

IHCDA Notification Letter-Critical Violations

Notice of Critical Violations 72-Hour Correction Period

Inspection Date: _____ BIN: _____
Property Name: _____
Property Location: _____

Based on the physical inspection completed on the date referenced above, one or more critical violations have been identified and need to be corrected immediately.

Within 24-Hours of the inspection, the cited item(s) must be repaired and IHCDA must be provided with written notification of the action taken to complete the correction(s). Within 72-hours IHCDA must be notified of the corrections.

Send proof of corrections to Doug Newport at: dnewport@ihcda.in.gov

Critical Violation Codes:

(1)-Exposed Energized Electrical (2)-Water Leak by Electrical Equipment
(3)-Gas/Methane Leaks (4)-Fire Exit Blocked (5)-Unusable Fire Escapes
(6)-Flue Gas Vents w/CO leakage (7)-Missing/Inoperable Smoke Detector
(8)-Expired/Discharged Fire Extinguisher/Inspection Tag (9)-Inoperable Emergency Escape/Rescue Windows (10)-Inoperable Emergency Lighting
(11)-Inoperable EXIT Sign (12)-Improper Fuel Storage (13)-Missing or Loose Guard Rail
(14)-Ground Fault Protection Inoperable (15)-Fire Alarm Inoperable (16)-Other with Explanation (Documented with location of Violation)

Critical Violation(s):

CODE	Building #/Address	Unit#	Location of Violation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Inspection(s) by: _____ Phone#: _____

E-Mail: _____

Received by: _____ Signature: _____

Example AFFIDAVIT

I _____ (Print name here) _____, being of sound mind and at least 18 years of age, affirm that I have personal knowledge of the facts described in this Affidavit and that the following statements are true:

I am _____ [state position of authority or relationship with the property, tenant, official, or organization that is required to respond].

On _____ (Date) _____, I received a report of deficiencies that were identified by _____ [State name of inspection agency who conducted the inspection], in the inspection report dated _____.

I have conducted a diligent investigation of the reported deficiencies and have confirmed that all of those deficiencies have been corrected in reference to:

Name of Development

(_____) and the inspection report
Building Identification Number (BIN) and/or Award Number
Identified above.

I affirm, under penalties of perjury, that the forgoing representations are true.

Authorized Signatories' Signature:

Address:

City, State, Zip:

Telephone Number:

Date

1. DEVELOPMENT INFORMATION

DEVELOPMENT NAME: _____
BUILDING IDENTIFICATION NUMBER (BIN): _____
HOME/DEVELOPMENT FUND AWARD NUMBER (IF ANY): _____
DATE PLACED IN SERVICE (OR WILL PLACE IN SERVICE): _____

- a. Property Address: _____
City: _____ State: _____
Zip Code: _____ Phone: (____) _____
Email: _____
- b. Management Company: _____
Contact Name: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Phone: (____) _____
Email: _____
- c. Owner Name: _____
Owner Contact: _____
Address: _____
City: _____ State: _____
Zip Code: _____ Phone: (____) _____
Email: _____
- d. Number of buildings in Development: _____
Number of RHTC Units/Apartments: _____
Total number of Units/Apartments: _____

2. BUILDING PERMIT INFORMATION

- a. State Plan Release Project #: _____
b. State Plan Release Filing Date: _____
c. Building Permit Issuance Date: _____
d. Initial Date buildings were constructed: _____
e. Date buildings were rehabilitated (if applicable): _____



3. BUILDING PERMIT INFORMATION

Please mark with an "X" all types of construction applicable to the development:

☐ New Construction
☐ Re-Model
☐ Addition
☐ Rehabilitation
☐ Building Occupancy Change of Use
☐ Duplex
☐ Townhouse
☐ Single Family Dwelling
☐ Single Story
☐ Two-Story
☐ Three-Story
☐ Multi-Story
☐ Assisted-Living/Elderly Housing

4. DEVELOPMENT DESIGN AMENITIES

Please mark all the development's amenities as listed in the initial application and awarded for points.

<input type="checkbox"/> Shuffle Board Court (open to all residents)	<input type="checkbox"/> On-site Manager	<input type="checkbox"/> Community Television with cable
<input type="checkbox"/> Designated walking/jogging path	<input type="checkbox"/> Carbon monoxide detector in each unit	<input type="checkbox"/> Enclosed bus stop shelter
<input type="checkbox"/> Hardwood floors in each unit (living area)	<input type="checkbox"/> Access to high speed internet in each unit	<input type="checkbox"/> Gazebo
<input type="checkbox"/> Picnic area with permanent grill	<input type="checkbox"/> Sand volley ball court	<input type="checkbox"/> Hot tub/Jacuzzi (open to all residents)
<input type="checkbox"/> Individual porch/patio/balcony (for each unit using TREX product)	<input type="checkbox"/> Hardwood floors	<input type="checkbox"/> 50% or more brick exterior
<input type="checkbox"/> Community Room (open to all residents)	<input type="checkbox"/> Computer Center (with internet access and printer open to all tenants)	<input type="checkbox"/> On-site Daycare



