

CITY OF  
ROANOKE   
REDEVELOPMENT  
AND HOUSING  
AUTHORITY

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*Partners in Progress*

October 13, 2016

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing – Real Estate Assessment Center  
Attn: PASS Technical Reviews and Database Adjustments  
550 12<sup>th</sup> Street S.W., Suite 100  
Washington, D.C. 20410

To Whom It May Concern:

I am writing to request technical review, in accordance with 24 CFR 902.68, regarding inspection report number 581644, filed on October 6, 2016 and released on October 12, 2016, for Morningside Manor, AMP 208. The inspection report included a deduction of 8.33 points for Fire Protection missing/damaged/expired extinguishers. Total points deducted 8.33. We believe this is a material error which, if corrected, will result in a significant improvement in the property's overall score. Supporting documentation is enclosed for your review.

Thank you for your assistance in this matter. Please contact me at (540) 983-9241, ggoh@rkehousing.org, or David Bustamante at (540) 983-9265, dbustamante@rkehousing.org, if you need additional information.

Sincerely,



Glenda Edwards Goh  
Executive Director

Enclosures

cc: Catherine Lamberg, PIH Director, HUD Richmond Field Office



## Office of Public Housing Real Estate Assessment Center Request for Technical Review (TR) or Database Adjustment (DBA) of a Physical Inspection Score

|                              |                   |                            |                   |
|------------------------------|-------------------|----------------------------|-------------------|
| <b>Inspection Number</b>     | 581644            | <b>Project ID Number</b>   | VA011000208       |
| <b>Inspection Date</b>       | 10/06/2016        | <b>Address of Property</b> | 1020 13 street NE |
| <b>Project/Property Name</b> | Morningside Manor | <b>City, State, Zip</b>    | ROANOKE VA 24013  |
| <b>Date of Request</b>       | 10/12/2016        | <b>Contact Name</b>        | David Bustamante  |
| <b>TR or DBA?</b>            | TR                |                            |                   |

**ISSUE #**

| Location<br>(Inspectable Area) | Building Number | Unit Number |
|--------------------------------|-----------------|-------------|
| BUILDING                       | FLOOR 1         |             |

Documentation Type:



**Item and Deficiency/Observation**

Fire protection, BS- Missing/damaged/expired extinguishers( Fire Protection)

**Reason for Request**

Per the attached photos of the fire extinguishers on the 1st floor of Morningside Manor there are no missing/damaged/expired extinguishers, the inspector made a comment as to the date and it was explained to him that they would be serviced one year from the year they were last serviced. The deficiency cited and the points deducted are not a factual representation of what was present during the REAC Inspection. RRHA requests that the 8.33 points deducted be added to our score and a rescore be conducted.

**Additional Comments**

**ISSUE #**

| Location<br>(Inspectable Area) | Building Number | Unit Number |
|--------------------------------|-----------------|-------------|
|                                |                 |             |

Documentation Type:



**Item and Deficiency/Observation**

**Reason for Review**

**Additional Comments**

**ISSUE #**

| Location<br>(Inspectable Area) | Building Number | Unit Number |
|--------------------------------|-----------------|-------------|
|                                |                 |             |

Documentation Type:



**Item and Deficiency/Observation**

**Reason for Review**

**Additional Comments**

CITY OF ROANOKE REDEVELOPMENT AND  
HOUSING AUTHORITY

TECHNICAL REVIEW REQUEST -INSPECTION  
NUMBER 581644 – MORNINGSIDE  
MANOR

FIRE PROTECTION,  
MISSING/DAMAGED/EXPIRED  
EXTINGUISHERS (FIRE PROTECTION)

8.33 POINT DEDUCTION

SUPPORTING DOCUMENTS

DO NOT REMOVE  
By Order Of  
The State  
Fire Marshal

FOR  
CITY, STATE  
AND  
FIRE INSURANCE  
INSPECTION

FULL WT. \_\_\_\_\_



**GREER'S  
SUPPLY  
COMPANY**  
540.265.0555

2401 A PLANTATION RD • ROANOKE VA 24012

LICENSE NO. 2701 016140A

SERVICED BY [Signature]

- |   |  |
|---|--|
| <input type="checkbox"/> ABC (DRY CHEM) | <input type="checkbox"/> WATER         |
| <input type="checkbox"/> BC (DRY CHEM)  | <input type="checkbox"/> LOADED STREAM |
| <input type="checkbox"/> CARBON DIOXIDE | <input type="checkbox"/> PURPLE K (PK) |
| <input type="checkbox"/> AFFF/FFFP      | <input type="checkbox"/> HALOTRON      |
| <input type="checkbox"/> FE-36          | <input type="checkbox"/> HALON 1211    |
| <input type="checkbox"/> CLASS D        | <input type="checkbox"/> WET CHEM      |
| <input type="checkbox"/> WATER MIST     | <input type="checkbox"/> INERGEN       |
| <input type="checkbox"/> HALON 1301     | <input type="checkbox"/> CLEAN AGENT   |
| <input type="checkbox"/> FE-13          | <input type="checkbox"/> FM200         |
| <input type="checkbox"/> SYSTEM         |  |



**VOID 1 YR. FROM MO. PUNCHED; SYSTEMS 6 MOS.**

| SERVICED | NEW  |      |       |      |      |      |     |      |      |      |      |  | RECHARGED |
|----------|------|------|-------|------|------|------|-----|------|------|------|------|--|-----------|
| DEC.     | NOV. | OCT. | SEPT. | AUG. | JULY | JUNE | MAY | APR. | MAR. | FEB. | JAN. |  |           |

**2015 / 2016 / 2017**

CHARGE IMMEDIATELY  
AFTER ANY USE  
TO AN AUTHORIZED SERVICE  
STATION FOR RECHARGE WITH  
UNDER MANUAL INSTRUCTIONS  
WHEN EMERGENCY USE IS  
NECESSARY. PROFESSIONAL  
PERSONNEL MAY ONLY RECHARGE  
EXTINGUISHERS.  
DO NOT REMOVE THE VALVE  
ASSSEMBLY.  
ALL OILS AND GREASES  
NECESSARY TO MAINTAIN  
ALL THROUGHOUT THE  
LIFE OF THE EXTINGUISHER.  
CONTAINS 1.5 LBS. OF  
NET WT. OF DRY CHEMICAL  
HALON 1211.  
DO NOT REMOVE THE VALVE  
ASSSEMBLY.  
DO NOT REMOVE THE VALVE  
ASSSEMBLY.

DO NOT REMOVE  
By Order Of  
The State  
Fire Marshal

FOR  
CITY, STATE  
AND  
FIRE INSURANCE  
INSPECTION

FULL WT. \_\_\_\_\_



# GREER'S SUPPLY COMPANY

**540.265.0555**

2401 A PLANTATION RD - ROANOKE VA 24012

LICENSE NO. 2701 016140A

SERVICED BY *[Signature]*

- |   |  |
|---|--|
| <input type="checkbox"/> ABC (DRY CHEM) | <input type="checkbox"/> WATER         |
| <input type="checkbox"/> BC (DRY CHEM)  | <input type="checkbox"/> LOADED STREAM |
| <input type="checkbox"/> CARBON DIOXIDE | <input type="checkbox"/> PURPLE K (PK) |
| <input type="checkbox"/> AFFF/FFFP      | <input type="checkbox"/> HALOTRON      |
| <input type="checkbox"/> FE-36          | <input type="checkbox"/> HALON 1211    |
| <input type="checkbox"/> CLASS D        | <input type="checkbox"/> WET CHEM      |
| <input type="checkbox"/> WATER MIST     | <input type="checkbox"/> INERGEN       |
| <input type="checkbox"/> HALON 1301     | <input type="checkbox"/> CLEAN AGENT   |
| <input type="checkbox"/> FE-13          | <input type="checkbox"/> FM200         |
| <input type="checkbox"/> SYSTEM         |  |



