

Tenant Rights Guide

This information is a guide to some of the state-protected rights of residential tenants as stated in the Tenant Rights Guide. For more information, contact the NYS Attorney General's Office or the Housing Council at (585)546-3700.

LEASE is a contract between landlord and tenant containing terms and conditions of the rental. It cannot be changed unless both parties agree. At a minimum, leases should be written and should specify the names and addresses of the parties, amount and due dates of rent, duration of the rental, conditions of occupancy and rights and obligations of both parties.

RENT A landlord must provide tenants with a written receipt when rent is paid in any form other than a personal check. The receipt must state the payment date, amount paid, period for which the rent was paid and apartment number. The receipt must be signed by the one receiving payment and state his/her title.

SECURITY DEPOSIT Regardless of the number of units in the building, landlords must treat deposits as trust funds belonging to the tenants and may not mix deposits with other monies. Owners of six or more apartments must also put deposits in a New York bank account earning interest. All interest earned belongs to the tenant. A landlord may use the security deposit as a reimbursement for the reasonable cost of repairs beyond normal wear and tear or as reimbursement for any unpaid rent.

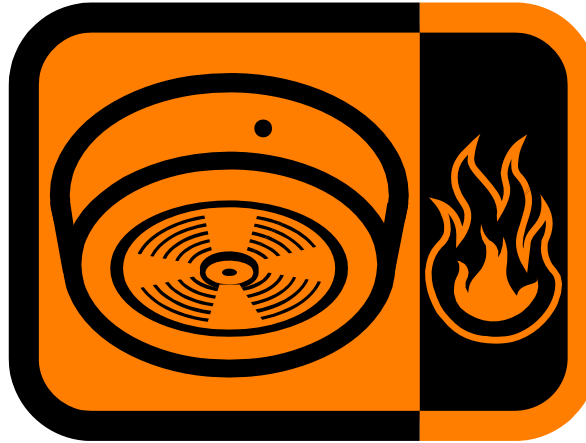
EVICITION Following appropriate notice, a landlord may bring a summary nonpayment proceeding against a tenant who significantly violates substantial obligations under the lease. To evict, a landlord must sue in court and win. Only a sheriff or constable can carry out the warrant to evict a tenant.

HABITABILITY/REPAIRS Tenants are entitled to a livable, safe, sanitary unit. Any uninhabitable condition caused by the tenant or those under his direction/control is not a breach of the habitability warranty and must be remedied by the tenant. If a landlord breaches the warranty, the tenant may sue for rent reduction or withhold rent, but then the landlord may sue for nonpayment. The tenant may then countersue for breach of warranty.

Landlords must keep apartments and public areas clean and in good repair and free from vermin, garbage, etc. Landlords must maintain electrical, plumbing, sanitary, heating/ventilating systems and appliances in safe working order. Landlords of apartments where a child 6 years or younger lives must protect against possible lead paint poisoning. For apartments built before 1960, a landlord must provide all tenants with an EPA pamphlet warning tenants of lead based paint hazards and a disclosure form advising what is known about lead paint in the apartment.

SAFETY Landlords must take minimal precautions to protect against foreseeable criminal harm. Multiple dwellings built or converted after 1968 must have self-closing self-locking entrance doors. With eight or more apartments, there must be a two-way intercom for each apartment, and buildings with three or more units shall have a secure mailbox for each apartment.

HEATING Must be supplied September 15 through May 31 and be able to maintain a temperature of not less than 68 degrees.



Have you checked your
smoke detectors
this month?



Village of Brockport

Building Department
49 State Street
Brockport, NY 14420

Ph: (585) 637-1047
Fax: (585) 637-1045

Email: szarnstorff@brockportny.org
Website: www.brockportny.org

Village of Brockport

Multiple Residency Habitability Inspections

This brochure summarizes the requirements for residential rental property inspections.

Your responsibility as a residential rental property owner is to ensure your tenants have a safe environment in which to live. This brochure lists the most common deficiencies found during inspection. Failing to make necessary repairs can cost more in time and money than the actual repairs would have cost in the first place. Why not do it right the first time?

Use this brochure to familiarize yourself with our code requirements. The most common deficiencies are addressed in Village of Brockport Code Chapters 36 and 58, and the NYS Building and Fire Prevention Codes.

