



MOVE-IN/OUT - INSPECTION REPORT

You should conduct this inspection during daylight hours. Not only should you be looking for cracks, leaks, broken fixtures, broken appliances, etc., but make sure all safety features work. Examples include but at not limited to: working window locks, working door locks, working outdoor lighting, smoke/carbon monoxide alarms, fire extinguishers, etc. Conduct this inspection prior to moving in/after moving out personal belongings.

Digital Pictures should be taken to document all known issues.

Address: streetAddress Lease Start Date: startDate

ITEM	MOVE-IN CONDITION	MOVE-OUT CONDITION
ENTRANCE Ceilings/Walls		
ENTRANCE Windows/Doors INCLUDING LOCKS		
ENTRANCE Floors/Tiles		
KITCHEN Ceilings/Walls		
KITCHEN Windows/Doors		
KITCHEN Floors/Tiles		
KITCHEN Appliances		
HALLWAYS Ceilings/Walls		
OTHER		
HALLWAYS Windows/Doors		
HALLWAYS Floors/Tiles		



BEDROOM(s) Ceilings/Walls		
BEDROOM(s) Windows/Doors and Closets		
BEDROOM(s) Floors/Tiles		
BATHROOM Ceilings/Walls		
BATHROOM Windows/Door		
BATHROOM Floors/Tiles		
BATHROOM Toilet/Shower/Sink		
Water Pressure		
Hot Water		
Leaks/Drains		
Electrical Outlets		
Fire Extinguisher		
Pests		
Heat & Air Conditioning		



Rental Inspection Checklist - Other Items

OTHER ITEMS	MOVE-IN CONDITION	MOVE-OUT CONDITION



TO BE COMPLETED WITHIN 1 WEEK OF LEASE START DATE ON PAGE 1

Tenant signature below indicates tenant has examined the property and has noted the current condition within 1 week of the start date of the lease.

Print: _____ Sign: _____ Date: _____

BELOW: TO BE COMPLETED AT MOVE-OUT ONLY

Tenant signature below indicates tenant has examined the property and has noted the move-out condition.

Print: _____ Sign: _____ Date: _____

SECURITY DEPOSIT INFORMATION:

Per your lease, deposit returns will be sent within 60 days of delivery of possession of the premises to the Landlord or termination of the lease, whichever occurs last.

Forwarding Address:

Security deposit refunds are issued in one check to all tenants on the terminating lease unless the following written approval is completed.

Tenant signature below indicates waiver of rights to security deposit funds and authorizes check to be made out to the indicated party.

Check shall be made out to: _____

Print: **tenant1** Sign: _____ Date: _____

Print: **tenant2** Sign: _____ Date: _____

Print: Sign: _____ Date: _____

Print: Sign: _____ Date: _____