Tenant Name:				
Address & Apt. No.:	City:		State:	
Move-in Date:	Inspection Date:	Time:	By:	
Move-out Date:	Inspection Date:	Time:	Ву:	

RENTAL MOVE-IN & MOVE-OUT CHECKLIST

Be sure to carefully complete this checklist before you move-in and upon moving out. The premises are clean, good working order, and undamaged, unless otherwise noted. Use the key below for reference.

Key & Abbreviations

NC: Needs Cleaning
NP: Needs Painting
NR: Needs Repair
NSC: Needs Spot Cleaning
NSP: Needs Spot Painting
RP: Needs Replacing

SC: Scratched

Entrance/Hall

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			



	Move-in	Move-out	Cost
Screens			
Closet			
Shades/blinds			
Electrical fixtures			
Light bulbs			

Living Room

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades			
Closet			
Electrical fixtures			
Light bulbs			

Notes:		



Kitchen

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Curtain			
Cabinets			
Drawers			
Sink			
Counters			
Fan			
Electrical fixtures			
Light bulbs			
REFRIGERATOR			
Inside/parts			
Outside			
Light			
Sink			



STOVE/OVEN		
Outside		
Burners		
Vent		
Timer/controls		
Surface		
Light		
Racks		
Drip		
DISHWASHER		
Inside/parts		
Outside		
Controls		
Notes:	*	

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			



	Move-in	Move-out	Cost
Doors			
Windows			
Screen			

Notes:		

Bedroom #1

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/blinds			
Electrical fixtures			
Light bulbs			

Notes:	
110163	



Bedroom #2

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/blinds			
Electrical fixtures			
Light bulbs			

Notes:		
NULES.		

Bathroom #1

	Move-in	Move-out	Cost
Floor			
Walls/tile			
Ceiling			
Doors			
Cabinets			



	Move-in	Move-out	Cost
Drawers			
Sink			
Shelves			
Mirror			
Tub/shower			
Caulking			
Counter			
Fan			
Bowl/seat			
Towel rack			
Window			
Electrical fixtures			
Light bulbs			

Bathroom	#2

Notes: _____

	Move-in	Move-out	Cost
Floor			
Walls/tile			
Ceiling			



	Move-in	Move-out	Cost
Doors			
Cabinets			
Drawers			
Sink			
Shelves			
Mirror			
Tub/shower			
Caulking			
Counter			
Fan			
Bowl/seat			
Towel rack			
Window			
Electrical fixtures			
Light bulbs			

A.L.		
Notes:		
INULES.		



Front Porch

	Move-in	Move-out	Cost
Electrical fixtures			
Light bulbs			

Notes:	

Back Porch

	Move-in	Move-out	Cost
Electrical fixtures			
Light bulbs			

Notes: _	

Garage

	Move-in	Move-out	Cost
Floor			
Walls			
Ceiling			
Electrical fixtures			
Light bulbs			

Notes:		



Mechanical

	Move-in	Move-out	Cost
Water heater			
Smoke detector			
Thermostat			
Furnace			
A/C			

Notes:	

House Keys

	Move-in	Move-out	Cost
Front door			
Mailbox			
Others:			

Notes:			



Other

	Move-in	Move-out	Cost		
Parking area					
Lawn/garden					
Patio/deck					
Washer/dryer					
Notes:					
Total Cost of Damag	es:	-			
☐ Yes ☐ No	Videos and/or photos of the (unit have been taken.			
If yes,					
☐ Landlord ☐ Tenant	\square Landlord \square Tenant is in possession of the original copies of photos and/or videos.				
I/We (the tenant(s)) understand that unless otherwise noted, all discrepancies will be the tenant's responsibility and will be deducted from the security deposit at the time of move-out.					
Move-In Inspection:					
Landlord/Agent Signature	:	Date:			
Tenant Signature	:	Date:			
Tenant Signature	:	Date:			
Move-Out Inspection:					
Landlord/Agent Signature	:	Date:			
Tenant Signature	:	Date:			
Tenant Signature	:	Date:			
Tenant Forwarding Address	:				

