

Tenant Move-In/Out Inspection Checklist

Tenant Name: _____

Address: _____

Date: _____

Area / Item	Condition @ move-in	Condition @ move-out	Additional Comments
Keys			
Garage Door & Opener			
KITCHEN			
Floors/ floor covering			
Walls & ceiling			
Windows/ locks/ screens			
Window coverings/Blinds			
Doors/ knobs			
Light fixtures/ bulbs			
Cabinets/ shelves/ pantry			
Drawers/ countertops			
Sinks/ stoppers/ faucets			
Drains/ plumbing			
<i>Stove / Oven</i>			
Outside			
Burners			
Drip pans			
Hood vent			
Timer / controls			
Broiler pan			
Lights			
<i>Refrigerator</i>			
Outside			
Inside			
Dishwasher			
Garbage disposal			
Microwave			
Living Room			
Floors/ floor covering			
Walls & ceiling			
Windows/ locks/ screens			
Window coverings/Blinds			
Doors/ locks			
Light fixtures/ bulbs			
Closet/ shelves/ bookcase			
Dining Room			
Floors/ floor covering			
Walls & ceiling			
Windows/ locks/ screens			
Window coverings			
Doors/ locks			
Light fixtures/ bulbs			
Closet/ shelves			
Basement			

Floors/ floor covering			
Walls & ceiling			
Windows/ locks / screens			
Doors/ locks			
Light fixtures/ bulbs			
Ventilation/water hookups			
A/C & Furnance			
ENTRY / HALL / STAIRS			
Floors/ floor covering			
Walls & ceiling			
Windows/ locks / screens			
Window coverings			
Doors/ locks			
Light fixtures/ bulbs			
Closet/ shelves			
FRONT ENTRY / PORCH			
Light fixtures/ bulbs			
Doorbell			
BACK / SIDE ENTRY			
Light fixtures/ bulbs			
Other			
GARAGE / CARPORT			
Floor type / condition			
Doors / locks			
Light fixtures / bulbs			
Garage Door & Opener			
GROUNDS			
Lawn / trees			
Flower beds/ gardens			
Sprinklers/ hose bibs			
Walkways			
Driveway			
Parking area			
Patio / deck			
BATHROOM #1			
Floor/ floor covering			
Walls / tile / grout / ceiling			
Windows/ locks / screens			
Window coverings/ blinds			
Doors / knobs / locks			
Light fixtures/ bulbs			
Exhaust fans / heater			
Counters / shelves			
Mirrors / cabinets			
Sink / faucet / basin			
Drains / plumbing			
Tub / shower caulking			
Shower head / tub faucet			
Shower door / curtain			
Shower tracks			
Towel racks			
Toilet bowl/ seat			

Toilet paper holder			
BATHROOM #2			
Floor/floor covering			
Walls/tiles/grout/ceiling			
Window/locks/ screens			
Window Coverings/Blinds			
Doors/knobs/ locks			
Light fixtures/ bulbs			
Exhaust fans/ heater			
Counters/ shelves			
Mirrors/ cabinets			
Sink/ faucet/ basin			
Drains/ plumbing			
Tub/ shower caulking			
Shower head / tub faucet			
Shower door/ curtain			
Shower tracks			
Towel racks			
Toilet Bowl Seat			
Toilet Paper Holder			
BEDROOM #1			
Floors/ floor covering			
Walls & ceilings			
Windows/ locks/ screens			
Window coverings			
Doors/ knobs/ locks			
Closets/ shelves			
Light fixtures/ bulbs			
BEDROOM #2			
Floors/ floor covering			
Walls & ceilings			
Windows/ locks/ screens			
Window coverings			
Doors/ knobs/ locks			
Closets/ shelves			
Light fixtures/ bulbs			
BEDROOM #3			
Floors/ floor covering			
Walls & ceilings			
Windows/ locks/ screens			
Window coverings			
Doors/ knobs/ locks			
Closets/ shelves			
Light fixtures/ bulbs			
BEDROOM #4			
Floors/ floor covering			
Walls & ceilings			
Windows/ locks/ screens			
Window coverings			
Doors/ knobs/ locks			
Closets/ shelves			
Light fixtures/ bulbs			

Signatures

Inspection checklist completed on (date) _____ at (time) _____ and approved by:

Landlord / Manager: _____

Tenants: _____

Address where the deposit can be sent:
