

# ESFRLP Essential Property Standard Certification of Compliance\*

ESFR Cycle and County \_\_\_\_\_

This certifies that \_\_\_\_\_ [project address]  
in \_\_\_\_\_ [city] was inspected on the dates named below and found to be in  
compliance with at least one of the following standards during the **Post-Rehabilitation Inspection**:

- Local **Minimum Housing Code** for \_\_\_\_\_ [local jurisdiction]  
 **Essential Property Standard** [ESFRLP Program Guidelines Appendix A, Section C.]

**Pre-Rehabilitation Inspection by** [print name of inspector]: \_\_\_\_\_

Inspected by \_\_\_\_\_ [Signature of Rehabilitation specialist]

on \_\_\_\_\_ [month/day/year] to create a scope of work to meet the selected standard.

**Post-Rehabilitation Inspection by** [print name of inspector]: \_\_\_\_\_

Inspected by \_\_\_\_\_ [Signature of Rehabilitation specialist]

on \_\_\_\_\_ [month/day/year] to confirm completion of a scope of work  
to meet the selected standard. On this date, all work is complete and there are no 'punch-list' items.

A one-year warranty begins on the Post-Rehabilitation Inspection date above; the homeowner must  
notify in writing the contractor and/or partner of any defects within one-year of this date. All corrective  
work performed extends the warranty on the corrected work to one-year from the date corrected.

**Contractor:** \_\_\_\_\_

\_\_\_\_\_ [name of organization and contact, with address]

**Partner:** \_\_\_\_\_

\_\_\_\_\_ [name of organization and contact, with address]

**During Warranty period:** The following corrective work was performed (include corrected item & date):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Homeowner Receipt of completed document:**

Homeowner signature: \_\_\_\_\_

Homeowner Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

\* The project case file should continue to include a consistent pre-rehab inspection list. Examples include: ESFRLP Certification Checklist, ESFRLP Field List, local minimum housing code with additional required ESFRLP Essential Property Standards added or other pre-rehab list that suits the needs of the Member's organization and location to meet the Essential Rehabilitation Criteria.

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