Village Staff: _____

Telephone: _____

Date of Inspection: _____

Exterior

Provide proper parking – a suitable hard surface with no standing water or potholes; parking location to be a minimum of five feet from buildings; assure tenants/guests park in approved areas. **Parking or driving on lawns**, either temporarily or permanently, is **NOT** permitted and is strictly enforced by the Village.

Buildings and premises must be free from accumulation of trash and debris. Provide and maintain a sufficient number of garbage receptacles with watertight, vermin-proof fitted lids. Receptacles must be screened from public view between pickup days.

Trees, shrubs and bushes should be trimmed below first floor windows to increase security and emergency personnel access.

House number should be visible from the street, at least 5" high, and must contrast with the color of the building.

Exterior lighting shall be provided for exit paths and site security.

Roofs, siding, foundations, gutters, downspouts, utility equipment, chimneys, vents and electrical service fixtures should have no deficiencies. They shall be secured and in proper working condition. Exterior outlets shall be GFCI (ground fault protected).



Steps or stairs two risers high or greater and porches elevated more than 30" from grade require secure handrails on all open sides. Sidewalks shall be in safe condition.

Maintain windows and screens in good condition; emergency escapes and required ventilation windows must be in good working order.

Fire escapes and exits should be free from any physical impairments and maintained in good working order at all times.

Porches shall be free of trash, debris, combustible materials and open flame cooking devices. Village law prohibits upholstered furniture such as sofas and chairs to be used or stored on open porches, balconies or fire escapes.

Interior General

Stairs and handrails are solid with no missing/loose balusters or component parts. Stairs shall have proper illumination at all times.

Common corridors shall be free from trash and obstructions and well lit. Apartment doors to common hallways are self-closing/self-latching and are to have unit numbers attached to them.

Access to fire escapes and exit paths shall be unobstructed at all times. Exit doors shall operate freely and be devoid of snow, ice and all other impediments prohibiting safe egress.

Floors, walls and ceilings shall be maintained in good repair with no holes or structural deficiencies; required interior doors shall be in place; all windows are operational with all glass and frames intact.

Heating equipment is serviced annually; all fuel burning appliances, vents, vent connectors and flues are free from defects and in good operating condition. All gas heating appliances must have sufficient fresh air for combustion and ventilation.

No accumulation of combustible materials shall be near heat producing equipment/appliances. Assure there is no abnormal accumulation of trash, furniture or combustible materials in the basement, attached garages or the attic.

Maintain sewer drains from blockage; assure line openings are properly capped/sealed.

No exposed wiring allowed; electrical equipment (service panels, sub-panels, conduits, wiring, switches, outlets, fixtures) shall be in good repair and securely mounted.

Maintain all electrical equipment including panels and boxes. Ensure panels are properly sealed with no opening where circuit breakers should be installed. The electrical distribution service shall provide adequate power needs for users and the electrical equipment used in the dwelling/building.

Install and maintain smoke detectors in all common corridors/stairways adjacent to bedrooms, within all bedrooms, and in basements. If electrical multi-station smoke detectors are required or used, alarms should be wired in series so that activation of one alarm will set off all alarms in the building.

Smoke alarm recordkeeping is required of multi-family properties and must include installation and replacement of batteries upon the vacating of each dwelling unit.

Habitable Units

Maintain/install required fire separations between individual dwelling units, attached garages, corridors and from interior storage rooms.

Maintain the building free from rodent, vermin and insect infestation.

Maintain walls, floors, ceilings, windows, sashes, storms and screens in good repair. Replace broken/missing windowpanes, screens and frames as needed.

Each dwelling unit must have a securely mounted carbon monoxide detector near sleeping rooms.

Provide potable hot water for bathing/washing in bathrooms/kitchens; provide approved comfort heat in all occupied spaces (from Sept 15 to May 31.)

Assure sinks, showers, tubs and toilets drain properly. Maintain plumbing lines free from defects. Bathrooms shall have either an operable window or a ventilating fan. Maintain walls/floor adjacent to wet surface areas, and tub/shower enclosures waterproof and in good repair.

