Tenant Move In/Move Out Property Inspection Form

Resident's Name: ______________________________
Property Address: ______________________________
Move-In Date: ______________________________
Move-Out Date: ______________________________

Master Bedroom	**Condition**		
	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			

Notes:

Bedroom			
	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			

Notes:

Bedroom			
	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			

Notes:

Bedroom			
	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			

Notes:

Bathroom	**Condition**		
	New	Good	Poor
Walls/Ceiling			
Floors			
Light Fixture			
Sink			
Toliet			
Tub/Shower			
Medicine Cabinet			
Window			
Exhaust Fan			
Towel Racks			

Notes:

Bathroom			
	New	Good	Poor
Walls/Ceiling			
Floors			
Light Fixture			
Sink			
Toliet			
Tub/Shower			
Medicine Cabinet			
Window			
Exhaust Fan			
Towel Racks			

Notes:

Living Room			
	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			
Fire Place			

Notes:

The information contained in this document is general in nature and provided as reference material only. It is not intended to provide legal, tax or financial advice, nor does it replace (or purport to replace) any need to obtain individual legal, tax or financial advice. Any legal, tax or financial advice about your own position or personal situation in relation to anything covered in this document should always be obtained from a qualified legal, tax, or financial professional.

Dining Room	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			

Notes:

Kitchen	New	Good	Poor
Walls/Ceiling			
Floors			
Windows			
Screens			
Window Covering			
Light Fixture			
Sink			
Cabinets			
Range & Oven			
Refrigerator			
Dishwasher			
Garbage Disposal			

Notes:

Miscellaneous	New	Good	Poor
Door Opener			
Keys			

Additional Notes:

Service Equipment	New	Good	Poor
Air Conditioner			
Heater			

Notes:

Utility Area	New	Good	Poor
Floors			
Walls/Ceiling			
Washer/Dryer			

Notes:

Garage/Storage	New	Good	Poor
Floors			
Walls/Ceilings			
Light Fixture			
Windows			
Screens			

Notes:

Exterior	New	Good	Poor
Walls			
Trim			
Landscape			

Notes:

The undersigned acknowledges that the above is the condition of the property moving in.

Tenant: _____ _____
Print Signature

Tenant: _____ _____
Print Signature

Landlord/Agent: _____ _____
Print Signature

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