


Outgoing Inspection Report


Name: e
Surname: e
Address: d
Flat: dd

| Checklist | Condition | Notes | Images |
|-------------------------------|-------------|---|---|
| Flat | Okay | | |
| Floor | Good | | |
| Door | Good | | |
| Lights | Good | | |
| Windows | Good | | |
| Ceiling | Good | | |
| Walls | Good | | |
| Built in Cupboards | Defective | The hinge is loose, and I can only see 1 screw in the hinge |  |
| Electricity box | Good | | |
| Keys | Good | | |
| Bedroom / living space | Okay | | |
| Countertop | Good | | |
| Bathroom | Okay | | |
| Basin & taps | Good | | |

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| | | | |
|----------------|-------------|---|---|
| Toilet | Good | | |
| Shower | Defective | The tap is dripping even after I closed the tap |  |
| Kitchen | Okay | | |
| Sink & Taps | Good | | |
| Countertop | Good | | |

Cleaned: Yes

Countertop status: Not Okay

Countertop notes: asdfasdf

We, the undersigned, acknowledge that we have jointly carried out the Outgoing Inspection and hereby declare the condition of the dwelling/property as above.

Tenant: _____

Landlord: _____

Date: _____

Date: _____

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