



Code Enforcement Bureau
 14050 Olympic Drive
 Clearlake, CA 95422
 (707) 994-8251 x309
 www.clearlake.ca.us

PROPERTY INSPECTION REPORT

VACANT COMMERCIAL BUILDING PROGRAM

Registration Type:

Initial Monthly – Month: _____ Quarterly – Period: _____

SUBJECT PROPERTY

Address: _____ Date/Time of Inspection: _____

INSPECTOR

Name (First, Middle, Last): _____ Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

GENERAL

Vacant Signage (9-5.4 CMC): Yes No Electric Service: Yes No Water Service: Yes No Alarm System: Burglar Fire

Remarks: _____

EXTERIOR

Boarded Windows or Doors: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
All Doors in Good, Working Condition & Locked: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
All Windows in Good, Working Condition & Locked: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Functional Lighting at Building Entrances/Exits: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Landscaping and Plant Material in Good Condition: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No Landscaping/Plants	Remarks:
Building Paint and Finish in Good Condition: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Graffiti on Premises or Building(s): <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Trash, Litter or Debris: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Overgrown or Hazardous Vegetation: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Unsecured Electrical Panel or Related Hazard: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Deteriorated Parking Surfaces/Driveways (10-1.6 bb CMC): <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:

Storage of Vehicles or Equipment: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Any Other Public Nuisance (10-1.6 CMC) <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
General Description of Premises and Exterior of Building:	

INTERIOR

Accumulation of Rubbish or Garbage: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Broken Windows or Other Faulty Weather Protection: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Ceiling, Flooring and Wall Coverings Satisfactory Cond.: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Electrical Hazards: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Fire Suppression System Working: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Present	Remarks:
In Disrepair/Not Structurally Sound: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Plumbing Hazards: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Smoke Alarms Working? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Present	Remarks:
Storage of Chemicals: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Storage of Flammable Materials: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Surfaces Maintained in a Clean, Sanitary Manner: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:
Water Leaks/Standing Water: <input type="checkbox"/> Yes <input type="checkbox"/> No	Remarks:

General Description of Interior of Building:

REQUIRED PHOTOS

- Exterior Premise:** Photos of the subject property, including parking areas, driveways and landscaping.
- Building Exterior:** Photos of all sides of the subject building.
- Required Signage:** Photo showing required posted vacant building signage.
- Building Interior:** Photos showing interior of building with close-up photos of any hazards identified.

AFFIDAVIT OF INSPECTION

The undersigned hereby attests to the above information as accurate as of the date of the inspection. Any falsification may result in the denial or revocation of registration for a vacant building as well as disqualification from conducting other vacant commercial building inspections as part of the registration program.

Signature of Inspector

Date

Printed Name

Submit completed form to:
Code Enforcement Bureau
Clearlake Police Department
14050 Olympic Dr.
Clearlake, CA 94542