



Planning Development
 447 N. Main St.
 Boerne, TX 78006
 830-248-1501
www.ci.boerne.tx.us

Short-Term Rental (STR) Inspection Checklist

Property Information:

1	Property Manager:	Telephone number:
2	Property Owner:	Telephone number:
3	Property Address:	
4	Number of Bedrooms:	Number of Bathrooms:

Building Safety Inspection

N/A	Pass	
		DOOR LOCKS
		Exterior entry doors have working locking mechanism, and do not require a key to exit from the inside.
		All exterior doors open and close properly and lock and unlock easily
		SMOKE DETECTORS
		Smoke alarms are installed in each sleeping room, outside of each separate sleeping area in the immediate vicinity of the bedroom(s), and on each occupiable story, including habitable attics
		All smoke detectors work properly, and the alarm sounds when tested
		For smoke alarms that are hardwired, a battery is installed for battery backup functionality
		Smoke detectors can't be more than 10 years old
		CARBON MONOXIDE DEVICES ALARMS & DETECTORS
		If the dwelling unit contains a gas-burning heater, appliance, fireplace, or attached garage, carbon monoxide (CO) devices are required to be installed in accordance with local building standards and the manufacturer's installation instructions
		Operational CO alarms are installed outside of each separate dwelling unit sleeping area in the immediate vicinity of the bedroom(s), in a bedroom where a gas-burning appliance is located, and on each occupiable level inside the unit

N/A	Pass	FIRE SAFETY
		Printed and posted floor plans and home fire escape plans from each floor indicating two ways out
		Fire extinguishers shall be installed on each floor in plain view, and annual testing performed tag attached
		Instructions shall be provided for gas, water, and electrical shut off and home heating appliance and safety use
N/A	Pass	FIRE EXTINGUISHER
		Each extinguisher has been tagged and serviced by a state-licensed contractor within the last year
		Each fire extinguisher is fully charged, operable, and readily available for use
N/A	Pass	HEATING
		All heating equipment is operational and in safe working condition, with covers free of rust and dust build-up.
		Gas heater is operating normally and is provided with minimum combustion air.
		For buildings with a thermostat not under the control of the tenants, the temperature setting on the thermostat is set at 68°F minimum.
		All service gas lines in the unit are free of leaks and any gaseous odors.
		All gas lines in the unit have shut-off valves and flex lines at the appliance connection.
N/A	Pass	VENTILATION
		All windows open and close easily and can remain open
		Any security bars can be released from the interior
		The windows required for egress in sleeping rooms are able to open completely and are fully operable, with a minimum opening size of 5 sq ft.
		All window glass is in good condition, free of damage, without cracks, and properly sealed at the edges
		If bathrooms have fixed windows or no windows, verify that the required mechanical ventilation system is in working order
N/A	Pass	APPLIANCES
		All appliances are in working condition, with all metal finishes free of visible deterioration
		Free-standing stove has a tilt guard
		If there is a gas stove, it is free of gaseous odors indicating a gas leak
N/A	Pass	ELECTRICAL WIRING
		All electrical outlets and light switches are functional and secure, have faceplates covering the opening, and are installed against the mounting surface
		All wires or electrical cables in habitable spaces are protected
		All electrical boxes located in accessible areas have cover plates that cover the opening and are installed against the mounting surface

ACKNOWLEDGEMENTS

I _____ [inspector name] conducted an inspection of the interior and exterior areas of all structure(s), dwelling unit(s), common area(s), and appurtenances of the property located at the above-mentioned address on _____ [date/s].

Based on my inspection of this property on such date/s, I find that it is safe to occupy for residential purposes in its present condition. In connection with my inspection/s of this property, I observed nothing that indicates or suggests that the property in its present condition poses a hazard to life, health, or public safety.

I have completed the STR checklist form provided for this property by the City of Boerne. I have noted on the form any deficiencies (violations), concerns, or suspect conditions for which I recommend additional action or further investigation.

Should the form I completed for this property's inspection or reinspection indicate deficiencies that I have noted remain uncorrected, my signature here is intended to certify to the City of Boerne that I believe this property, nevertheless, is safe to occupy despite the uncorrected conditions I have noted on my form.

I understand and intend that the City of Boerne rely on this certification by me of the safety of this property for residential use as short-term lodging by the public in deciding whether to approve the property owner's application for a license to operate this property in its present condition for a Short-Term Rental use.

_____ (signature), _____ (date),

_____ (TREC or ICC license number), _____ (expire date)