Move In — Move Out Checklist

Other

Before you move-in and upon moving-out, be sure to carefully complete this check-list.

Tenant Name(s):					
Address & Apt. No.:		City	9	State	Zip
· ·					-
Move-In Date	Inspection Date	Time	Ву		
Move-Out Date	Inspection Date	Time	Ву		
[Estima	ated Cost of
	Condition on Arrival	Condition on Departure		Repair/Replacement	
LIVING ROOM					
Floors & Floor Coverings					
Drapes & Window Coverings					
Walls & Ceilings					
Light Fixtures					
Windows, Screens, & Doors					
Front Door & Locks					
Fireplace					
Other					
KITCHEN					
Floors & Floor Coverings					
Walls & Ceilings					
Light Fixtures					
Cabinets					
Counters					
Stove/Oven					
Refrigerator					
Dishwasher					
Garbage Disposal					
Sink & Plumbing					
Windows, Screens, & Doors					

Move In — Move Out Checklist

	Condition on Arrival	Condition on Departure	Estimated Cost of Repair/Replacement
DINING ROOM			
Floors & Floor Coverings			
Walls & Ceilings			
Light Fixtures			
Windows, Screens, & Doors			
Other			
BEDROOM #1			
Floors & Floor Coverings			
Walls & Ceilings			
Light Fixtures			
Windows, Screens, & Doors			
Other			
BEDROOM #2			
Floors & Floor Coverings			
Walls & Ceilings			
Light Fixtures			
Windows, Screens, & Doors			
Other			
ADD ADDITIONAL ROOM			

Move In — Move Out Checklist

MOVE-IN			MOVE-OUT		
Date:	Signature:	/	Date:		
Date:	Signature:	/	Date:		
Date:	Signature:	/	Date:		
	(s)) understand that unless other the security deposit at the time	·	be the tenant's responsibility and will		
MOVE-IN		MOVE-OUT			
Date:		Date:			
Landlord/Agent Signature		Landlord/Agent Signa	Landlord/Agent Signature		
Landlord and Ten	ant acknowledge that video an	d/or photos (digital or otherwise)	have been taken of the premises.		
The original conie	es/files are in the nossession of	the Landlord Tenar	nt		