**MOVE-IN/MOVE-OUT INSPECTION**

Property Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tenant’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Owner’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROPERTY CONDITION DESCRIPTION KEY:**

**OK = Acceptable; D = Damaged; NP = Not Provided; ST = Stained;**

**SCR = Scratched; CR = Cracked; H = Holes;** **NW = Not Working**

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| **Entry** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Door\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Stairs\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Window\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| **Living Room** |  |  |
| Carpet/Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fireplace\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Grate/Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Dining Room** |  |  |
| Floors/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Kitchen** |  |  |
| Range\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Garbage Disp.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Oven\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Broiler Pan\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cabinets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Hood\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Curtains\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Counters\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Refrigerator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Sink\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Dishwasher\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Miscellaneous\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Hallway Up** |  |  |
| Closet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Smoke Detector\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Hallway Down** |  |  |
| Closet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
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| **Main Bath** |  |  |
| Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Glass Enclosures\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Mirror\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Towel Rack\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Window\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sink\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cabinets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tub/Shower\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Counter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Toilet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fan\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Master Bedroom** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Closets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Master Bath** |  |  |
| Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Glass Enclosures\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Mirror\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tub/Shower\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Window\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fan\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Sink\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cabinets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Towel Rack \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Counter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Toilet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Bedroom** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Closets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Bedroom** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixtures\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Closets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Bedroom** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Closets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceilings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Family Room** |  |  |
| Floor/Carpet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fire Place\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixtures\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Grate Screen\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceilings\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Drapes\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| **Bath** |  |  |
| Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Glass Enclosure\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Mirror\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Towel Rack\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Window\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| **Bath (Continued)** |  |  |
| Sink\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Cabinets\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tub/Shower\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Counter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Toilet\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fan\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Utility Room** |  |  |
| Washer Dryer\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Floors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Tub\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Ceiling\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Doors\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Light Fixture\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Garage** |  |  |
| Floor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Windows\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Door Openers\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Walls\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Screens\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| **Exterior** |  |  |
| Deck/Patio\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Downspouts\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Fence\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Gutter\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| Roof\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |
| **Yard (Front, Side and Back)** |  |  |
| Grass\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Shrubs/Trees\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Flowerbeds\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Miscellaneous**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I/we hereby agree with the herein noted property condition report and understand this will be used to determine property condition at the time I/we move out and damages or cleaning if any will be deducted from my/our deposit per Lease Rental Agreement. I/we acknowledge receipt of a copy of this report form and keys as noted below.

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| Property Manager\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tenant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Keys #\_\_\_\_\_\_\_\_\_\_\_Issued\_\_\_\_\_\_\_\_\_\_\_Returned\_\_\_\_ | Tenant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Garage openers\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Date of Inspection\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
|  | IN | OUT |

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