

MOVE-IN / MOVE-OUT CONDITION CHECKLIST

1. **THIS CHECKLIST** is hereby made a part of the Residential Lease Agreement dated _____ by and between
2. **Landlord:** _____
3. **Tenant:** _____
4. **Premises Address:** _____
5. **Move-in Date** _____ **Move-out Date** _____
6. **Inspection Date** _____ **Inspection Date** _____

7. Complete the move-in section of this form and return it to your Landlord within five (5) days or _____ days after occupancy.
8. All items are deemed to be in good condition unless noted otherwise. Test all locks, window latches, smoke detectors, and
9. equipment. **This form is not a repair request.** Submit all requests for repairs separately in accordance with your lease. You and your
10. Landlord will also use this form upon move-out. Keep a copy for your records. Note any defects in the items listed below. **If you fail to**
11. **return this form you will be held responsible for any damages, and you will be accepting the Premises in its current condition.**

EXTERIOR ITEMS

MOVE-IN CONDITION

MOVE-OUT CONDITION

- | | | |
|---|--|-------|
| 12. Fences & Gates | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 13. Lawn (Trees / Shrubs / Landscaping) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 14. Paint | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 15. Front Door — Door Knob and Locks | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 16. Back Door — Door Knob and Locks | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 17. Fountain | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 18. Grill | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 19. Swimming Pool | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 20. Hot tub / Spa | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 21. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
22. Water Shut-Off Valve Located? Yes No Breaker Panel Located? Yes No

23. **COMMENTS:** _____

24. _____

GARAGE / CARPORT

MOVE-IN CONDITION

MOVE-OUT CONDITION

- | | | |
|---------------------------------|--|-------|
| 25. Ceilings, Walls, Baseboards | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 26. Floor / Driveway | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 27. Auto Door Opener | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 28. Remotes | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 29. Garage Door | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 30. Plugs & Switches | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 31. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |

32. **COMMENTS:** _____

33. _____

ENTRY & HALL

MOVE-IN CONDITION

MOVE-OUT CONDITION

- | | | |
|---|--|-------|
| 35. Ceiling, Walls (Paint), Baseboards, Vent Covers | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 36. Doors (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 37. Flooring | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 38. Stairwell / Handrails | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 39. Light Fixtures | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 40. Closet Shelves & Rods | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 41. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |

42. **COMMENTS:** _____

LIVING ROOM

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 43. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 44. Fireplace Good Other _____
- 45. Doors (Close properly / Condition) Good Other _____
- 46. Flooring (Note burns, tears, stains) Good Other _____
- 47. Lights & Ceiling Fans Good Other _____
- 48. Windows & Screens Good Other _____
- 49. Window coverings Good Other _____
- 50. Plugs & Switches Good Other _____
- 51. Other: _____ Good Other _____
- 52. **COMMENTS:** _____
- 53. _____

KITCHEN

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 54. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 55. Flooring Good Other _____
- 56. Lights Good Other _____
- 57. Plugs & Switches Good Other _____
- 58. Cabinets (Close properly / Condition) Good Other _____
- 59. Drawers (Close properly / Condition) Good Other _____
- 60. Countertops Good Other _____
- 61. Sink & Faucet Good Other _____
- 62. Disposal Good Other _____
- 63. Dishwasher Good Other _____
- 64. Microwave Good Other _____
- 65. Refrigerator Good Other _____
- 66. Stove Good Other _____
- 67. Fan, filter & hood Good Other _____
- 68. Other: _____ Good Other _____
- 69. **COMMENTS:** _____
- 70. _____

DINING ROOM

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 71. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 72. Flooring Good Other _____
- 73. Lights & Ceiling Fans Good Other _____
- 74. Windows & Screens Good Other _____
- 75. Window coverings Good Other _____
- 76. Plugs & Switches Good Other _____
- 77. Other: _____ Good Other _____
- 78. **COMMENTS:** _____
- 79. _____

MASTER BEDROOM

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 80. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 81. Doors (Close properly / Condition) Good Other _____
- 82. Flooring (Note burns, tears, stains) Good Other _____
- 83. Lights & Ceiling Fans Good Other _____
- 84. Windows & Screens Good Other _____
- 85. Window coverings Good Other _____
- 86. Plugs & Switches Good Other _____
- 87. Closet Shelves & Rods Good Other _____
- 88. Other: _____ Good Other _____
- 89. **COMMENTS:** _____
- 90. _____