**VOID 1 YR. FROM MO. PUNCHED; SYSTEMS 6 MOS.**

SERVICED | NEW | RECHARGED

|      |      |      |       |      |      |      |     |      |      |      |      |
|------|------|------|-------|------|------|------|-----|------|------|------|------|
| DEC. | NOV. | OCT. | SEPT. | AUG. | JULY | JUNE | MAY | APR. | MAR. | FEB. | JAN. |
|------|------|------|-------|------|------|------|-----|------|------|------|------|



# 2015 / 2016 / 2017

**CONTRACT NO: 900-1302-1-7**

**CONTRACT BETWEEN THE  
CITY OF ROANOKE REDEVELOPMENT & HOUSING AUTHORITY  
AND  
GREER SUPPLY COMPANY**

Be it understood that as of this 1st day of April, 2013, the City of Roanoke Redevelopment & Housing Authority (hereinafter called "RRHA") hereby enters into this Contract with **Greer Supply Company** (hereinafter called the "Contractor") for **the not to exceed** amount of Twenty Thousand Eight Hundred and Sixty Four dollars and 25/100 (\$20,864.25), as more particularly specified in **the Quote Form submitted by the Contractor, dated March 5, 2013 for the RFQ Inspection, Servicing, Replacement and Repair of Fire Extinguishers at Lansdowne Park, Villages at Lincoln, Hunt Manor, Melrose Towers, Morningside Manor, Bluestone Park, Indian Rock Village and RRHA Whiteside Warehouse** and subject to the conditions herein contained.

The term of this agreement shall be from **April 1, 2013 – March 31, 2018**

**1.0 Definitions**

- 1.1 "RRHA" and "PHA," as referenced in this Contract, mean the City of Roanoke Redevelopment & Housing Authority.
- 1.2 "HUD" means the U.S. Department of Housing and Urban Development.
- 1.3 "Contract" means this Contract as entered into between RRHA and the Contractor, and includes, and incorporates herein, all terms and conditions as set forth in
  - i) RRHA Special Conditions
  - ii) HUD 5370 C Section I or II (whichever is applicable)

The Contract shall also include all formal changes to any of the above-referenced documents made by addendum, change order, bulletin or other written modification, which terms and conditions are incorporated herein by reference.

- 1.4 “Contractor” means, for the purpose of this Contract, the person or other entity entering into the Contract with RRHA to perform, or be responsible for the performance of, all of the work required under the Contract.
- 1.5 “Contracting Officer” means the person authorized to execute contracts for RRHA.
- 1.6 “Contract Administrator” means the person who will administer the contract for RRHA.

## **2.0 Scope of Work**

- 2.1 The Contractor agrees to provide all material and labor to perform all work required under the Contract and described in the “**RFQ Inspection, Servicing, Replacement and Repair of Fire Extinguishers**” and shall do all things, and take all actions, as required by this Agreement, in strict compliance with the Contract, as defined herein.

## **3.0 Billing and Payment**

- 3.1 The Contractor shall submit an invoice for payment on a monthly basis. Payment shall be made to the Contractor, less applicable withholdings, within thirty (30) days, provided all work for the month has been completed satisfactorily, based on the Contract Administrator’s accepted verification of documents, in accordance with the specifications of this Contract. Invoices shall detail the services rendered each month. All support documentation shall accompany the invoice.
- 3.2 All invoices and statements shall be identified by location of property and services rendered, and shall be submitted to:

City of Roanoke Redevelopment & Housing Authority  
Attention: Accounts Payable  
P.O. Box 6359  
2624 Salem Turnpike, NW  
Roanoke, VA 24017

- 3.3 Contract number, and site location should appear on the invoices to avoid delay in payment.

#### **4.0 Laws and Regulations**

The Contractor shall at all times observe and comply with laws, ordinances, regulations, and codes of the federal, state, county and other local government agencies, which may in any manner affect the performance of the Contractor.

#### **5.0 Indemnification**

Contractor expressly agrees to indemnify and hold harmless RRHA, its directors, officers, and employees from all losses, costs, damages and/or expenses with respect to all demands, claims, suits, and/or judgments for personal and bodily injuries, including death, to any person (including but not limited to third parties, employees of RRHA, employees of Contractor or any Subcontractor and their dependents or personal representatives) or damage to property or any other cause of action arising by reason of any act or willful omission or negligence, either by Contractor or by Subcontractors or the employees or agents of either of them. Contractor further agrees to defend RRHA, to reimburse RRHA for any reasonable cost and expense, including attorney's fees, which RRHA may incur or be put to for the defense from any such claim.

#### **6.0 Contractor Not an Agent**

In the interpretation of this Agreement and the relations between Contractor and/or Subcontractor and RRHA, neither Contractor nor Subcontractor shall be held or deemed in any way to be an agent, employee or official of RRHA.

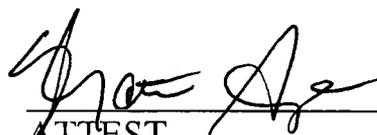
#### **7.0 Order of Precedence**

In the event of a conflict between clauses in this Contract and the Scope of Services, the Contract shall prevail. In the event of a conflict between the Contract and any applicable state or local law or regulation, the state or local law or regulation shall prevail.

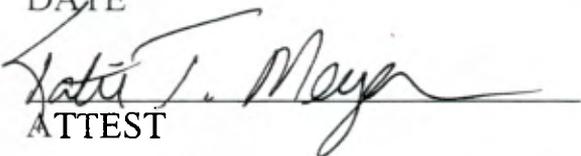
**8.0 Subcontracting**

The Contractor shall not subcontract any of the work unless specifically authorized, in advance and in writing, by RRHA.

IN WITNESS THEREOF: The parties hereto have caused this instrument to be executed as of the day and year first written above.

  
\_\_\_\_\_  
ATTEST

4/1/13  
\_\_\_\_\_  
DATE

  
\_\_\_\_\_  
ATTEST

4/1/13  
\_\_\_\_\_  
DATE

CONTRACTOR

BY:   
\_\_\_\_\_

TITLE: GENERAL MANAGER

CITY OF ROANOKE REDEVELOPMENT  
AND HOUSING AUTHORITY

BY:   
\_\_\_\_\_  
Glenda Edwards

TITLE: Executive Director



*Partners in Progress*

## QUOTATION

Roanoke Redevelopment and Housing Authority (RRHA) is seeking responsible and qualified firms to provide **“Inspection, Servicing, Replacement and Repair of Fire Extinguishers”** for VA 11-1 Lansdowne Park, VA 11-2 Villages at Lincoln, VA 11-5 Hunt Manor, VA 11-6 Melrose Towers, VA 11-7 Jamestown Place, VA 11-8 Morningside Manor, VA 11-9 Bluestone Park, VA 11-10 Indian Rock Village and RRHA Whiteside Warehouse.

To be considered, your quote must be received by **March 8, 2013 at 4:00 P.M.** local prevailing time at 2624 Salem Turnpike, NW or email to [dbustamante@rkehousing.org](mailto:dbustamante@rkehousing.org)

Comments on Scope of Services or other provisions in this Request for Quotes must be submitted in writing to David Bustamante at 2624 Salem Turnpike, NW, Roanoke, VA 24017, faxed to 540-983-9229 or by email to [dbustamante@rkehousing.org](mailto:dbustamante@rkehousing.org), by **March 1, 2013 at 2:00PM** local prevailing time.

Sign and submit Section 3 Self Certification for Business Concerns claiming Section 3 preference with Quotation. If not applicable write N/A on certification form.

While RRHA must promote full and open competition among prospective offerors, small business enterprises, Section 3 businesses, Minority, Service-Disabled Veteran, and Women-Owned business enterprises are encouraged to submit quotes as well as all other enterprises. Section 3 businesses (only) are also eligible for certain preferences (See Section 3 Information and Forms attached).

If the quotation is not within funding limits for this project, all quotations may be rejected. RRHA reserves the right to reject any or all quotations and to waive informalities in the quotation process. Unless all quotations are rejected, the award will be made to the lowest responsive and responsible offeror, subject to applicable regulations.

All quotes shall be signed and dated by a qualified representative of the Contractor.

