

COLORADO DEPARTMENT OF TRANSPORTATION		Project Code	
		Parcel No	
		Project No	
		Location	
REPLACEMENT HOUSING INSPECTION			
Name of Displaced Person(s)			
Address of Property Inspected			
Building Type (i.e. single family, duplex, apartment, etc.)			
Construction Type (i.e. 1 story frame, 1 ½ story brick, etc.)			
Approximate structure age	Lot Size	sq. ft.	Total number of rooms
Number of Bedrooms	Number of baths		Habitable floor space
			sq. ft.
Floor space is divided into sufficient rooms for this family <input type="checkbox"/> yes <input type="checkbox"/> no			
Decent, Safe, and Sanitary dwellings must meet applicable housing and occupancy codes and at a minimum shall meet the following standards:			
Kitchen/Kitchen Area:			
➤ Sink properly connected to potable hot and cold water and to a sewage drainage system			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Adequate space and utility service connections to accommodate a stove and refrigerator			<input type="checkbox"/> Yes <input type="checkbox"/> No
Bathroom:			
➤ Separate, well lighted and ventilated bathroom that provides privacy to the user			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Sink, bathtub or shower stall, and a toilet, all in good working order and properly connected to appropriate sources of water and to a sewage drainage system			<input type="checkbox"/> Yes <input type="checkbox"/> No
General:			
➤ Building structurally sound, weather tight and in good repair			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Safe electrical wiring system adequate for lighting and other devices			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Heating system capable of sustaining a healthful temperature (of approximately 70 degrees)			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Adequate in size with respect to the number of rooms and area of living space to accommodate the displaced person(s)			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Number of persons occupying each habitable room used for sleeping purposes shall not exceed that permitted by local housing codes, or, in the absence of local codes, the policies of CDOT			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Separate bedrooms for children of the opposite gender included in local housing codes or in the absence of local codes, the policies of CDOT			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Unobstructed egress to safe, open space at ground level			<input type="checkbox"/> Yes <input type="checkbox"/> No
➤ Free of any barriers which would preclude reasonable ingress, egress, or use of dwelling for a disabled person(s)			<input type="checkbox"/> Yes <input type="checkbox"/> No
Please understand that the replacement dwelling inspection for decent, safe and sanitary requirements is conducted by Agency personnel for the sole purpose of determining your eligibility for a relocation payment. Therefore, you must not interpret the Agency's approval of a dwelling to provide any assurance or guarantee that there are no deficiencies in the dwelling or in its fixtures and equipment that may be discovered at a later date. It is your responsibility to protect your best interest and investment in the purchase or rental of your replacement property and you must clearly understand that the Agency will assume no responsibility if structural, mechanical, legal, or other unforeseen problems are discovered after the inspection has been conducted.			
Inspection made by:			Date:
REMARKS:			