BEDROOM #2

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 91. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 92. Doors (Close properly / Condition) Good Other _____
- 93. Flooring (Note burns, tears, stains) Good Other _____
- 94. Lights & Ceiling Fans Good Other _____
- 95. Windows & Screens Good Other _____
- 96. Window coverings Good Other _____
- 97. Plugs & Switches Good Other _____
- 98. Closet Shelves & Rods Good Other _____
- 99. Other: _____ Good Other _____

100. **COMMENTS:** _____

101. _____

BEDROOM #3

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 102. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 103. Doors (Close properly / Condition) Good Other _____
- 104. Flooring (Note burns, tears, stains) Good Other _____
- 105. Lights & Ceiling Fans Good Other _____
- 106. Windows & Screens Good Other _____
- 107. Window coverings Good Other _____
- 108. Plugs & Switches Good Other _____
- 109. Closet Shelves & Rods Good Other _____
- 110. Other: _____ Good Other _____

111. **COMMENTS:** _____

112. _____

BEDROOM #4 / DEN / LOFT

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 113. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 114. Doors (Close properly / Condition) Good Other _____
- 115. Flooring (Note burns, tears, stains) Good Other _____
- 116. Lights & Ceiling Fans Good Other _____
- 117. Windows & Screens Good Other _____
- 118. Window coverings Good Other _____
- 119. Plugs & Switches Good Other _____
- 120. Closet Shelves & Rods Good Other _____
- 121. Other: _____ Good Other _____

122. **COMMENTS:** _____

123. _____

BATHROOM (MASTER)

MOVE-IN CONDITION

MOVE-OUT CONDITION

- 124. Ceiling, Walls (Paint), Baseboards, Vent Covers Good Other _____
- 125. Doors (Close properly / Condition) Good Other _____
- 126. Flooring Good Other _____
- 127. Light Fixtures Good Other _____
- 128. Plugs & Switches Good Other _____
- 129. Cabinets (Close properly / Condition) Good Other _____
- 130. Countertops Good Other _____
- 131. Sinks & Faucets Good Other _____
- 132. Soap dishes, towel bars, shower rod, Good Other _____
- 133. paper holders secure
- 134. Mirrors Good Other _____
- 135. Medicine Cabinet Good Other _____
- 136. Tub / Shower & Faucets Good Other _____
- 137. Toilet Good Other _____
- 138. Plumbing working properly Good Other _____

- 139. Linen Closet Good Other _____
- 140. Fan Good Other _____
- 141. Other: _____ Good Other _____
- 142. **COMMENTS:** _____
- 143. _____

BATHROOM #2

- | | MOVE-IN CONDITION | MOVE-OUT CONDITION |
|--|--|--------------------|
| 144. Ceiling, Walls (Paint), Baseboards, Vent Covers | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 145. Doors (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 146. Flooring | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 147. Light Fixtures | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 148. Plugs & Switches | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 149. Cabinets (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 150. Countertops | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 151. Sinks & Faucets | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 152. Soap dishes, towel bars, shower rod | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 153. Tub / Shower & Faucets | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 154. Toilet | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 155. Plumbing working properly | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 156. Fan | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 157. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 158. COMMENTS: _____ | | |
| 159. _____ | | |

BATHROOM #3

- | | MOVE-IN CONDITION | MOVE-OUT CONDITION |
|--|--|--------------------|
| 160. Ceiling, Walls (Paint), Baseboards, Vent Covers | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 161. Doors (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 162. Flooring | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 163. Light Fixtures | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 164. Plugs & Switches | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 165. Cabinets (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 166. Countertops | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 167. Sinks & Faucets | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 168. Soap dishes, towel bars, shower rod | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 169. Tub / Shower & Faucets | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 170. Toilet | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 171. Plumbing working properly | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 172. Fan | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 173. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 174. COMMENTS: _____ | | |
| 175. _____ | | |

UTILITY / LAUNDRY ROOM

- | | MOVE-IN CONDITION | MOVE-OUT CONDITION |
|--|--|--------------------|
| 176. Fan | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 177. Cabinets (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 178. Sink | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 179. Washer | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 180. Dryer | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 181. Washer / Dryer Hookups | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 182. Dryer Vent | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 183. Flooring (Note burns, tears, stains) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 184. Doors (Close properly / Condition) | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 185. Switches | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 186. Other: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 187. COMMENTS: _____ | | |
| 188. _____ | | |