The undersigned offers to conduct the work in accordance with the scope of services as stated by RRHA.

All invoices or other related documents shall clearly indicate RRHA's contract order number.

RRHA does not discriminate against faith-based organizations in accordance with the Code of Virginia 2.2-4343-1 or on the basis of race, color, sex, age, religion, origin, disability, veteran status, or union affiliations in any of its federally assisted program and activities TDD within Virginia 711 outside of Virginia 1-800-828-1120.

# Request for Quote

## Inspection, Servicing, Replacement and Repair of Fire Extinguishers Quote Form

Please note that the quantities in this Request for Quote are estimates and are given for the purpose of quote evaluation. They do not indicate the actual quantity that may be requested since such volume will depend upon requirements, which develop during the contract period. There is no guarantee of any minimum or maximum number. RRHA reserves the right to increase and/or decrease the quantity.

The undersigned offers to provide service in accordance with the scope of work for Inspection, Servicing, Replacement and Repair of Fire Extinguishers

Total Amount shall be all inclusive. Submit a cost for each Line Item indicated. Total Base Quote amount shall be the sum of all Line Item amounts. In the event of a mathematical error, the Line Item Amounts shall be used to determine Total Base Quote amount.

### Line Item #1: All ABC Dry Chemical Extinguisher Inspection & Tagging 166 estimated per year

|    |    |               |  |
|----|----|---------------|--|
| A. | \$ | <u>498.00</u> | 1 <sup>st</sup> Yr Cost Inspection & Tagging (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>498.00</u> | 2nd Yr Cost Inspection & Tagging (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>498.00</u> | 3rd Yr Cost Inspection & Tagging (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>498.00</u> | 4th Yr Cost Inspection & Tagging (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>498.00</u> | 5th Yr Cost Inspection & Tagging (Include In Grand Total For 5th Year)                         |

### Line Item #2: Recharge 2 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |                         |  |
|----|----|-------------------------|--|
| A. | \$ | <u><del>65</del> 10</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>10</u>               | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>10</u>               | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>10</u>               | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>10</u>               | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #3: Recharge 2.5 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |              |  |
|----|----|--------------|--|
| A. | \$ | <u>69.75</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>69.75</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>69.75</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>69.75</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>69.75</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #4: Recharge 3 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |                         |  |
|----|----|-------------------------|--|
| A. | \$ | <u><del>65</del> 10</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>10</u>               | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>10</u>               | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>10</u>               | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>10</u>               | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

# Request for Quote

## Inspection, Servicing, Replacement and Repair of Fire Extinguishers Quote Form (con't)

### Line Item #5: Recharge 5 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |                  |  |
|----|------------------|--|
| A. | \$ <u>109.75</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>109.75</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>109.75</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>109.75</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>109.75</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #6: Recharge 10 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |                  |  |
|----|------------------|--|
| A. | \$ <u>174.75</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>174.75</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>174.75</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>174.75</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>174.75</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #7: Recharge 16 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |             |  |
|----|-------------|--|
| A. | \$ <u>5</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>5</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>5</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>5</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>5</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #8: Recharge 20 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |                  |  |
|----|------------------|--|
| A. | \$ <u>274.75</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>274.75</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>274.75</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>274.75</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>274.75</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #9: Hydrostatic Test ABC Dry Chemical Extinguisher 15 estimated per year

|    |               |  |
|----|---------------|--|
| A. | \$ <u>450</u> | 1 <sup>st</sup> Yr Cost Hydrostatic Test (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>450</u> | 2nd Yr Cost Hydrostatic Test (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>450</u> | 3rd Yr Cost Hydrostatic Test (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>450</u> | 4th Yr Cost Hydrostatic Test (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>450</u> | 5th Yr Cost Hydrostatic Test (Include In Grand Total For 5th Year)                         |

### Line Item #10: 6 Year Maintenance ABC Dry Chemical Extinguisher 15 estimated per year

|    |                  |  |
|----|------------------|--|
| A. | \$ <u>314.25</u> | 1 <sup>st</sup> Yr Cost 6 Year Maintenance (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ <u>314.25</u> | 2nd Yr Cost 6 Year Maintenance (Include In Grand Total For 2nd Year)                         |
| C. | \$ <u>314.25</u> | 3rd Yr Cost 6 Year Maintenance (Include In Grand Total For 3rd Year)                         |
| D. | \$ <u>314.25</u> | 4th Yr Cost 6 Year Maintenance (Include In Grand Total For 4th Year)                         |
| E. | \$ <u>314.25</u> | 5th Yr Cost 6 Year Maintenance (Include In Grand Total For 5th Year)                         |

# Request for Quote

## Inspection, Servicing, Replacement and Repair of Fire Extinguishers Quote Form (con't)

### Line Item #11: CO2 Extinguisher Inspection & Tagging 5 estimated per year

|    |    |           |  |
|----|----|-----------|--|
| A. | \$ | <u>15</u> | 1 <sup>st</sup> Yr Cost Inspection & Tagging (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>15</u> | 2nd Yr Cost Inspection & Tagging (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>15</u> | 3rd Yr Cost Inspection & Tagging (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>15</u> | 4th Yr Cost Inspection & Tagging (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>15</u> | 5th Yr Cost Inspection & Tagging (Include In Grand Total For 5th Year)                         |

### Line Item #12: CO2 Extinguisher Recharge 3 estimated per year

|    |    |            |  |
|----|----|------------|--|
| A. | \$ | <u>150</u> | 1 <sup>st</sup> Yr Cost Recharge (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>150</u> | 2nd Yr Cost Recharge (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>150</u> | 3rd Yr Cost Recharge (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>150</u> | 4th Yr Cost Recharge (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>150</u> | 5th Yr Cost Recharge (Include In Grand Total For 5th Year)                         |

### Line Item #13: Hydrostatic Test CO2 Fire Extinguisher 3 estimated per year

|    |    |            |  |
|----|----|------------|--|
| A. | \$ | <u>150</u> | 1 <sup>st</sup> Yr Cost Hydrostatic Test (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>150</u> | 2nd Yr Cost Hydrostatic Test (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>150</u> | 3rd Yr Cost Hydrostatic Test (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>150</u> | 4th Yr Cost Hydrostatic Test (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>150</u> | 5th Yr Cost Hydrostatic Test (Include In Grand Total For 5th Year)                         |

### Line Item #14: H2O Extinguisher Inspection & Tagging 1 estimated per year

|    |    |          |  |
|----|----|----------|--|
| A. | \$ | <u>3</u> | 1 <sup>st</sup> Yr Cost Inspection & Tagging (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>3</u> | 2nd Yr Cost Inspection & Tagging (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>3</u> | 3rd Yr Cost Inspection & Tagging (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>3</u> | 4th Yr Cost Inspection & Tagging (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>3</u> | 5th Yr Cost Inspection & Tagging (Include In Grand Total For 5th Year)                         |

### Line Item #15: Replacement of 2 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |           |   |
|----|----|-----------|---|
| A. | \$ | <u>10</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>10</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>10</u> | 3rd Yr Cost Replacement (include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>10</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>10</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #16: Replacement of 2.5 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |               |   |
|----|----|---------------|---|
| A. | \$ | <u>164.75</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>164.75</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>164.75</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>164.75</u> | 4th Yr Cost Replacement (include In Grand Total For 4th Year)                         |
| E. | \$ | <u>164.75</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

# Request for Quote

## Inspection, Servicing, Replacement and Repair of Fire Extinguishers Quote Form (con't)

### Line Item #17: Replacement of 3 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |           |   |
|----|----|-----------|---|
| A. | \$ | <u>10</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>10</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>10</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>10</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>10</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #18: Replacement of 5 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |               |   |
|----|----|---------------|---|
| A. | \$ | <u>277.50</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>297.50</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>317.50</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>337.50</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>357.50</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #19: Replacement of 10 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |               |   |
|----|----|---------------|---|
| A. | \$ | <u>392.60</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>412.60</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>432.60</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>452.60</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>472.60</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #20: Replacement of 16 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |           |   |
|----|----|-----------|---|
| A. | \$ | <u>10</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>10</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>10</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>10</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>10</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #21: Replacement of 20 lb ABC Dry Chemical Extinguisher 5 estimated per year

|    |    |               |   |
|----|----|---------------|---|
| A. | \$ | <u>598.75</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>618.75</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>638.75</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>658.75</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>678.75</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

