



Urgent Notice of Health and Safety Violations

Date: _____ GAID _____ Community Name _____

The following health and safety violations were observed at your community.

<p>24 hour</p> <p>A Smoke Detector did not function or missing B Items stored next to water heater or furnace C Missing or broken Window pane D Vacant Unit or building not secured to prevent entry E HVAC unit not operable above 80° or below 55 ° F Blocked Egress - Owner/Manager caused G-K GFCI does not function when tested Kitchen G-B GFCI does not function when tested Bathroom H Exposed Wires</p>	<p>72 Hour</p> <p>I Infestation J Blocked Egress (Tenant Items) K No power or gas to unit L Trip Hazard - Tenant Items</p>
<p>48 Hour</p> <p>M HVAC not functioning btwn 56° and 79 ° N Trip Hazard, repair needed O Mold P Fire Extinguisher Out of Date/Missing</p>	

Z- Bed Bugs - Urgent attention required.
 DCA is aware that removing bed bug infestations is problematic and time consuming. While DCA does not expect this violation to be cured in 72 hours, management must act with haste to correct the infestation. Per IRS guidance, bed bug infestations must be reported on forms 8823. See the Compliance FAQ for further advice.

Other	Violation	Hours to cure	Other	Violation	Hours to cure
_____	_____	_____	_____	_____	_____

Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code	Unit	Code

Notice delivered to: _____
 Print Name _____ Signature _____

Delivered by _____ Date _____

All items must be completed in the time frame listed for each violation. When complete, sign below and e-mail to: Review.submissions@dca.ga.gov. For the subject line, please use Compliance Officer First Initial, Last Name, GA ID, and Property Name. Please submit copies of completed work orders with this submission.

Warning: Section 1001 of Title 18 of U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.

By signing below, I certify all work is complete.

_____ Date _____
 Print Name _____ Signature _____

Please do not interpret this notice to mean that the findings noted on this form are the only health and safety violations at the community. These are just violations that were observed the date of the inspection. It is the responsibility of the owner and management to comply with applicable health and safety codes, including but not limited to UPCS.