____ Tennis Court (fenced in)	____ Window Blinds or Curtains	____ Ceramic Tile
____ Door bell for each unit	____ Alarm system for each unit	____ Cable hook-up in each unit
____ 10 units or less per acre	____ Individual entrance to unit	____ Ceiling fans in each unit
____ External individual attached storage each unit	____ Fireplace in each unit	____ Central Air Conditioning in each unit
____ Peephole (exterior door(s) to each unit)	____ Built in dishwasher	____ Basketball Court open to all tenants
____ Garden area for all tenants to use	____ Restricted Access to Property (Gated Community)	____ 1 parking spot per unit
____ Multiple building designs	____ Racquetball Court	____ Walk-in closet in each unit
____ Motion detector lights for each unit	____ Water purification system	____ Multiple floor plans per unit size
____ Microwave in each unit	____ Garbage Disposal in each unit	____ Intercom system for each building
____ Range in each unit	____ Refrigerator in each unit	____ Double Well Kitchen Sink
____ Sauna open to all residents	____ 3-dimensional architectural shingles	____ On site recycling service (free to residents)
____ Designated car wash facility with hose & vacuum	____ Fire suppressors above all stoves	____ Beauty salon/barber shop On-site (elderly or special needs only)
____ Whirlpool tub in each unit	Indoor racket ball court (open to all residents)	Emergency sprinkler system in each unit
Tankless water heaters in each unit	Steel Frame	Water Softener
Laundry facilities in each building	____ Exercise Room (with exercise equipment open to all tenants)	____ Pool (In-ground)
____ Sound-proof interior	____ Garage for each unit	____ Washer/Dryer hook-up (in each unit and not coin operated)
____ Washer & Dryer in each unit	____ Carport (1-spot/unit)	____ Emergency pull cords/call button (elderly or special needs only)
____ Bike racks (1 per building)		

5. UNIQUE FEATURES

Please attach the narrative summary from the initial application that addresses the unique features of this development.



6. UNIVERSAL DESIGN FEATURES

Please mark all the development's universal design features as listed in the initial application and awarded for points.

<input type="checkbox"/> All hallways 42" or wider in each unit	<input type="checkbox"/> All wall reinforcements for handrails in each unit	<input type="checkbox"/> A front control operated range in 5% of the units
<input type="checkbox"/> All doorways 32" or wider in each unit	<input type="checkbox"/> All wall reinforcements for grab bars in bath for each unit	<input type="checkbox"/> Audio and visual smoke detectors in each unit
<input type="checkbox"/> All electronic outlets raised 15" to 18" above the finished floor in each unit	<input type="checkbox"/> All light switches located 48" above the finished floor in each unit	<input type="checkbox"/> Toggle, rocker, or touch sensitive control panels instead of switches in each unit
<input type="checkbox"/> Levers instead of door or faucet knobs on every door in each unit	<input type="checkbox"/> 30"x40" clear bathroom floor space with a door that swings out in 5% of the units	<input type="checkbox"/> Adjustable height or hand-held showerhead with a flexible hose in all units
<input type="checkbox"/> A fold down seat in the shower of 5% of the units	<input type="checkbox"/> Roll-in shower with no curb in 5% of the units	<input type="checkbox"/> Slide or bi-folding closet doors in all units
<input type="checkbox"/> The bathtub controls located off center toward the outside of the tub in each unit	<input type="checkbox"/> A removable base cabinet for required knee space in kitchens and baths in all bottom level units	<input type="checkbox"/> Built in accessible height microwave in 5% of the units
<input type="checkbox"/> All closet rods adjustable in each unit	<input type="checkbox"/> 30"x40" clear kitchen floor space in 5% of the units	<input type="checkbox"/> Will have an accessible route to each bottom level unit that includes no steps or abrupt change of level
<input type="checkbox"/> Front loading washer and dryer with front controls, raised on platforms to reduce need to bend, stoop, or lean over in each unit or all laundry facilities	<input type="checkbox"/> All counter tops in bathrooms and kitchens adjustable in each unit	<input type="checkbox"/> Tambour storage in kitchen at accessible level in each unit
<input type="checkbox"/> Raised dishwasher unit that reduces bending/lifting	<input type="checkbox"/> Lower wall oven cabinet	<input type="checkbox"/> Blind base pull-out cabinetry (Pull Out Shelving)
<input type="checkbox"/> Table pull out in kitchen or work area	<input type="checkbox"/> Adjustable height shelves in wall cabinets	<input type="checkbox"/> Counter cook top with toe & knee clearance underneath
<input type="checkbox"/> Loop handled pulls on drawers & cabinets	<input type="checkbox"/> Glare-free task lighting for work areas	<input type="checkbox"/> Interior pocket doors



7. ENERGY EFFICIENCY FEATURES

Please mark all the development's energy efficiency features as listed in the initial application and awarded for points.

Energy Star Products:

Heating System _____

Cooling System _____

Fenestration Products _____

Insulation _____

Lighting Fixtures _____

Refrigerator _____

Dishwasher _____

Washing Machine _____

Ceiling Fan _____

30 Year Warranty Roofing System _____

8. DIRECTIONS TO SITE

Please provide the most efficient directions to the property, starting from the major intersection nearest to the site:

