



## CHECK-IN/CHECK-OUT FORM

***This is only a guide. If items do not apply to your unit write “N/A”. Also, if items in your unit are not on this form, make certain to photograph and document the condition of the item on the “Notes” page and specify where the item located. Be as detailed as possible and check everything in your unit!!!. IN ADDITION TO YOUR NOTES BELOW, IT IS IMPERATIVE THAT YOU TAKE PICTURES OF EACH ROOM AND ITEM IN YOUR UNIT.***

Property Address: \_\_\_\_\_

Resident(s): \_\_\_\_\_

Date of Check-in: \_\_\_\_\_ Date of Check-out: \_\_\_\_\_

Tenant Phone/email: \_\_\_\_\_

### **INSTRUCTIONS**

- Fill out this entire form, make a copy and send it to your landlord. If possible, have your landlord sign the form also. Keep a copy of the form in your Rental Folder for reference when you move out.
- If there is no damage to the room or item listed, check “None”
- Identify which room you are inspecting. If there is damage to the room or item, check “Damage” and then check one of the following boxes to indicate the degree of damage. In addition, TAKE A PICTURE OF THE DAMAGE and describe the damage in the comments section
- The attached list is designed to document damage when you move into a residence. In addition to noting the damage when you move in, you will also need to document the damage/condition of your unit when you move out. Therefore, we suggest you use a blue pen for moving in comments and a black pen for moving out comments. Either that, or you can simply use two separate lists – one “before” and one “after”

**ROOM:**

(Living Room, Family Room, Dining Room, etc.)

General condition:    Very clean    clean                    OK    Dirty    Very dirty

Specify: \_\_\_\_\_  
\_\_\_\_\_

***Notable Damage: M = Minor                    S = Some                    Sig = Significant    B/U = Broken/Unusable***

Tile/Wood floor            \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Carpet                      \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Walls                        \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Specify which wall, if any, has damage: \_\_\_\_\_

Baseboard                  \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Ceiling                      \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Main Door                  \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Sliding door            \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Screen door            \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Door locks              \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Windows                    \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Screens                  \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Window locks          \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

    Covering                \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture  
    (drapes, blinds, etc)

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Ceiling fans                \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Light fixtures              \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Light switches             \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Thermostat                 \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Heat register/vent         \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Fireplace                   \_\_\_None \_\_\_Damage:    \_\_\_M \_\_\_S \_\_\_Sig    \_\_\_ B/U    \_\_\_ Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

**ROOM:**

(Living Room, Family Room, Dining Room, etc.)

General condition:    Very clean    clean            OK    Dirty    Very dirty

Specify: \_\_\_\_\_  
\_\_\_\_\_

**Notable Damage: M = Minor            S = Some            Sig = Significant    B/U = Broken/Unusable**

Tile/Wood floor        \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Carpet                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall, if any, has damage: \_\_\_\_\_

Baseboard              \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Ceiling                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Main Door                \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Sliding door        \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Screen door         \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Door locks           \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows                 \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Screens               \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Window locks        \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Covering             \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture  
    (drapes, blinds, etc)

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Ceiling fans             \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Light fixtures            \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Light switches           \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Thermostat              \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Heat register/vent       \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Fireplace                \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

**ROOM:**

(Living Room, Family Room, Dining Room, etc.)

General condition:    Very clean    clean                    OK    Dirty    Very dirty

Specify: \_\_\_\_\_  
\_\_\_\_\_

***Notable Damage: M = Minor                    S = Some                    Sig = Significant    B/U = Broken/Unusable***

Tile/Wood floor	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Carpet	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Walls	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Specify which wall, if any, has damage: _____							
Baseboard	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Ceiling	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Main Door	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Sliding door	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Screen door	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Door locks	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Windows	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Screens	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Window locks	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Covering (drapes, blinds, etc)	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

Ceiling fans	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Light fixtures	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Light switches	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Thermostat	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Heat register/vent	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture
Fireplace	<input type="checkbox"/> None	<input type="checkbox"/> Damage:	<input type="checkbox"/> M	<input type="checkbox"/> S	<input type="checkbox"/> Sig	<input type="checkbox"/> B/U	<input type="checkbox"/> Picture

Specify any damage: \_\_\_\_\_  
\_\_\_\_\_

**KITCHEN:**

General condition:    Very clean    clean                    OK    Dirty    Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor                    S = Some                    Sig = Significant    B/U = Broken/Unusable***

Stove (General)	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Surface	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Burners	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Drip Pans	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Knobs	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Fan/Hood	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Oven (General)	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Racks/Pans	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Door	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Inside	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Refrigerator (General)	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Surface	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Interior	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Drawers	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Freezer	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture

Specify any damage: \_\_\_\_\_

Cabinets/Shelves	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Counters/Drawers	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Sink/Disposal/Faucet	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Dishwasher	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Walls/Ceiling	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture

Specify which wall, if any, has damage: \_\_\_\_\_

Floor/Baseboard	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Light fixtures	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Light switches	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Doors/Locks/Screen	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Closet/Pantry	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Windows	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture
Covering	___None	___Damage:	___M	___S	___Sig	___B/U	___Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #1:** (Specify where Bedroom #1 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Screens \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Covering \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #2:** (Specify where Bedroom #2 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Screens \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Covering \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #3:** (Specify where Bedroom #3 is located in house: \_\_\_\_\_)

General condition: Very clean    clean                    OK    Dirty    Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor                    S = Some                    Sig = Significant    B/U = Broken/Unusable***

Floor/Carpet            \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door                      \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Screens                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Covering                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #4:** (Specify where Bedroom #4 is located in house: \_\_\_\_\_)

General condition: Very clean    clean                    OK    Dirty    Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor                    S = Some                    Sig = Significant    B/U = Broken/Unusable***

Floor/Carpet            \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door                      \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Screens                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

    Covering                    \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #5:** (Specify where Bedroom #5 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Screens \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Covering \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BEDROOM #6:** (Specify where Bedroom #6 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Ceiling \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Screens \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Window locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Covering \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Smoke/CO Detectors \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_



**BATHROOM #1:** (Specify where Bathroom #1 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Bathtub/Shower \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Toilet/Bowl/Tank \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Sink/Drain/Faucet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Surface/Mirror \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows/Locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Towel Rack \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Ceiling/Fan \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door/Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BATHROOM #2:** (Specify where Bathroom #2 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Bathtub/Shower \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Toilet/Bowl/Tank \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Sink/Drain/Faucet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Surface/Mirror \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows/Locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Towel Rack \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Ceiling/Fan \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door/Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BATHROOM #3:** (Specify where Bathroom #3 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Bathtub/Shower \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Toilet/Bowl/Tank \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Sink/Drain/Faucet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Surface/Mirror \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows/Locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Towel Rack \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Ceiling/Fan \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door/Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_

**BATHROOM #4:** (Specify where Bathroom #4 is located in house: \_\_\_\_\_)

General condition: Very clean clean OK Dirty Very dirty

Specify: \_\_\_\_\_

***Notable Damage: M = Minor S = Some Sig = Significant B/U = Broken/Unusable***

Bathtub/Shower \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Walls \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify which wall(s), if any, has damage: \_\_\_\_\_

Toilet/Bowl/Tank \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Sink/Drain/Faucet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Surface/Mirror \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Windows/Locks \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Vent/Outlet/Switches \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Towel Rack \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Floor/Carpet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Ceiling/Fan \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Door/Closet \_\_\_None \_\_\_Damage: \_\_\_M \_\_\_S \_\_\_Sig \_\_\_ B/U \_\_\_ Picture

Specify any damage: \_\_\_\_\_



**GENERAL CONDITION OF PROPERTY:**

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**ITEMS NEEDING REPAIR:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

Checked at move-in by: \_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

and \_\_\_\_\_ (Owner/Agent) \_\_\_\_\_ (Date)

Checked at move-in by: \_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

\_\_\_\_\_ (Resident) \_\_\_\_\_ (Date)

and \_\_\_\_\_ (Owner/Agent) \_\_\_\_\_ (Date)