**Preventive Maintenance Checklist**

Property Name: Date:

Building Number or Grounds Area:

Describe the building’s or grounds area’s condition by category listed below (e.g., good, needs paint, tread broken, etc.). Preventive maintenance of this building and/or grounds area should be conducted a minimum of every 180 calendar days. Include this checklist with the property preventive maintenance file.

| Exterior Checklist |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Category** | **Location** |  | **Condition** |  | **Action Taken/Required** |
| Sidewalks |  |  |  |  |  |
| Stairs/Rail |  |  |  |  |  |
| Balconies |  |  |  |  |  |
| Stair Treads |  |  |  |  |  |
| Patio/Fences |  |  |  |  |  |
| Dumpster |  |  |  |  |  |
| Perimeter |  |  |  |  |  |
| Pool/Gates |  |  |  |  |  |
| Mailboxes |  |  |  |  |  |
| Gutters/Downspouts |  |  |  |  |  |
| Siding |  |  |  |  |  |
| Brick Veneer |  |  |  |  |  |
| Fascia/Soffit |  |  |  |  |  |
| Common Water |  |  |  |  |  |
| Plumbing Clean-Out Caps |  |  |  |  |  |
| Sewer Treatment |  |  |  |  |  |
| Paving |  |  |  |  |  |
| Gutters |  |  |  |  |  |
| Roof |  |  |  |  |  |

Comments:

Checklist Completed By: Date:

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