Move-In / Move-Out Condition Checklist >>

ADDITIONAL ROOM

189. Room Name: _____

| | MOVE-IN CONDITION | MOVE-OUT CONDITION |
|------|--|--------------------|
| 190. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 191. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 192. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 193. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 194. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 195. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 196. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 197. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 198. | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |

OTHER

| | MOVE-IN CONDITION | MOVE-OUT CONDITION |
|-------------------------------|--|--------------------|
| 199. Heating | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 200. A/C | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 201. Swamp Cooler | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 202. Filters size: _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 203. Fire Sprinklers | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 204. Security Alarm | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 205. Smoke Detector(s) | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 206. Carbon Monoxide Detector | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 207. Trash Removed | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____ |
| 208. _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |
| 209. _____ | <input type="checkbox"/> Good <input type="checkbox"/> Other | _____ |

210. COMMENTS: _____
211. _____

FIXTURE / PERSONAL PROPERTY INVENTORY

212. The following fixtures / personal property are also included in the Residence (check all that apply):

| | QUANTITY | BRAND | COLOR | SERIAL # | CONDITION |
|--|----------|-------|-------|----------|-----------|
| 213. <input type="checkbox"/> Refrigerator | _____ | _____ | _____ | _____ | _____ |
| 214. <input type="checkbox"/> Stove | _____ | _____ | _____ | _____ | _____ |
| 215. <input type="checkbox"/> Dishwasher | _____ | _____ | _____ | _____ | _____ |
| 216. <input type="checkbox"/> Washer | _____ | _____ | _____ | _____ | _____ |
| 217. <input type="checkbox"/> Dryer | _____ | _____ | _____ | _____ | _____ |
| 218. <input type="checkbox"/> _____ | _____ | _____ | _____ | _____ | _____ |
| 219. <input type="checkbox"/> _____ | _____ | _____ | _____ | _____ | _____ |
| 220. <input type="checkbox"/> _____ | _____ | _____ | _____ | _____ | _____ |
| 221. <input type="checkbox"/> _____ | _____ | _____ | _____ | _____ | _____ |

222. COMMENTS: _____
223. _____
224. _____
225. _____
226. _____
227. _____

Move-In / Move-Out Condition Checklist >>

- 228. Landlord and Tenant acknowledge that video and/or photos (digital or otherwise) may have been taken of the Premises condition and are
- 229. in Landlord's possession. Tenant may take video and/or photos at Tenant's own expense.
- 230. **TENANT AGREES** that the above information is an accurate account of the condition and contents of the Premises and acknowledges
- 231. receiving a copy hereof. Tenant understands that unless otherwise noted, all discrepancies will be Tenant's responsibility and will be
- 232. deducted from the security deposit at time of move out. Tenant may be present at the move-out inspection and, upon request, the Tenant
- 233. shall be notified when the move-out inspection will occur.

***** PLEASE MAKE A COPY FOR YOUR RECORDS *****

MOVE-IN

234. Completed on this _____ day of _____, 20_____.

235. _____

| | | |
|-----------------------|-------------|------|
| ^ NAME (PLEASE PRINT) | ^ SIGNATURE | DATE |
|-----------------------|-------------|------|

236. _____

| | | |
|-----------------------|-------------|------|
| ^ NAME (PLEASE PRINT) | ^ SIGNATURE | DATE |
|-----------------------|-------------|------|

237. This checklist must be signed and dated by the Landlord or Property Manager to be deemed received.

238. _____

| | |
|-----------------------------|------|
| ^ LANDLORD/PROPERTY MANAGER | DATE |
|-----------------------------|------|

MOVE-OUT

239. Completed on this _____ day of _____, 20_____.

240. _____

| | | |
|-----------------------|-------------|------|
| ^ NAME (PLEASE PRINT) | ^ SIGNATURE | DATE |
|-----------------------|-------------|------|

241. _____

| | | |
|-----------------------|-------------|------|
| ^ NAME (PLEASE PRINT) | ^ SIGNATURE | DATE |
|-----------------------|-------------|------|

242. This checklist must be signed and dated by the Landlord or Property Manager to be deemed received.

243. _____

| | |
|-----------------------------|------|
| ^ LANDLORD/PROPERTY MANAGER | DATE |
|-----------------------------|------|