

## Property Move-in / Move-Out Checklist

Move-In Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Move-Out Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Address: \_\_\_\_\_

Tenant Name(s): \_\_\_\_\_

**INSTRUCTIONS:** Inspect all areas of the property. If there is a problem, damage to the property or a repair needed, place a number in the brackets and explain at the bottom of the page.

Property Move-In / Move-Out Checklist				
<p><b>FRONT ENTRANCE</b></p> <p>[ ] DOOR</p> <p>[ ] DOOR BELL</p> <p>[ ] LIGHTS</p> <p><b>REAR ENTRANCE</b></p> <p>[ ] DOOR</p> <p>[ ] DOOR BELL</p> <p>[ ] LIGHTS</p> <p><b>DINING ROOM</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p> <p><b>LIVING ROOM</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p>	<p><b>KITCHEN</b></p> <p>[ ] CABINETS</p> <p>[ ] CEILING</p> <p>[ ] COUNTERS</p> <p>[ ] CLOSET</p> <p>[ ] DISHWASHER</p> <p>[ ] DISPOSAL</p> <p>[ ] FLOORS</p> <p>[ ] LIGHTS</p> <p>[ ] OVEN/STOVE</p> <p>[ ] REFRIGERATOR</p> <p>[ ] SINK</p> <p>[ ] TILE</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p> <p><b>BEDROOM #1</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p> <p><b>HALLWAYS</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p><b>HVAC</b></p> <p>[ ] AIR</p> <p>[ ] HEAT</p>	<p><b>BEDROOM #2</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p> <p><b>BEDROOM #3</b></p> <p>[ ] CARPET/FLOOR</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] LIGHTS</p> <p>[ ] WALLS</p> <p>[ ] WINDOWS</p>	<p><b>BATHROOM #1</b></p> <p>[ ] CABINETS</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] FAN</p> <p>[ ] FLOOR</p> <p>[ ] LIGHTS</p> <p>[ ] MIRRORS</p> <p>[ ] SHOWER/TUB</p> <p>[ ] SINK</p> <p>[ ] TILE/WALLS</p> <p>[ ] TOILET</p> <p>[ ] WINDOWS</p> <p><b>BATHROOM #2</b></p> <p>[ ] CABINETS</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] FAN</p> <p>[ ] FLOOR</p> <p>[ ] LIGHTS</p> <p>[ ] MIRRORS</p> <p>[ ] SHOWER/TUB</p> <p>[ ] SINK</p> <p>[ ] TILE/WALLS</p> <p>[ ] TOILET</p> <p>[ ] WINDOWS</p>	<p><b>BATHROOM #3</b></p> <p>[ ] CABINETS</p> <p>[ ] CEILING</p> <p>[ ] CLOSET</p> <p>[ ] DOORS</p> <p>[ ] FAN</p> <p>[ ] FLOOR</p> <p>[ ] LIGHTS</p> <p>[ ] MIRRORS</p> <p>[ ] SHOWER/TUB</p> <p>[ ] SINK</p> <p>[ ] TILE/WALLS</p> <p>[ ] TOILET</p> <p>[ ] WINDOWS</p> <p><b>PATIO/BALCONY</b></p> <p>[ ] FLOOR</p> <p>[ ] WALLS</p> <p><b>OTHER AREAS</b></p> <p>[ ] _____</p> <p>[ ] _____</p> <p>[ ] _____</p> <p>[ ] _____</p> <p>[ ] _____</p> <p>[ ] _____</p> <p>[ ] _____</p>

1. \_\_\_\_\_
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- 30. \_\_\_\_\_
- 31. \_\_\_\_\_

Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager Signature: \_\_\_\_\_ Date: \_\_\_\_\_