

USED MOBILE HOME INSPECTION

Safety Standards Checklist – Gilmer County, Georgia

Applicant Name: _____ Date: _____

Mailing Address: _____ Phone #: _____

Address of MH Inspection Site: _____

Directions: _____

Mobile Home Information:

Dealer Name: _____ Phone #: _____

M/H Serial #: _____ M/H Year: _____

M/H Mfg: _____ M/H Model: _____

M/H Size: _____ M/H Color: _____

I understand that there is an inspection fee of \$100 that must be paid prior to inspection. This fee will be deducted from the cost of a Mobile Home Permit only if the mobile home being inspected receives a "PASS" from the county inspector. If this mobile home does not pass, I understand that the paid fee will not be returned to me but will be forfeited to the county as a paid inspection fee.

Applicant Signature: _____ Date: _____

Notice: Only a certified Gilmer County Inspector may complete this form. Copy of certification must accompany this checklist.

Inspector Name: _____ Date: _____

(a) Interior Condition:

____ Floors, floor system, interior walls, and ceiling are in sound condition.

____ Doors and windows are operable, watertight, and in good working condition.

____ Free of warping, holes, water damage, or deterioration.

(b) Exterior Condition:

____ Free of loose or rotting boards or timbers, rot, and rust.

____ Roof is structurally sound with no obvious defects that might admit rain/moisture to interior.

____ Doors and locks operable and any missing insulation replaced.

(c) Sanitary Facilities:

___ All plumbing fixtures and pipes are free from leaks and obstruction and in good condition.

___ Home contains kitchen sink; each bathroom contains lavatory and water closet.

___ At least one bathroom contains tub and/or shower facilities.

(d) Heating System:

___ Heating is safe and in working condition. Unvented heaters are prohibited.

(e) Electrical System:

___ Switches, receptacles and fixtures are property installed.

___ Distribution panel is in compliance, complete with required breakers, with unused openings covered.

___ Continuity test assured all metallic parts are properly bonded.

(f) Hot Water Supply:

___ Home has hot water heater in safe and working condition.

(g) Egress Windows:

___ Each bedroom has a minimum of one operable window of sufficient size to allow egress.

(h) Ventilation:

___ Kitchen has a minimum of one operating window or other ventilation device.

(i) Smoke Detectors:

___ The kitchen and each bedroom has one operable battery powered smoke detector each.

*****OFFICIAL USE ONLY*****

___ Passed

___ Failed

Comments: _____

Inspector Signature: _____ Date: _____