk vehicles and/or			
equipment.			
2. Property free of litter, debris and trash.			
3. Swimming pool maintained in clean and			
sanitary condition and in good repair.			
4. Fences well maintained.			
5. Grass and weeds are less than 12			
inches.			
6. Waste receptacles are not overflowing			
and out of the right-of-way.			
7. Accessory structures in good repair.			
Interior			*Electricity must be on to the house.
Furnace provided.			
Water heater provided.			
Smoke detectors provided in all			
bedrooms and area outside bedrooms.			
4. Electrical fixtures free from obvious			
disrepair.			
5. Electrical outlets and switch plate			
covers provided.			
6. Plumbing fixtures free from obvious			
disrepair.			
Summary			
Signature of Code Officer			
Phone Number		972-3	304-3500
Date of Inspection			