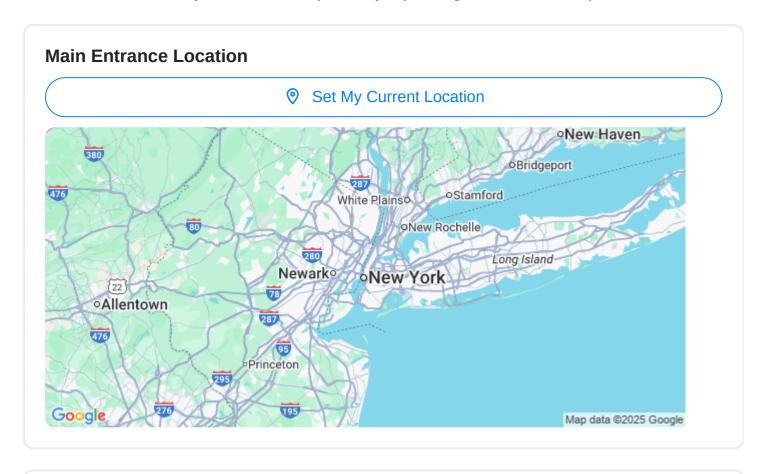


# Accessibility Compliance Checklist for Rental Properties

### **Exterior Access & Parking**

Evaluates accessibility of entrances, pathways, parking areas, and ramps.



#### **Number of Accessible Parking Spaces**

Enter a number...

#### **Accessible Parking Space Slope (%)**

Enter a number...

Accessible Route to Entrance (if applicable)
Ramp
Level Surface
Elevator
None
Ramp Slope (%)
Enter a number
Date of Last Exterior Access Inspection
Enter date
Comments/Observations Regarding Exterior Access
Write something
Common Areas
Assesses accessibility of hallways, lobbies, laundry rooms, and other shared spaces.
Hallway Width (feet)
Enter a number

Ramp Slope (%)  ☐ Compliant (≤ 1:12)  ☐ Non-Compliant ( > 1:12)
Accessible Features Present (Select all that apply)  Accessible Elevators  Accessible Laundry Facilities  Accessible Waste Receptacles  Tactile Signage  None
Detailed Observations/Deficiencies  Write something
Date of Last Inspection  Enter date
Area Lighting Adequacy  Adequate Insufficient Needs Improvement

## **Accessible Units**

Verifies features of designated accessible units according to accessibility standards (e.g., width of doorways, accessible bathrooms).

Accessible Unit Number	
Enter a number	
Accessible Unit Type (e.g., Adaptable, Hearing Accessible,  Adaptable	Visually Accessible)
Hearing Accessible	
☐ Visually Accessible	
Other	
Doorway Width (inches)	
Enter a number	
Bathroom Sink Height (inches)	
Enter a number	
Grab Bar Installation (Bathroom)	
Installed per Standards	
Needs Adjustment	
Not Installed	
Detailed Accessibility Features Description	
Write something	

Enter date	
oors and Ha	ardware
	er handles, accessible locks, and clear maneuvering space.
,	
Door Width (inches	)
Enter a number	
Door Handle Type	
Door Handle Type  Lever	
Knob	
Accessible Lever	
Door Closing Spee	1
Slow Closing	-
Standard	
Fast	
Notes on Door One	ration (e.g., any sticking or difficulty)
Write something	

Threshold Height (inches)  0 0.5 1 Greater than 1
Photo of Door Hardware  ① Upload File
Bathrooms Inspects grab bars, accessible toilets, accessible sinks, and shower controls.
Toilet Height (inches)
Enter a number
Sink Clearance (inches)  Enter a number
Litter a number
Grab Bar Height (inches - Seat)  Enter a number
Grab Bar Mounting Type  Wall Mounted Floor Supported

Shower/Tub Type
Roll-in Shower
Transfer Bench Accessible Tub
Standard Tub/Shower
Notes on Bathroom Accessibility
Write something
Date of Last Bathroom Accessibility Review  Enter date
itchens aluates counter heights, clearances, appliance accessibility, and accessible sinks.
Counter Height (inches)
Enter a number
Clearance Beneath Sink (inches)  Enter a number

Sink Lever/Handle Type Lever Motion Sensor Traditional (requires two hands)
Accessible Appliance Features  Front Controls Side Controls Pull-out Shelves Easy-Reach Handles
Notes on Appliance Accessibility  Write something
Range/Oven Controls  Front Controls  Side Controls  Remote/Voice Controlled
Date of Appliance Accessibility Review  Enter date

## **Lighting & Signage**

Ensures adequate lighting and accessible signage throughout the property.

Adequacy of Exterior Lighting?  Yes - Sufficient Lighting  No - Insufficient Lighting  Needs Further Assessment
Average Foot-Candle Reading (Exterior)  Enter a number
Signage Visibility (Exterior)  Excellent - Easily Visible  Good - Mostly Visible  Fair - Requires Closer Inspection  Poor - Difficult to See
Photo Documentation of Signage (Exterior)  L Upload File
Braille Signage Present?  Yes  No  Not Applicable
Description of any Signage Issues (Exterior)  Write something

# **Emergency Systems**

Checks accessibility of emergency alarms and notification systems.

Type of Emergency Notification System  Audible Alarms Visual Strobe Lights SMS/Text Alerts Email Notifications Combination System
Number of Audible Alarm Speakers  Enter a number
Number of Visual Strobe Lights  Enter a number
Last System Test Date  Enter date
Typical System Test Time
Battery Backup Status    Functional   Needs Replacement   Not Applicable

ocumentation & Re		
Date of Last Accessibility Asse		
Enter date		
Summary of Assessment Findir	s & Recommendations	
Write something		
Accessibility Assessment Repo	(PDF)	
Number of Accessible Units Av	lable	
Enter a number		

**Comments/Observations** 

Compliance Standard Followed
ADA Standards for Accessible Design
Fair Housing Act Accessibility Guidelines
Local Accessibility Code
Other (Specify in Long Text)
Notes on any deviations from standard practices
Notes on any deviations from standard practices
Write something
Date of Last Remediation Effort (if applicable)
Enter date
Supporting Documentation for Remediation (e.g., Invoices, Permits)
♣ Upload File