### Line Item #22: Replacement of CO2 Extinguisher 1 estimated per year

|    |    |               |   |
|----|----|---------------|---|
| A. | \$ | <u>200.00</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>220.00</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>240.00</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>260.00</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>280.00</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

# Request for Quote

## Inspection, Servicing, Replacement and Repair of Fire Extinguishers Quote Form (con't)

Line Item #23: Replacement of H2O Extinguisher 1 estimated per year

|    |    |           |   |
|----|----|-----------|---|
| A. | \$ | <u>75</u> | 1 <sup>st</sup> Yr Cost Replacement (Include In Grand Total For 1 <sup>st</sup> Year) |
| B. | \$ | <u>75</u> | 2nd Yr Cost Replacement (Include In Grand Total For 2nd Year)                         |
| C. | \$ | <u>75</u> | 3rd Yr Cost Replacement (Include In Grand Total For 3rd Year)                         |
| D. | \$ | <u>75</u> | 4th Yr Cost Replacement (Include In Grand Total For 4th Year)                         |
| E. | \$ | <u>75</u> | 5th Yr Cost Replacement (Include In Grand Total For 5th Year)                         |

Line Item # 24: Grand Total 1<sup>st</sup> Year Cost Inspection, Servicing, Replacement and Repair of Fire Extinguishers (Sum of ALL Line Items A 1-23): \$ 3972.85 (Include Total For Line Item #24 In Grand Total For Fire Extinguisher Services)

Line Item # 25: Grand Total 2nd Year Cost Inspection, Servicing, Replacement and Repair of Fire Extinguishers (Sum of ALL Line Items B 1-23): \$ 4072.85 (Include Total For Line Item #25 In Grand Total For Fire Extinguisher Services)

Line Item # 26: Grand Total 3rd Year Cost Inspection, Servicing, Replacement and Repair of Fire Extinguishers (Sum of ALL Line Items C 1-23): \$ 4172.85 (Include Total For Line Item #26 In Grand Total For Fire Extinguisher Services)

Line Item # 27: Grand Total 4th Year Cost Inspection, Servicing, Replacement and Repair of Fire Extinguishers (Sum of ALL Line Items D 1-23): \$ 4272.85 (Include Total For Line Item #27 In Grand Total For Fire Extinguisher Services)

Line Item # 28: Grand Total 5th Year Cost Inspection, Servicing, Replacement and Repair of Fire Extinguishers (Sum of ALL Line Items E 1-23): \$ 4372.85 (Include Total For Line Item #28 In Grand Total For Fire Extinguisher Services)

Grand Total for Fire Extinguisher Services for Five (5) Years  Specified (Sum of Line Items 24,25,26,27,28): \$ 20,864.25

Confirm Receipt of any Addenda Issued for this Quote: Addendum # \_\_\_\_\_ Date: \_\_\_\_\_

Quote effective for: 30 Days (Min 30 days) Payment Terms: 30 (Min 30 days)

To be considered, your quote must be received by March 8, 2013 at 4:00 P.M. local prevailing time at 2624 Salem Turnpike, NW or email to [dbustamante@rkehousing.org](mailto:dbustamante@rkehousing.org) or Fax Number: (540) 983-9229

Date 3-5-13

Firm GLEER'S SUPPLY CO.

Signature [Signature]

Address 2401-A PLANTATION ROAD

Title GENERAL MANAGER

ROANOKE VA 24012

Telephone No. 540-265-0555

Fax No. 540-265-0554

State Contractor's License No. (If applicable) 2701016140 Expiration date 12-31-14

Federal Employer Identification No. 54-0848058

## Inspection Summary Report (POA) for Inspection #581644

### Inspection Snapshot

|                               |                   |                             |                     |
|-------------------------------|-------------------|-----------------------------|---------------------|
| <b>Inspection ID:</b>         | 581644            | <b>Inspection Time:</b>     | 08:13 AM - 11:49 AM |
| <b>Inspection Start Date:</b> | 10/06/2016        | <b>Inspection End Date:</b> | 10/06/2016          |
| <b>Property ID:</b>           | VA011000208       | <b>Property Type:</b>       | Public Housing      |
| <b>Property Name:</b>         | MORNINGSIDE MANOR |                             |                     |
| <b>Inspection State:</b>      | Successful        | <b>Score:</b>               | 67b                 |

## Inspection Summary Report (POA) for Inspection #581644

### Property Profile

**Property Name:** MORNINGSIDE MANOR  
**Scattered Site?** No **Multiple Site?** No  
**Address Line 1:** 1020 13TH Street SE  
**Address Line 2:**  
**City:** ROANOKE **State:** VA  
**ZIP:** 24013 **Extension:** 9511  
**Phone:** (540) 983-9223 **Extension:**  
**Fax:** (540) 527-1099 **Email:** dstanley@rkehousing.org

| Type         | Building |          |          | Units      |            |           |
|--------------|----------|----------|----------|------------|------------|-----------|
|              | Expected | Actual   | Sampled  | Expected   | Actual     | Sampled   |
| Residential  | 1        | 1        | 1        | 105        | 105        | 22        |
| Common       | 2        |          |          | -          | -          | -         |
| <b>Total</b> | <b>3</b> | <b>1</b> | <b>1</b> | <b>105</b> | <b>105</b> | <b>22</b> |

### Occupancy Information

| No. of Occupied Units | Occupancy Rate | Inspect Vacant Units |
|-----------------------|----------------|----------------------|
| 103                   | 98%            | No                   |

**Comments** tac 1968101 early start, tac profile correction, tac 1968122 bed bugs bld 1 units 403, 409, 420, 520, 601, 606

## Inspection Summary Report (POA) for Inspection #581644

### Participant Profile

#### Management Agent [Primary Contact / Present During Inspection]

Name (F, MI, L): David Bustamante  
Organization: City of Roanoke Redev & Housing Authority  
Address Line 1: 2624 Salem Turnpike NW  
Address Line 2:  
City: Roanoke State: VA  
ZIP: 24017 Extension:  
Phone: (540) 983-9281 Extension:  
Fax: (540) 983-9229 Email: dbustamante@rkehousing.org

#### Executive Director [Not Present During Inspection]

Name (F, MI, L): Glenda Edwards Goh  
Organization: City of Roanoke Redev & Housing Authority  
Address Line 1: 2624 Salem Turnpike NW  
Address Line 2:  
City: Roanoke State: VA  
ZIP: 24017 Extension:  
Phone: (540) 983-9241 Extension:  
Fax: (540) 983-9229 Email: ggoh@rkehousing.org

#### Site Manager [Present During Inspection]

Name (F, MI, L): Denise Stanley  
Organization: Morning Manor  
Address Line 1: 1020 13th St. S.E.  
Address Line 2:  
City: Roanoke State: VA  
ZIP: 24013 Extension:  
Phone: (540) 983-9223 Extension:  
Fax: (540) 527-1099 Email: dstanley@rkehousing.org

Inspection Summary Report (POA) for Inspection #581644

| Score Summary     |                 |                           |                |                |              |
|-------------------|-----------------|---------------------------|----------------|----------------|--------------|
| Area              | Possible Points | Deductions(Excluding H&S) | Pre H&S Points | H&S Deductions | Final Points |
| Site              | 14.11           | 0.00                      | 14.11          | 4.54           | 9.57         |
| Building Exterior | 16.13           | 3.60                      | 12.52          | 0.00           | 12.52        |
| Building Systems  | 21.50           | 10.48                     | 11.02          | 0.00           | 11.02        |
| Common Area       | 12.90           | 7.51                      | 5.39           | 3.63           | 1.76         |
| Unit              | 35.37           | 2.72                      | 32.64          | 0.08           | 32.57        |
| Total             | 100.00          | 24.32                     | 75.69          | 8.24           | 67.45        |

