

## MOVE-IN/MOVE-OUT INSPECTION CHECKLIST

Rental Ten	Tenant Name: Address:								
	Date:								
Items Returned:									
# of keys returned									
# of garage remotes									
returned	<u> </u>								
Mailbox # & # keys returned									
APPLIANCE INFO				Brand			М	odel #	Serial #
Stove/Oven									
Refrigerator									
Microwave									
Dishwasher									
Garbage Disposal									
Washer									
Dryer									
Furnace Filter						F	ilter Siz	e:	
Area/Item	IN C	Condi	tion		OUT	Con	ondition S=Satisfactory/Clean N= No Satisfactory O=Other		
FRONT ENTRY/DECK	S	N	0		S	N	0		•
Light fixtures/Bulbs									
Doors/handle									
Doorbell									
Flooring									
Other									
ENTRY/HALL/STAIRS	S	N	0		S	N	0		
Floors/Floor Coverings									
Walls/Ceilings									
Windows/Locks/Screens									
Window Covering									
Doors/Handles									
Light Fixtures/Bulbs									
Closet Shelves/Door									
Other									
Deck									
BACK ENTRY	S	N	0		S	N	0		
Light Fixtures/Bulbs									
Doorbell									
Flooring									
Other									
KITCHEN	S	N	0		S	N	0		

Area/Item	IN C	Condi	dition OUT Condition		ition	S=Satisfactory/Clean N= Not Satisfactory O=Other		
Walls/Ceiling								•
Windows/Locks/Screens								
Window Covering								
Doors/Handles								
Light Fixtures/Bulbs								
Cabinets/Shelves/Doors								
Drawers								
Countertops								
Sinks/Stoppers/Faucets								
Drains/Plumbing								
Other								
APPLIANCES	S	N	0		S	N	0	
Stove/Oven Outside								
Burners								
Drip Pans								
Hood Vent								
Timers/Controls								
Broiler Pan								
Lights								
Refrigerator	S	N	0		S	N	0	
Outside Door/Grate	3	IV	0		3	IV		
Inside Cabinets/Under								
Drawers								
Other								
Dishwasher	S	N	0		S	N	0	
Outside door	3	IN	U		3	IN	U	
Soap Dispenser door								
Slide In/Out Holders								
Other								
Garbage Disposal	S	N	0		S	N	0	
Switch On/Off								
Other							_	
Microwave	S	N	0		S	N	0	
Outside door								
Inside glass plate								
Other								
LIVING ROOM	S	N	0		S	N	0	
Floors/Floor Covering								
Walls/Ceiling								
Windows/Locks/Screens								
Window Covering								
Doors/Handles								
Light Fixtures/Bulbs								
Closet Shelves/Door								

Area/Item	IN C	Condi	tion	OUT	Cond	ition	S=Satisfactory/Clean N= Not Satisfactory O=Other
Fireplace							-
Other							
DINING ROOM	S	N	0	S	N	0	
Floors/Floor Covering							
Walls/Ceiling							
Windows/Locks/Screens							
Window Covering							
Doors/Handles							
Light Fixtures/Bulbs							
Closet Shelves/Door							
Fireplace							
Other							
BEDROOM #1	S	N	0	s	N	0	
Floors/Floor Covering		.,		<del>ا</del> ا			
Walls/Ceiling							
Windows/Locks/Screens					-		
Window Covering							
Doors/Handles							
Light Fixtures/Bulbs							
Closet Shelves/Door							
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Other #2	_						
BEDROOM #2	S	N	0	S	N	0	
Floors/Floor Covering							
Walls/Ceiling							
Windows/Locks/Screens							
Window Covering							
Doors/Handles							
Light Fixtures/Bulbs							
Closet Shelves/Door							
Other							
BEDROOM #3	S	N	0	S	N	0	
Floors/Floor Covering							
Walls/Ceiling							
Windows/Locks/Screens							
Window Covering							
Doors/Handles							
Light Fixtures/Bulbs							
Closet Shelves/Door							
Other							
BEDROOM #4	S	N	0	S	N	0	
Floors/Floor Covering							
Walls/Ceiling							
Windows/Locks/Screens							
Window Covering							

