Rental Inspection Consent Form

THIS INSPECTION WAS REQUESTED BY YOUR PROPERTY OWNER TO COMPLY WITH CITY OF BOSTON CODE ORDINANCE CBC 9-1.3, WHICH REQUIRES THAT RENTAL APARTMENTS BE INSPECTED AND BROUGHT INTO COMPLIANCE WITH THE STATE SANITARY (HOUSING) CODE.

BY SIGNING THIS DOCUMENT I REPRESENT THAT:

Initial:	I understand that I have the RIGHT TO REFUSE an inspection of my dwelling of without a warrant (an order signed by the Court) as explained to me, and that I again the court is the court of the court o		
	Department ("ISD") to inspect n	nt, to permit members of the Inspectional my dwelling or home.	Services
	I am 18 years of age or older.		
	· · · · · · · · · · · · · · · · · · ·	ped residence; or Iam the authorizant for this inspection (pursuant to 105 C	
	This consent ONLY authorized residence.	members of the ISD to enter and/or inspe	ect the above
Occupant's Sign	nature:	Date:	
AUTHORIZE	D REPRESENTATIVE DESIG	NATION (use this section if the occup	oant does not
	the inspection):		
I (name of occupant)		, an occupant of (address, (Ward), being above	
		-referenced residential dwelling unit. I un	
	• •	right to request that this inspection be re	
		, I do not wish to be present during this i	-
		gent to conduct this inspection with the I m VOLUNTARILY, without threats o	-
	BEFORE any inspection has ta		1 promises of
Occupant's sig	nature:	Date:	
Owner/Agent's	s Signature:	Dave:	
TO BE SIGNE	ED BY INSPECTOR:		
I have explained	d to the occupant or representativ	e the right to refuse an inspection and/or	,
•	9	d have read this form to the occupant. If	•
_	English, ISD has provided an inte	erpreter to read this form and to explain t	the occupant's
rights.			
Signature:		Date:	
Printed Name:		Inspector #:	

SEPARATE CONSENT FOR PHOTOGRAPHY AND/OR VIDEOTAPING

(Note: Only permissible where an actual occupant provides consent)

I understand my <u>right to refuse</u> to allow photography and/or videotaping without a warrant (a Court order) as explained to me and I agree VOLUNTARILY to permit members of the City of Boston Inspectional Services Department to photograph and/or videotape my residence.

Occupant's Signature:	Date:			
Print Name:				
FOR PERSONS WHO DO NOT SPEAK ENGLISH:				
TO BE SIGNED BY AN INTERPRETER:				
Interpreter (if applicable) affirms that s/he has read this form to the occupant and explained the occupant's rights to him/her in (specify language).				
Interpreter's signature:	Date:			
Print Name:	Affiliation:			