Score Version: 1

Score Date: 10/07/2016

Final Score: 67b

## Inspection Summary Report (POA) for Inspection #581644

### Health & Safety Summary

|                                   | Site | Buildings | Units | Total | Health and Safety Narrative  |
|-----------------------------------|------|-----------|-------|-------|--|
| <b>Non-Life Threatening (NLT)</b> |      |           |       |       | 1 site, 1 buildings and 22 units were inspected.   |
| Actual                            | 1    | 1         | 1     | 3     | 3 health and safety deficiencies(HSD) were observed.   |
| Projected                         | 1    | 1         | 5     | 7     |  |
| <b>Life Threatening (LT)</b>      |      |           |       |       | <u>Percentage Inspected:</u>   |
| Actual                            | 0    | 0         | 0     | 0     | Site (PIS): 100%   |
| Projected                         | 0    | 0         | 0     | 0     | Building (PIB): 100%   |
| <b>Smoke Detectors (SD)</b>       |      |           |       |       | Unit (PIU): 21%  |
| Actual                            | 0    | 0         | 0     | 0     | <u>Projected HSD:</u>  |
| Projected                         | 0    | 0         | 0     | 0     | Site = (Actual HSDS) / PIS   |
| <b>Overall</b>                    |      |           |       |       | Building = (Actual HSDB) / PIB   |
| Actual                            | 1    | 1         | 1     | 3     | Unit = (Actual HSDU) / PIU   |
| Projected                         | 1    | 1         | 5     | 7     | If all buildings and units were inspected, it is projected that a total of 7 health and safety deficiencies would apply to the property. |

## Inspection Summary Report (POA) for Inspection #581644

### Systemic Deficiencies

| Type     | Area | Item                          | Deficiency  | B/U with defects | Total B/U | %   |
|----------|------|-------------------------------|---|------------------|-----------|-----|
| Ordinary | Site | Hazards                       | HS - Sharp Edges (Hazards)                                  | 1                | 1         | 100 |
| Ordinary | BE   | Walls                         | BE- Missing/Damaged Caulking/Mortar (Walls)                 | 1                | 1         | 100 |
| Ordinary | BS   | Fire Protection               | BS- Missing/Damaged/Expired Extinguishers (Fire Protection) | 1                | 1         | 100 |
| Ordinary | BS   | Emergency Power               | BS- Auxiliary Lighting Inoperable (Emergency Power)         | 1                | 1         | 100 |
| Ordinary | CA   | Outlets/Switches/Cover Plates | CA - Missing/Broken (Outlets/Switches/ Cover Plates)        | 1                | 1         | 100 |
| Ordinary | CA   | Doors                         | CA - Damaged Hardware/Locks (Doors)                         | 1                | 1         | 100 |
| Ordinary | CA   | Walls                         | CA - Peeling/Needs Paint (Walls)                            | 1                | 1         | 100 |
| Ordinary | CA   | Windows                       | CA - Inoperable/Not Lockable (Windows)                      | 1                | 1         | 100 |
| Ordinary | CA   | Windows                       | CA - Damaged/Missing Screens (Windows)                      | 1                | 1         | 100 |
| Ordinary | CA   | Walls                         | CA - Damaged (Walls)  | 1                | 1         | 100 |
| Ordinary | CA   | Doors                         | CA - Damaged Hardware/Locks (Doors)                         | 1                | 1         | 100 |
| Ordinary | CA   | Chutes                        | CA - Damaged/Missing Components (Chutes)                    | 1                | 1         | 100 |

Note:

B/U - Indicates Buildings or Units

BE - Indicates Building Exterior

BS - Indicates Building Systems

CA - Indicates Common Areas

Capital items are repairs that generally require large cash outlays. (Items such as new roofs and new appliances)

Ordinary items are repairs that require smaller cash outlays. (Items such as light fixtures, fire extinguishers and smoke detectors)

## Inspection Summary Report (POA) for Inspection #581644

### Building/Unit Summary

| Entity   | Expected | Actual | # Inspected | # Reported Uninspectable |
|----------|----------|--------|-------------|--------------------------|
| Building | 3        | 1      | 1           | 2                        |
| Unit     | 105      | 105    | 22          | 1                        |

### Building 208 - MORNINGSIDE MANOR HIGHRISE [ Sample , Inspected ]

Address Line 1: 1020 13TH ST SE

Address Line 2:

City: ROANOKE

State: VA

Zip: 24013

Extension: 2041

| Type               | Constructed In | Floors | Expected Unit Count | Actual Unit Count |
|--------------------|----------------|--------|---------------------|-------------------|
| Elevator Structure | 1972           | 6      | 105                 | 105               |

#### Comments:

| Unit # | # Bedrooms | Occupied? | Uninspected Reason? |
|--------|------------|-----------|---------------------|
| 105    | 0 Bedroom  | Yes       |                     |
| 204    | 1 Bedroom  | Yes       |                     |
| 209    | 0 Bedroom  | Yes       |                     |
| 214    | 1 Bedroom  | Yes       |                     |
| 219    | 0 Bedroom  | No        | Vacant              |
| 303    | 0 Bedroom  | Yes       |                     |
| 308    | 1 Bedroom  | Yes       |                     |
| 313    | 0 Bedroom  | Yes       |                     |
| 318    | 1 Bedroom  | Yes       |                     |
| 403b   | 0 Bedroom  | Yes       |                     |
| 407    | 0 Bedroom  | Yes       |                     |
| 413    | 0 Bedroom  | Yes       |                     |
| 417    | 0 Bedroom  | Yes       |                     |
| 502    | 0 Bedroom  | Yes       |                     |
| 506    | 0 Bedroom  | Yes       |                     |
| 511    | 1 Bedroom  | Yes       |                     |
| 516    | 0 Bedroom  | Yes       |                     |
| 601b   | 1 Bedroom  | Yes       |                     |
| 605    | 1 Bedroom  | Yes       |                     |

## Inspection Summary Report (POA) for Inspection #581644

|      |           |     |  |
|------|-----------|-----|--|
| 606b | 0 Bedroom | Yes |  |
| 610  | 0 Bedroom | Yes |  |
| 615  | 1 Bedroom | Yes |  |
| 620  | 0 Bedroom | Yes |  |

### Building 800 - MORNINGSIDE ADMIN OFFICES [ Excluded not in Universe , Added by Mistake ]

Address Line 1: 1020 13TH STREET SE

Address Line 2:

City: ROANOKE State: VA  
 Zip: 24013 Extension: 2041

| Type                   | Constructed In | Floors | Expected Unit Count | Actual Unit Count |
|------------------------|----------------|--------|---------------------|-------------------|
| Non Dwelling Structure | 1972           | 1      | 0                   | 0                 |

**Comments:** This is not a sep bld, in pic incorrectly.

### Building 805 - MORNINGSIDE SHOP [ Excluded not in Universe , Added by Mistake ]

Address Line 1: 1020 13TH STREET SE

Address Line 2:

City: ROANOKE State: VA  
 Zip: 24013 Extension: 2041

| Type                   | Constructed In | Floors | Expected Unit Count | Actual Unit Count |
|------------------------|----------------|--------|---------------------|-------------------|
| Non Dwelling Structure | 1972           | 1      | 0                   | 0                 |

**Comments:** this is not a separate bld. in pic incorrectly

## Inspection Summary Report (POA) for Inspection #581644

| Certificates                        |  |
|-------------------------------------|--|
| Certificate Item                    | Certificate State                                    |
| Boilers                             | Yes - This certificate is provided or is not expired |
| Elevators                           | Yes - This certificate is provided or is not expired |
| Fire Alarms                         | Yes - This certificate is provided or is not expired |
| Lead-Based Paint Disclosure Forms   | Yes - This certificate is provided or is not expired |
| Lead-Based Paint Inspection Reports | Yes - This certificate is provided or is not expired |
| Sprinkler Systems                   | Yes - This certificate is provided or is not expired |