Provide GFCI ground fault electrical outlets anywhere within 6' (six feet) of a water source.

Assure electrical outlets, switches, fixtures and junction boxes are secure, grounded and have protective plates and fasteners. Provide sufficient electrical outlets, avoid the use of extension cords and plug strips. Multi-outlet plug strips, if used, shall be firmly fastened to a hard surface.

May provide fire extinguishers that are mounted in a conspicuous location and inspected annually.

All clothes washing and drying appliances shall be properly vented and shall drain appropriately.

Cooking appliances will not be used in rooms or spaces not deemed as being a kitchen.

Non-approved spaces within basements, attics, porches, etc. shall not be inhabited as living space.



BUILDING INFORMATION: PROPERTY ADDRESS: _____

Fee _____ Inspection set for date: _____ C/O Expires/Expired on: _____

Occupancy: [] Single Family [] 2-Family [] 3-Family [] Apartments [] Combo – stores/apartments [] Rooming Hse

Tax Map Parcel #(s): _____ Assessment Code _____ Zoning District _____

CERTIFICATE OF OCCUPANCY TYPE

[] New [] Alteration [] Change Use [] Transfer [] Reoccupation [] Partial

[] Conditional, Expiration Date _____ [] Renewal [] Other _____

Unit Number _____	Number of bedrooms _____	Unit Number _____	Number of bedrooms _____
Unit Number _____	Number of bedrooms _____	Unit Number _____	Number of bedrooms _____
Unit Number _____	Number of bedrooms _____	Unit Number _____	Number of bedrooms _____
(Use separate sheet to list any others)			

Check which apply:

Alarm System: Security _____ Fire _____ Fire/Security _____ Auto Dialer _____ or local alarm _____

System Type: Electrical _____ Battery device _____ Combination electrical/battery _____

[] Smoke Alarm Record Keeping Provided (sent / /) Smoke Alarm devices operational? yes ___ no ___

Carbon-Monoxide Detection Type: Electrical Fixed _____ Electrical Plug-in _____ C/O Devices operational? yes ___ no ___

Heating: Forced Air _____ Boiler _____ Electrical _____ Other _____ Date of Last Service: _____

APPLICANT / OWNER INFORMATION - Certification of Statements

Applicant Signature _____ Date _____

Owner Name Printed/Typed _____
Owner's Signature _____

Applicant Name Printed/Typed _____

Mailing Address _____

Mailing Address _____
Phone# /Fax # /Pager # _____

Phone # / Fax # / Pager # _____
Cell # / E-mail _____

Email / Cell # _____

Business Phone # / Work Phone # _____

Emergency Contact Information:		
Name _____	Phone # _____	Cell # _____

The applicant(s) hereby affirms that the above information is accurate and complete, to the best of his/her knowledge and he/she/they is/are the title owner(s) of the property or has/have been authorized by the title owner(s) to make this application.

Please return completed form to: Building Department Village of Brockport, 49 State Street, Brockport, NY 14420
(585) 637-5300 Ext 14 email: szarnstorff@brockportny.org

The property has been inspected and found to be in substantial compliance with applicable codes.

Building Inspector

Date

Memo

To:

From: Scott Zamstorff

CC:

Date: 12/19/2005

Re: Smoke & C/O alarm cert

Attached is the basic information applicable to record keeping of alarm devices. This is the minimum requirements by code, but you certainly can have additional information such as, but not limited to the following:

- Monthly testing of the devices by the tenants
- Affirmation that devices were tested in their presence, and your personal demonstration of how to test the alarm thereafter for themselves.

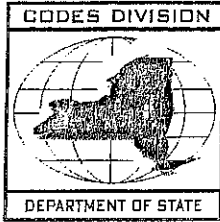
Can also add your penalties of device or battery removal or disconnection of alarms

Who to call if an alarm goes off i.e. CALL 911 and exit the building

Signature block for everyone to sign off of receiving the instruction (give copies to all tenants)

Part 704 of the NYS Property Maintenance Code

Requires either Electrical Smoke Alarms or Battery Devices in all sleeping rooms, outside of any bedrooms, on each level of the dwelling including the basement.