Area/Item	em IN Condition Out Condition		ition	S=Satisfactory/Clean N= Not Satisfactory O=Other			
Doors/Handles							•
Light Fixtures/Bulbs							
Closet Shelves/Door							
Other							
BATHROOM #1	S	N	0	S	N	О	
MASTER							
Floor/Floor Covering							
Walls/Tile/Grout/Ceiling							
Windows/Locks/Screens							
Window Covering							
Doors/Handles/Locks							
Light Fixtures/Bulbs							
Exhaust Fans/Heater							
Counters/Shelves							
Mirror/Cabinets							
Sink/Faucet/Basin							
Drains/Plumbing							
Tub/Shower Caulking							
Shower Head/Tub							
Faucet							
Shower Door/Curtain							
Rod							
Shower Door Tracks							
Towel Bar/Ring							
Toilet Bowl/Seat							
Toilet Paper Holder							
Other							
BATHROOM #2	S	N	0	S	N	0	
Floor/Floor Covering	3	14	0	-	IV	-	
Walls/Tile/Grout/Ceiling							
Windows/Locks/Screens							
Windows/Locks/Screens Window Covering							
Doors/Handles/Locks							
Light Fixtures/Bulbs Exhaust Fans/Heater				_			
				_			
Counters/Shelves				<del>                                     </del>			
Mirror/Cabinets							
Sink/Faucet/Basin							
Drains/Plumbing				-			
Tub/Shower Caulking				_			
Shower Head/Tub							
Faucet				-			
Shower Door/Curtain							
Rod							

Area/Item	IN Condition			Out	Condi	ition	S=Satisfactory/Clean N= Not Satisfactory O=Other	
Shower Door Tracks							<u> </u>	
Towel Bar/Ring								
Toilet Bowl/Seat								
Toilet Paper Holder								
Other								
Bathroom #3	S	N	0	S	N	0		
Floor/Floor Covering								
Walls/Tile/Grout/Ceiling								
Windows/Locks/Screens								
Window Covering								
Doors/Handles/Locks								
Light Fixtures/Bulbs								
Exhaust Fans/Heater								
Counters/Shelves								
Mirror/Cabinets								
Sink/Faucet/Basin								
Drains/Plumbing								
Tub/Shower Caulking								
Shower Head/Tub								
Faucet								
Shower Door/Curtain								
Rod								
Shower Door Tracks								
Towel Bar/Ring								
Toilet Bowl/Seat								
Toilet Paper Holder								
Other								
BASEMENT	S	NI.		S	NI.			
	3	N	0	3	N	0		
Floors/Floor Covering								
Walls/Ceiling								
Windows/Locks/Screens								
Window Covering								
Doors/Handles								
Light Fixtures/Bulbs								
Closet Shelves/Door								
Other								
GARAGE/CARPORT	S	N	0	S	N	0		
Floor Type/Condition								
Doors/Locks								
Light Fixtures/Bulbs		L		L				
Cabinets/Shelving								
Other								
GROUNDS	S	N	0	S	N	0		
Lawn/Trees								

Area/Item	IN Condition		OUT	OUT Condition		S=Satisfactory/Clean N= Not Satisfactory O=Other	
Flowerbed/Gardens							
Sprinklers/Hose Bibs							
Walkways							
Driveway							
Parking Area							
Patio/Deck							
Other							

MOVE IN:		
Inspection Checklist "MOVE IN" completed on:	(date) at:(	time)
Approved by:	_ (GO Rental Leasing Agent)	
MOVE OUT:		
Inspection Checklist "MOVE OUT completed on:	(date) at:(t	ime)
Approved by:	_ (GO Rental Leasing Agent)	
Tenant will be charged for the following:		
Area/Item/Description of Damage		Amount assessed for repair

Security Deposit will be released, less repair costs, within 30 days from date of final walk thru, and/or end of lease term.