## Inspection Summary Report (POA) for Inspection #581644

### Score Details

**Note:** The inspection software allows for the recording of the same deficiency as many times as it occurs. However, it is only scored once. The number within the parenthesis after the Deficiency indicates the number of observations for this inspectable area. For example; "**Site - Spalling (Walkway / Steps) (4)**" indicates the deficiency was observed and recorded 4 times under Site. Each individual observation can be found in the **Deficiency Details** section of this report.

| Item   | Deficiency  | Severity | Points Deducted | Points Received |
|--|---|----------|-----------------|-----------------|
| <b>Site - MORNINGSIDE MANOR - Site(0) [Possible Points : 14.11]</b>                            |   |          |                 |                 |
| <b>Health And Safety Deficiencies</b>  |   |          |                 |                 |
| Hazards  | HS - Sharp Edges (Hazards) (NLT )                           | Level 3  | 4.54            |                 |
|  |   |          | <b>4.54</b>     | <b>9.57</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Building Exterior [Possible Points : 16.13]</b> |   |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>  |   |          |                 |                 |
| Walls  | BE- Missing/Damaged Caulking/Mortar (Walls)                 | Level 2  | 3.60            |                 |
|  |   |          | <b>3.60</b>     | <b>12.52</b>    |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Building Systems [Possible Points : 21.50]</b>  |   |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>  |   |          |                 |                 |
| Emergency Power  | BS- Auxiliary Lighting Inoperable (Emergency Power) (3)     | Level 3  | 2.15            |                 |
| Fire Protection  | BS- Missing/Damaged/Expired Extinguishers (Fire Protection) | Level 2  | 8.33            |                 |
|  |   |          | <b>10.48</b>    | <b>11.02</b>    |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Common Areas [Possible Points : 12.90]</b>      |   |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>  |   |          |                 |                 |
| Chutes   | CA - Damaged/Missing Components (Chutes) (3)                | Level 2  | 0.91            |                 |
| Doors  | CA - Damaged Hardware/Locks (Doors)                         | Level 3  | 3.63            |                 |
| Doors  | CA - Damaged Hardware/Locks (Doors) (5)                     | Level 2  | 0.91            |                 |
| Outlets/Switches/<br>Cover Plates  | CA - Missing/Broken (Outlets/Switches/Cover Plates)         | Level 1  | 0.91            |                 |
| Walls  | CA - Damaged (Walls)  | Level 1  | 0.45            |                 |
| Walls  | CA - Peeling/Needs Paint (Walls)                            | Level 1  | 0.20            |                 |
| Windows  | CA - Damaged/Missing Screens (Windows)                      | Level 1  | 0.50            |                 |
| <b>Health And Safety Deficiencies</b>  |   |          |                 |                 |

Inspection Summary Report (POA) for Inspection #581644

| Item    | Deficiency                                    | Severity | Points Deducted | Points Received |
|---------|---|----------|-----------------|-----------------|
| Windows | CA - Inoperable/Not Lockable (Windows) (NLT ) | Level 3  | 3.63            |                 |
|         |   |          | <b>11.14</b>    | <b>1.76</b>     |

| Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 105 [Possible Points : 1.61] |   |         |             |             |
|---|---|---------|-------------|-------------|
| Non-Health And Safety Deficiencies  |   |         |             |             |
| Outlets/Switches  | Unit - Missing/Broken Cover Plates (Outlets/Switches) | Level 1 | 0.04        |             |
|   |   |         | <b>0.04</b> | <b>1.57</b> |

| Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 204 [Possible Points : 1.57] |   |         |             |             |
|---|---|---------|-------------|-------------|
| Non-Health And Safety Deficiencies  |   |         |             |             |
| Outlets/Switches  | Unit - Missing/Broken Cover Plates (Outlets/Switches) (2) | Level 1 | 0.04        |             |
|   |   |         | <b>0.04</b> | <b>1.53</b> |

| Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 209 [Possible Points : 1.61] |                                       |         |             |             |
|---|---------------------------------------|---------|-------------|-------------|
| Non-Health And Safety Deficiencies  |                                       |         |             |             |
| Doors   | Unit - Damaged Hardware/Locks (Doors) | Level 3 | 0.17        |             |
| HVAC System   | Unit - General Rust/Corrosion (HVAC)  | Level 1 | 0.08        |             |
|   |                                       |         | <b>0.25</b> | <b>1.35</b> |

| Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 214 [Possible Points : 1.61] |  |         |             |             |
|---|--|---------|-------------|-------------|
| Non-Health And Safety Deficiencies  |  |         |             |             |
| Bathroom Items  | Unit - Plumbing Leaking Faucet/Pipes (Bathroom)            | Level 1 | 0.19        |             |
| Doors   | Unit - Damaged Hardware/Locks (Doors)                      | Level 1 | 0.04        |             |
| HVAC System   | Unit - General Rust/Corrosion (HVAC)                       | Level 1 | 0.08        |             |
| Kitchen Items   | Unit - Refrigerator - Missing/Damaged/Inoperable (Kitchen) | Level 1 | 0.14        |             |
|   |  |         | <b>0.46</b> | <b>1.15</b> |

| Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 403b [Possible Points : 1.61] |  |         |             |             |
|--|--|---------|-------------|-------------|
| Non-Health And Safety Deficiencies   |  |         |             |             |
| Doors  | Unit - Damaged Hardware/Locks (Doors)                    | Level 3 | 0.17        |             |
| Kitchen Items  | Unit - Range/Stove- Missing/Damaged/Inoperable (Kitchen) | Level 2 | 0.29        |             |
|  |  |         | <b>0.46</b> | <b>1.15</b> |

**Inspection Summary Report (POA) for Inspection #581644**

| Item  | Deficiency   | Severity | Points Deducted | Points Received |
|---|--|----------|-----------------|-----------------|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 511 [Possible Points : 1.61]</b>  |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Doors   | Unit - Damaged Hardware/Locks (Doors)                                | Level 3  | 0.17            |                 |
| Outlets/Switches  | Unit - Missing/Broken Cover Plates (Outlets/Switches)                | Level 1  | 0.04            |                 |
|   |  |          | <b>0.21</b>     | <b>1.40</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 601b [Possible Points : 1.64]</b> |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Kitchen Items   | Unit - Range/Stove- Missing/Damaged/Inoperable (Kitchen)             | Level 3  | 0.58            |                 |
| <b>Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Call-for-Aid  | Unit - Inoperable (Call-for-Aid) (NLT )                              | Level 3  | 0.08            |                 |
|   |  |          | <b>0.65</b>     | <b>0.99</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 605 [Possible Points : 1.61]</b>  |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Windows   | Unit- Missing/Deteriorated Caulking/Seals/Glazing Compound (Windows) | Level 3  | 0.38            |                 |
|   |  |          | <b>0.38</b>     | <b>1.22</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 610 [Possible Points : 1.61]</b>  |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Doors   | Unit - Damaged Hardware/Locks (Doors)                                | Level 3  | 0.17            |                 |
|   |  |          | <b>0.17</b>     | <b>1.43</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 615 [Possible Points : 1.61]</b>  |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| HVAC System   | Unit - General Rust/Corrosion (HVAC) (2)                             | Level 1  | 0.08            |                 |
|   |  |          | <b>0.08</b>     | <b>1.53</b>     |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE - Unit 620 [Possible Points : 1.61]</b>  |  |          |                 |                 |
| <b>Non-Health And Safety Deficiencies</b>   |  |          |                 |                 |
| Doors   | Unit - Damaged Hardware/Locks (Doors)                                | Level 1  | 0.04            |                 |
|   |  |          | <b>0.04</b>     | <b>1.56</b>     |

