

FACILITIES SAFETY AND SECURITY INSPECTION CHECKLIST

Property Information

Location

Street address _____

Type of Property Viewed

- Country office
- Guest house
- Multi-use facility
- Short-term residential housing
- Long-term residential housing

DETAILED SECURITY INSPECTION CHECKLIST

Facility

| Yes | No | Security Item | Notes |
|-----|----|--|-------|
| | | The facility has a minimum of two exits. | |
| | | All exterior doors and windows are secure and can be locked from inside. | |
| | | Outside doors to basement and other service areas can be sufficiently locked. | |
| | | Exterior entries have a way to see visitors without opening. | |
| | | An outside light can be activated from inside. | |
| | | If located in a walled compound, a lightweight ladder is inside the compound to allow escape in the event of an emergency. | |
| | | There is no access to roof or compound from neighboring buildings. | |
| | | Area around building has limited access for pedestrian and vehicle traffic. | |
| | | Exterior lighting with all fixtures and cables are protected from tampering. | |
| | | External telephone lines, gas lines, and electrical boxes are protected from tampering. | |

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|--|--|--|--|
| | | Windows are fitted with bars or grates as appropriate. | |
| | | If windows have bars, there is at least one window or door on each floor that has an inside release to allow for emergency exit. | |
| | | Facility has secure parking and enough spaces for all staff and visitors. | |
| | | If present, stairways and elevators are well lit. | |
| | | Fire escape or other alternative method of exit exists. | |
| | | A reception area is available to ensure that all visitors are within receptionist view | |
| | | Facility has back-up generator. | |
| | | Janitor closets, electrical, and/or storage rooms have locking doors. | |
| | | Facility has back-up water pump and/or tanks. | |

Inspection Items that Need Correction

| Item/Location | Corrective Action Needed | Party Responsible for Correction |
|----------------------|---------------------------------|---|
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I-TECH inspection done by: _____

Real estate inspection done by: _____

Landlord/manager inspection done by: _____

Date: _____