

NOTIFICATION OF EXIGENT AND FIRE SAFETY HAZARDS OBSERVED

Property ID #: 22809 Inspection ID #: 695166 Inspection Date: April 26, 2022
 Property Name: Scattered Sites PHA/Owner Name: _____
 Address: 727 Miller Avenue Phone: _____ Agent phone: (734) 260-0819
 City: Ann Arbor State: MI Zipcode: 48103 PIH #: MI064000100

PART 1 ... EXIGENT HEALTH AND SAFETY HAZARDS

Air Quality A-- Propane/Natural Gas/Methane Gas Detected Electrical Hazards B-- Exposed Wires/Open Panels C-- Water Leaks On or Near Electrical Equipment	Emergency Equipment / Fire Exits / Fire Escapes D-- Emergency / Fire Exits / Blocked / Unusable Fire Escapes E-- Blocked Egress / Ladders Gas / Oil Hot Water Heater Gas / Oil HVAC F-- Carbon Monoxide Hazard - Gas / Oil Fired Unit - Missing / Misaligned Chimney
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* The Offices of Housing and Public Housing require all exigent hazards be mitigated immediately. The office of Housing requires a written report to be filed with the local office within 72 hours of the date of the inspection. All public housing agencies are required to document activities in this area under both PHMAP and PHAS requirements for later evaluation by HUD.

The following items were observed and noted as Exigent Health and Safety hazards which require immediate attention. Use additional sheets if needed.

Item Number	Site or Building Location	DU or CA Location	Check Defect Type(s) See list above						Comment(s)	Certificate**
			A	B	C	D	E	F		
1	1	1		X					Expose wire at A.C. disconnect	
2										
3										
4										
5										

** Reserved for HUD Use.

PART 2 ... FIRE SAFETY HAZARD

Emergency Equipment / Fire Exits / Fire Escapes G-- Window Security Bars Prevent Egress H-- Fire Extinguishers Expired	Smoke Detectors I -- Missing/Inoperative
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The following items were observed and noted as Fire Safety hazards which require immediate attention.

Item Number	Site or Building Location	DU or CA Location	Check Defect Type(s) See list above			Comment(s)	Certificate**
			G	H	I		
1							
2							
3							

** Reserved for HUD Use.

Other Life-Threatening H/S Concerns Not Defined In Above Matrix.

1	
2	

Brookanne Maitland 4/26/22 Tom Feehan
 Name of Owner / Agent's Representative (Please print legibly) Date: Inspector Name:
Brookanne Maitland _____ M29504
 Signature of Owner / Agent's Representative Inspector ID #:

A copy of this notification will be provided to the appropriate local health/safety/fire code enforcement entity. Neither the inspector, the inspector's employer nor the Department of Housing and Urban Development assume any liability whatsoever expressed or implied that the above noted health and safety hazards constitute all of the health and safety deficiencies that may be present on the property. Any and all liability for the health and safety hazards noted above, as well as any health and safety hazards that may exist on the property but were not observed by the inspector, are the full and absolute responsibility of the property owner and not the inspector, the inspector's employer nor the Department of Housing and Urban Development.