## Inspection Summary Report (POA) for Inspection #581644

| Deficiency Details   |  |  |   |
|--|--|--|---|
| Item   | Location/Comments  | Deficiency/Severity  | Decisions   |
| <b>Site - MORNINGSIDE MANOR - Site(0)</b>  |  |  |   |
| <b>Non-Health And Safety Deficiencies</b>  |  |  |   |
| <b>Health And Safety Deficiencies</b>  |  |  |   |
| Hazards  |  | HS - Sharp Edges (Hazards) (NLT) - L3                            | - Sharp Edges - This COULD cause cutting/breaking of skin or other bodily harm.   |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Building Exterior</b> |  |  |   |
| <b>Non-Health And Safety Deficiencies</b>  |  |  |   |
| Walls  | Contractors on site doing tuck pointing work on building,. grinding out and replacing bad mortar areas | BE- Missing/Damaged Caulking/Mortar (Walls) - L2                 | - Missing Mortar<br>- Missing mortar around more than one contiguous masonry unit   |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Building Systems</b>  |  |  |   |
| <b>Non-Health And Safety Deficiencies</b>  |  |  |   |
| Emergency Power  | Floor 6 near 610   | BS- Auxiliary Lighting Inoperable (Emergency Power) - L3         | - Auxiliary lighting does not function  |
| Emergency Power  | Floor 5 near 510   | BS- Auxiliary Lighting Inoperable (Emergency Power) - L3         | - Auxiliary lighting does not function  |
| Emergency Power  | Floor 1 near unit 105  | BS- Auxiliary Lighting Inoperable (Emergency Power) - L3         | - Auxiliary lighting does not function  |
| Fire Protection  | Floor 1  | BS- Missing/Damaged/Expired Extinguishers (Fire Protection) - L2 | - Fire extinguishers or fire hoses are missing, damaged, or expired<br>- More than 5%, but less than 10% are missing, damaged, or expired |
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Common Areas</b>      |  |  |   |
| <b>Non-Health And Safety Deficiencies</b>  |  |  |   |
| Closet/Utility/Mechanical  | Floor 6 air handler room door on   | CA - Damaged Hardware/ Locks (Doors) - L2                        | - All Other Doors (includes closet or other interior  |

**Inspection Summary Report (POA) for Inspection #581644**

| Item                          | Location/Comments                                      | Deficiency/Severity                          | Decisions  |
|-------------------------------|--|--|--|
|                               | 6th floor  |  | doors)<br>- Hardware is damaged or missing<br>- Other interior door does not function as it should or cannot be locked.  |
| Closet/Utility/<br>Mechanical | Floor 5<br>5th floor air handler closet                | CA - Damaged Hardware/<br>Locks (Doors) - L2 | - All Other Doors (includes closet or other interior doors)<br>- Hardware is damaged or missing<br>- Other interior door does not function as it should or cannot be locked. |
| Closet/Utility/<br>Mechanical | Floor 4<br>4th floor air handler room                  | CA - Damaged Hardware/<br>Locks (Doors) - L2 | - All Other Doors (includes closet or other interior doors)<br>- Hardware is damaged or missing<br>- Other interior door does not function as it should or cannot be locked. |
| Closet/Utility/<br>Mechanical | Floor 3<br>3rd floor air handler room closer inop      | CA - Damaged Hardware/<br>Locks (Doors) - L2 | - All Other Doors (includes closet or other interior doors)<br>- Hardware is damaged or missing<br>- Other interior door does not function as it should or cannot be locked. |
| Closet/Utility/<br>Mechanical | Floor 2<br>2nd floor air handker room door closer inop | CA - Damaged Hardware/<br>Locks (Doors) - L2 | - All Other Doors (includes closet or other interior doors)<br>- Hardware is damaged or missing<br>- Other interior door does not function as it should or cannot be locked. |
| Halls/Corridors/Stairs        | Floor 4<br>closer inop on end fire door near 420       | CA - Damaged Hardware/<br>Locks (Doors) - L3 | - Restroom Door or Fire/Emergency Door<br>- Hardware is damaged or   |

**Inspection Summary Report (POA) for Inspection #581644**

| Item                                  | Location/Comments   | Deficiency/Severity                                      | Decisions  |
|---------------------------------------|---|--|--|
|                                       |   |  | missing<br>- Door does not function as it should (it does not properly latch).                           |
| Halls/Corridors/Stairs                | Roof  | CA - Peeling/Needs Paint (Walls) - L1                    | - Peeling Paint or Needs Paint<br>- 1 to 4 square feet of two or more wall areas                         |
| Halls/Corridors/Stairs                | Floor 5 near 519  | CA - Damaged/Missing Screens (Windows) - L1              | - A second means of window egress exists<br>- Window bars are actually child safety bars                 |
| Laundry Room                          | Floor 6   | CA - Missing/Broken (Outlets/Switches/Cover Plates) - L1 | - Cover plate missing or broken<br>- The electrical connections/wires are NOT exposed.                   |
| Storage                               | Floor 1   | CA - Damaged (Walls) - L1                                | - Hole(s)<br>- Between one square inch, but smaller than a sheet of paper                                |
| Trash Collection Areas                | Floor 5   | CA - Damaged/Missing Components (Chutes) - L2            | - Chute door does not latch properly<br>- This condition DOES NOT RESULT in a Health and Safety concern. |
| Trash Collection Areas                | Floor 3   | CA - Damaged/Missing Components (Chutes) - L2            | - Chute door does not latch properly<br>- This condition DOES NOT RESULT in a Health and Safety concern. |
| Trash Collection Areas                | Floor 2<br>2nd floor trash chute does not latch             | CA - Damaged/Missing Components (Chutes) - L2            | - Chute door does not latch properly<br>- This condition DOES NOT RESULT in a Health and Safety concern. |
| <b>Health And Safety Deficiencies</b> |   |  |  |
| Halls/Corridors/Stairs                | Floor 3<br>locks broken with pieces missing on hall windows | CA - Inoperable/Not Lockable (Windows) (NLT) - L3        | - Lock/Operability<br>- Lock is missing or damaged (only if the window was                               |

Inspection Summary Report (POA) for Inspection #581644

| Item | Location/Comments | Deficiency/Severity | Decisions  |
|------|-------------------|---------------------|--|
|      | near 319          |                     | designed to lock)<br>- Window is NOT accessible from outside |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 105**

**Non-Health And Safety Deficiencies**

|                  |          |  |  |
|------------------|----------|--|--|
| Outlets/Switches | Bathroom | Unit - Missing/Broken Cover Plates (Outlets/Switches) - L1 | - Cover plate missing or broken<br>- The electrical connections/wires are NOT exposed. |
|------------------|----------|--|--|

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 204**

**Non-Health And Safety Deficiencies**

|                  |         |  |  |
|------------------|---------|--|--|
| Outlets/Switches | Bedroom | Unit - Missing/Broken Cover Plates (Outlets/Switches) - L1 | - Cover plate missing or broken<br>- The electrical connections/wires are NOT exposed. |
| Outlets/Switches | Kitchen | Unit - Missing/Broken Cover Plates (Outlets/Switches) - L1 | - Cover plate missing or broken<br>- The electrical connections/wires are NOT exposed. |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 209**

**Non-Health And Safety Deficiencies**

|             |             |   |   |
|-------------|-------------|---|---|
| Doors       | Bathroom    | Unit - Damaged Hardware/ Locks (Doors) - L3 | - Bathroom Door<br>- Hardware is damaged or missing<br>- Door does not function as it should (it does not properly latch).  |
| HVAC System | Living Area | Unit - General Rust/ Corrosion (HVAC) - L1  | - Rust or Corrosion (formations of metal oxides, flaking, discoloration, or a pit or crevice)<br>- The system IS providing enough heating or cooling to maintain a minimum temperature range in the major living areas. |

