



## Short-Term Rental Inspection Checklist

This checklist is used by the City of Harrison to verify observed compliance with the City's Short-Term Rental License Ordinance. Inspections are limited to the conditions observed at the time of inspection and do not constitute a warranty, guarantee, or certification that the dwelling complies with all applicable building, fire, or safety codes at all times.

### 1. Inspection Information

Short-Term Rental Property Address: \_\_\_\_\_

Parcel ID Number: 070-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Legal Property Owner Name: \_\_\_\_\_

Local Contact Name (if applicable): \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Inspection Date: \_\_\_\_\_

#### Inspection Type

Inspection Time: \_\_\_\_\_

- Initial Inspection
- Annual Renewal Inspection
- Reinspection
- Complaint Inspection

Inspector Name: \_\_\_\_\_

### 2. Person Present for Inspection

Name of Person Present: \_\_\_\_\_

#### Relationship to Property

Phone Number: \_\_\_\_\_

- Owner
- Local Contact

### 3. Bedroom, Sleeping Area, and Occupancy Review

Bedrooms proposed by applicant: \_\_\_\_\_

Bedrooms approved by inspector: \_\_\_\_\_

Rooms excluded from bedroom count, and reason if any:

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#### Bedroom / Sleeping Area Review

For each room proposed, advertised, furnished, or observed for sleeping use, the inspector shall verify that emergency escape or rescue access is present, accessible, operable from inside the room, not blocked, and not visibly inadequate for emergency use. If the access is visibly too small, too high, obstructed, inaccessible, or otherwise not reasonably usable, the room shall not be approved for sleeping use.

**Room 1 Location:** \_\_\_\_\_

**Egress Type:**  Window  Exterior Door  Other: \_\_\_\_\_

**Observed Egress Conditions (All must be checked for approval):**

- Opening present
- Opens from inside
- Accessible / not blocked

**Sleeping Use:**

- Approved for sleeping use                       Not approved for sleeping use

Comments/Deficiencies: \_\_\_\_\_

**Room 2 Location:** \_\_\_\_\_

**Egress Type:**  Window  Exterior Door  Other: \_\_\_\_\_

**Observed Egress Conditions (All must be checked for approval):**

- Opening present
- Opens from inside
- Accessible / not blocked

**Sleeping Use:**

- Approved for sleeping use                       Not approved for sleeping use

Comments/Deficiencies: \_\_\_\_\_

**Room 3 Location:** \_\_\_\_\_

**Egress Type:**  Window  Exterior Door  Other: \_\_\_\_\_

**Observed Egress Conditions (All must be checked for approval):**

- Opening present
- Opens from inside
- Accessible / not blocked

**Sleeping Use:**

- Approved for sleeping use
- Not approved for sleeping use

Comments/Deficiencies: \_\_\_\_\_

**Room 4 Location:** \_\_\_\_\_

**Egress Type:**  Window  Exterior Door  Other: \_\_\_\_\_

**Observed Egress Conditions (All must be checked for approval):**

- Opening present
- Opens from inside
- Accessible / not blocked

**Sleeping Use:**

- Approved for sleeping use
- Not approved for sleeping use

Comments/Deficiencies: \_\_\_\_\_

**Room 5 Location:** \_\_\_\_\_

**Egress Type:**  Window  Exterior Door  Other: \_\_\_\_\_

**Observed Egress Conditions (All must be checked for approval):**

- Opening present
- Opens from inside
- Accessible / not blocked

**Sleeping Use:**

- Approved for sleeping use
- Not approved for sleeping use

Comments/Deficiencies: \_\_\_\_\_

If more than five sleeping areas are proposed, advertised, furnished, or observed, attach an additional Bedroom / Sleeping Area Review page.

## 4. Critical Life-Safety Items

Failure of any Critical Life-Safety Item results in a failed inspection and requires correction and reinspection before licensing or continued operation.

### A. Smoke Alarms

Smoke alarms are present and functional in the following required locations, based on observed conditions at the time of inspection:

- Inside each sleeping room
- Outside each separate sleeping area in the immediate vicinity of the bedrooms
- On each additional story of the dwelling, including basements and habitable attics
- Smoke alarms tested functional at time of inspection

**Result:**

- Pass       Fail

**Comments/Deficiencies:** \_\_\_\_\_

### B. Carbon Monoxide Alarm

At least one functioning carbon monoxide alarm is installed within the dwelling unit.

- Yes    No

**Result:**

- Pass       Fail

**Comments/Deficiencies:** \_\_\_\_\_

## 5. Non-Critical Compliance Items

If only Non-Critical Compliance Items are deficient, the City may allow a cure period without requiring reinspection, provided the owner submits acceptable verification within the time allowed.

### A. Required Interior Posting

Required interior posting is visible inside the STR.

- Yes  
 No

**Comments/Deficiencies:** \_\_\_\_\_

**B. Maximum Occupancy Posted**

Maximum approved occupancy is posted inside the STR.

- Yes
- No

**Comments/Deficiencies:** \_\_\_\_\_

**C. Local Contact and Emergency Contact Information Posted**

Emergency contact information and Designated Local Contact information are posted inside the STR.

- Yes
- No

**Comments/Deficiencies:** \_\_\_\_\_

**D. Noise, Nuisance and Parking Rules Posted**

A plain-language summary of City noise, nuisance and parking rules is posted inside the STR.

- Yes
- No

**Comments/Deficiencies:** \_\_\_\_\_

**E. Fire Evacuation and Exit Plan Posted**

A property-specific fire evacuation and exit plan is posted inside the STR.

- Yes
- No

**Comments/Deficiencies:** \_\_\_\_\_

**F. Exit Information**

The posted evacuation and exit plan identifies exits, and observed exits and egress routes are clear and operable at the time of inspection.

- Yes
- No

**Comments/Deficiencies:** \_\_\_\_\_

## 6. Listing / Advertising Review

If the STR is currently advertised or listed, staff reviewed available listing information for consistency with approved bedrooms and occupancy.

### Listing Reviewed by City Staff?

Yes

No

### Platforms Where STR Listed

Airbnb

Vrbo

Booking.com

Facebook or other social media

Direct booking / personal website

Other: \_\_\_\_\_

### Listing appears consistent with approved bedroom count:

Yes

No

Not Applicable

### Listing appears consistent with approved occupancy:

Yes

No

Not Applicable

Notes/Comments: \_\_\_\_\_

\_\_\_\_\_

## 7. Inspection Comments and Required Corrections

List any failed items, deficiencies, required corrections, and correction deadlines.

\_\_\_\_\_

\_\_\_\_\_

Correction Deadline (if applicable): \_\_\_\_\_

### Reinspection Required:

Yes

No

## 8. Final Inspection Determination

Based on observed conditions at the time of inspection:

- Passed Inspection
- Failed Inspection
- Reinspection Required
- Non-Critical Cure Period Allowed

Cure Deadline, if applicable: \_\_\_\_\_

### License Recommendation:

- Issue License
- Do Not Issue License
- Continue Existing License
- Suspend Pending Correction

**Inspector Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

## 9. Inspection Limitation Statement

This inspection is limited to verifying compliance with the City of Harrison Short-Term Rental inspection checklist based on conditions observed at the time of inspection. The inspection does not constitute a warranty, guarantee, or certification that the dwelling complies with all applicable building, fire, or safety codes at all times. The owner remains responsible for ongoing compliance with the Short-Term Rental License Ordinance, all City ordinances, state laws, and applicable codes.