**State of New York
Department of State
Division of Code Enforcement & Administration**

41 State Street, Albany, New York 12231
(518) 474-4073 fax: (518) 486-4487 www.dos.state.ny.us

Rules And Regulations - Department of State

**TITLE 19 (NYCRR)
CHAPTER XXXIII - STATE FIRE PREVENTION & BUILDING CODE COUNCIL
SUBCHAPTER C - OTHER REGULATIONS**

**PART 1261 - RECORD KEEPING -
SMOKE DETECTORS IN MULTIPLE DWELLINGS**

This information is not the official version of the Official Compilation of Codes, Rules and Regulations of the State of New York (NYCRR). No representation is made as to its accuracy, nor may it be read into evidence in New York State courts. To ensure accuracy and for evidentiary purposes, reference should be made to the official NYCRR. The official NYCRR is published by West, 610 Opperman Drive, Eagan, MN 55123, 1-800-344-5009.
This document is made possible through the courtesy of the Secretary of State of the State of New York.

§1261.1 RECORDS OF SMOKE-DETECTING DEVICES.

The owner or operator of a multiple dwelling shall keep records relating to the installation and replacement of batteries, upon the vacating of the dwelling unit, of smoke-detecting devices for each unit in the building.

§1261.2 Accessibility and Availability of Records.

Such records shall:

- 1261.2(a) be located in a readily accessible location;
- 1261.2(b) be made available to the local Code Enforcement Official upon request; and
- 1261.2(c) include, but not necessarily be limited to, the following information:
 - 1261.2(c)(1) address of the building;
 - 1261.2(c)(2) name of owner or operator;
 - 1261.2(c)(3) apartment or unit number;

1261.2(c)(4) name of tenant;

1261.2(c)(5) location of each installation;

1261.2(c)(6) date of installation;

1261.2(c)(7) whether detector is battery operated or line connected;

1261.2(c)(8) date initially tested for operable condition;

1261.2(c)(9) dates of subsequent testing for operable condition;

1261.2(c)(10) date of vacating of unit; and

1261.2(c)(11) date of tenant request for replacement and/or repair of detector.

RENTAL PROPERTY MOVE-IN CHECKLIST

Property Address 517 WALLACE, RIO VISTA, CA Apt. # _____
 City RIO VISTA State CALIFORNIA Zip _____
 Tenant _____
 Move-In Date _____ Inspected By _____
 Move-Out Date _____ Inspected By _____

	MOVE IN			MOVE OUT			MOVE IN			MOVE OUT	
	OK	NOT	COMMENTS	OK	NOT		OK	NOT	COMMENTS	OK	NOT
HEAT/PLUMBING						KITCHEN					
Heating	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Walls-Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Air Cond.	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Floor	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Water Heater	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Plumbing	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Outlets/Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Washer/Dryer	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY						BATHROOMS					
Door Locks	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Walls/Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Smoke Detectors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Floor	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Fire Extinguisher	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
EXTERIOR						Outlets/Switches					
Garage/Car Port	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Landscaping	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Windows/Latches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Pool/Spa	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Exhaust Fan	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Mirror/Towel Racks	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Shelves/Cabinets	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Tub/Shower	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
ENTRY/LIVING/DINING AREAS						Basin/Faucets					
Walls/Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Toilet/Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Floor Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Front Door	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Outlets/Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Windows/Latches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Screens	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Window Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Closets	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						
Fireplace/Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>						

	MOVE IN		MOVE OUT			MOVE IN		MOVE OUT			MOVE IN		MOVE OUT				
	OK	NOT	OK	NOT		OK	NOT	OK	NOT		OK	NOT	OK	NOT			
BEDROOMS																	
Master Bedroom				Bedroom 2				Bedroom 3									
Walls	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Walls	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Walls	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Floor Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Floor Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Floor Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Doors	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Outlets/Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Outlets/Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Outlets/Switches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Light Fixtures	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Windows/Latches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Windows/Latches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Windows/Latches	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Screens/Shades	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Screens/Shades	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Screens/Shades	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Window Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Window Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Window Coverings	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
Closets/Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Closets/Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>	Closets/Other	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>

Tenant agrees with the move-in conditions noted above and understands that all discrepancies at time of move-out, other than normal wear and tear, will be deducted from Tenant's security deposit.

Tenant _____ Date _____ Owner _____ Date _____