**Inspection Summary Report (POA) for Inspection #581644**

| Item  | Location/Comments | Deficiency/Severity  | Decisions   |
|---|-------------------|--|---|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 214</b> |                   |  |   |
| <b>Non-Health And Safety Deficiencies</b>                                     |                   |  |   |
| Bathroom Items  | Bathroom          | Unit - Plumbing Leaking Faucet/Pipes (Bathroom) - L1             | <ul style="list-style-type: none"> <li>- Shower or Tub (Unit)</li> <li>- There is a leak</li> <li>- There is a leak or drip, but it is contained by the shower or tub basin</li> </ul>  |
| Doors   | Bedroom           | Unit - Damaged Hardware/ Locks (Doors) - L1                      | <ul style="list-style-type: none"> <li>- All Other Doors (includes closet or other interior doors)</li> <li>- Hardware is damaged or missing</li> <li>- Closet door does not function as it should or cannot be locked.</li> </ul>  |
| HVAC System   | Bedroom           | Unit - General Rust/ Corrosion (HVAC) - L1                       | <ul style="list-style-type: none"> <li>- Rust or Corrosion (formations of metal oxides, flaking, discoloration, or a pit or crevice)</li> <li>- The system IS providing enough heating or cooling to maintain a minimum temperature range in the major living areas.</li> </ul> |
| Kitchen Items   | Kitchen           | Unit - Refrigerator - Missing /Damaged/Inoperable (Kitchen) - L1 | <ul style="list-style-type: none"> <li>- Refrigerator</li> <li>- Door seals are deteriorated</li> </ul>   |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 303**  
None

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 308**  
None

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 313**  
None

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 318**  
None

Inspection Summary Report (POA) for Inspection #581644

| Item   | Location/Comments   | Deficiency/Severity  | Decisions  |
|--|---------------------|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 403b</b> |                     |  |  |
| <b>Non-Health And Safety Deficiencies</b>                                      |                     |  |  |
| Doors  | Bathroom latch inop | Unit - Damaged Hardware/ Locks (Doors) - L3                    | <ul style="list-style-type: none"> <li>- Bathroom Door</li> <li>- Hardware is damaged or missing</li> <li>- Door does not function as it should (it does not properly latch).</li> </ul> |
| Kitchen Items  | Kitchen             | Unit - Range/Stove- Missing /Damaged/Inoperable (Kitchen) - L2 | <ul style="list-style-type: none"> <li>- Range/Stove/Oven</li> <li>- Gas Range/Stove/Oven</li> <li>- Burner(s) not functioning</li> <li>- ONE burner is not functioning.</li> </ul>      |

|   |  |  |  |
|---|--|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 407</b> |  |  |  |
| None  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 413</b> |  |  |  |
| None  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 417</b> |  |  |  |
| None  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 502</b> |  |  |  |
| None  |  |  |  |

|   |  |  |  |
|---|--|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 506</b> |  |  |  |
| None  |  |  |  |

| <b>Building 208 -</b>                     |                     |   |   |
|---|---------------------|---|---|
| <b>Non-Health And Safety Deficiencies</b> |                     |   |   |
| Doors                                     | Kitchen closer inop | Unit - Damaged Hardware/ Locks (Doors) - L3             | <ul style="list-style-type: none"> <li>- Entry Door to Unit</li> <li>- Hardware is damaged or missing</li> <li>- Door does not function as it should (it does not properly latch).</li> </ul> |
| Outlets/Switches                          | Kitchen             | Unit - Missing/Broken Cover Plates (Outlets/Switches) - | <ul style="list-style-type: none"> <li>- Cover plate missing or broken</li> </ul>   |

**Inspection Summary Report (POA) for Inspection #581644**

| Item | Location/Comments | Deficiency/Severity | Decisions   |
|------|-------------------|---------------------|---|
|      |                   | L1                  | - The electrical connections/wires are NOT exposed. |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 516**  
 None

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 601b**

| Non-Health And Safety Deficiencies |                         |  |   |
|------------------------------------|-------------------------|--|---|
| Kitchen Items                      | Kitchen                 | Unit - Range/Stove- Missing /Damaged/Inoperable (Kitchen) - L3 | - Range/Stove/Oven<br>- Gas Range/Stove/Oven<br>- Burner(s) not functioning<br>- TWO OR MORE burners are not functioning.<br>- This condition DOES NOT RESULT in a Health and Safety concern. |
| Health And Safety Deficiencies     |                         |  |   |
| Call-for-Aid                       | Bathroom string missing | Unit - Inoperable (Call-for-Aid) (NLT) - L3                    | - Alerts local entities (on-site)<br>- Tested - Call-for-Aid as installed does NOT serve its intended function  |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 605**

| Non-Health And Safety Deficiencies |         |   |   |
|------------------------------------|---------|---|---|
| Windows                            | Bedroom | Unit- Missing/Deteriorated Caulking/Seals/Glazing Compound (Windows) - L3 | - Caulking, Seals, or Glazing Compound (includes thermopane or insulated windows)<br>- Deteriorated or missing<br>- Window is damaged and not weather-resistant OR there is damage to the surrounding structure OR there is condensation or discoloration between the glass panes of a Thermopane |

**Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 606b**  
 None

**Inspection Summary Report (POA) for Inspection #581644**

| Item  | Location/Comments      | Deficiency/Severity                            | Decisions   |
|---|------------------------|--|---|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 610</b> |                        |  |   |
| <b>Non-Health And Safety Deficiencies</b>                                     |                        |  |   |
| Doors   | Kitchen<br>closer inop | Unit - Damaged Hardware/<br>Locks (Doors) - L3 | <ul style="list-style-type: none"> <li>- Entry Door to Unit</li> <li>- Hardware is damaged or missing</li> <li>- Door does not function as it should (it does not properly latch).</li> </ul> |

|   |             |   |   |
|---|-------------|---|---|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 615</b> |             |   |   |
| <b>Non-Health And Safety Deficiencies</b>                                     |             |   |   |
| HVAC System   | Living Area | Unit - General Rust/<br>Corrosion (HVAC) - L1 | <ul style="list-style-type: none"> <li>- Rust or Corrosion (formations of metal oxides, flaking, discoloration, or a pit or crevice)</li> <li>- The system IS providing enough heating or cooling to maintain a minimum temperature range in the major living areas.</li> </ul> |
| HVAC System   | Bedroom     | Unit - General Rust/<br>Corrosion (HVAC) - L1 | <ul style="list-style-type: none"> <li>- Rust or Corrosion (formations of metal oxides, flaking, discoloration, or a pit or crevice)</li> <li>- The system IS providing enough heating or cooling to maintain a minimum temperature range in the major living areas.</li> </ul> |

|   |          |  |  |
|---|----------|--|--|
| <b>Building 208 - MORNINGSIDE MANOR HIGHRISE[Sample,Inspected] - Unit 620</b> |          |  |  |
| <b>Non-Health And Safety Deficiencies</b>                                     |          |  |  |
| Doors   | Bathroom | Unit - Damaged Hardware/<br>Locks (Doors) - L1 | <ul style="list-style-type: none"> <li>- All Other Doors (includes closet or other interior doors)</li> <li>- Hardware is damaged or missing</li> <li>- Closet door does not function as it should or cannot be locked.</li> </ul> |

## **Notice: Modifications to the Inspection Summary Report**

With the rollout of the new Uniform Physical Condition Standards (UPCS) inspection software (version 4.0), PIH-REAC now has the capability to collect more detailed information about observations made during the inspection of properties. Therefore, the report has been modified to provide this detailed information, and also to make the results of the inspection more clear. The following explains the major changes to the report.

**Changes to Score Summary** - The section of the report, which summarizes the score, has been modified to better explain how the final score was derived for the property, and the source of lost points. Additionally, score information from the two most recent inspections of the property is provided to allow comparison to this inspection's score.

**Addition of scored and non-scored deficiency reports** - The section of the report that displays observed deficiencies has been divided into two sections: the Score Report and the Deficiency Report. Non-scored deficiencies refer to multiple deficiencies of the same type observed with the same sub-area, they are reported for informational purposes only and are not scored. Only one deficiency of the same type for the same sub-area is counted for scoring purposes.

**Score Report** - a detailed account of only the scored deficiencies by sub-area.

**Deficiency Report** - A detailed account of all deficiencies, both scored and non-scored, by sub-area. In addition, standardized locations and more descriptive information for each deficiency are provided.

To read more about the above, and for additional assistance in understanding the report, you may access the Inspection Summary Report Guide (version 4.0) at <http://www.hud.gov/offices/reac/products/pass/inspectionrpt40.cfm>