

LANDLORD & TENANT MOVE-IN/MOVE-OUT CHECKLIST

Resident: _____

Property: _____

Apartment #: _____

Unit Size: _____

Move-In Inspection Date: _____

Move-Out Inspection Date: _____

Item	Condition		Cost to Correct
	Move-In	Move-Out	
ENTRANCE/HALLS			
Steps and Landings			
Handrails			
Doors			
Hardware/Locks			
Walls/Coverings			
Windows/Coverings			
Ceilings			
Floors/Coverings			
Lighting ¹			
Electrical Outlets			
Closets ²			
Fire Alarms/Equipment			
LIVING ROOM			
Walls/Coverings			
Windows/Coverings			
Ceiling			
Floors/Covering			
Lighting ¹			
Electrical Outlets			

Item	Condition		Cost to Correct
	Move-In	Move-Out	
DINING ROOM			
Walls/Coverings			
Windows/Coverings			
Ceiling			
Floors/Coverings			
Lighting ¹			
Electrical Outlets			
KITCHEN			
Range			
Refrigerator			
Sink/Faucets ³			
Walls/Coverings			
Windows/Coverings			
Ceiling			
Floors/Coverings			
Lighting ¹			
Electrical outlets			
Cabinets			
Closets/Pantry ²			
Exhaust Fan			
Fire Alarms/Equipment			
BEDROOM(S)			
Doors & Locks			
Walls/Coverings			
Windows/Coverings			
Ceiling			
Floors/Covering			
Closets ²			
Lighting ¹			
Electrical Outlets			

Item	Condition		Cost to Correct
	Move-In	Move-Out	
BATHROOM(S)			
Sink/Faucets ³			
Shower/Tub ³			
Curtain Rack/Door			
Toilet			
Towel Rack			
Doors/Locks			
Walls/Coverings			
Windows/Coverings			
Ceiling			
Floors/Coverings			
Closets ²			
Cabinets			
Exhaust Fan			
Lighting ¹			
Electrical Outlets			
OTHER EQUIPMENT			
Heating Equipment			
Air-Conditioning Unit(s)			
Hot-Water Heater			
Smoke/Fire Alarms			
Thermostat			
Doorbell			
TOTAL			
1. Fixtures, Bulbs, Switches, and Timers 2. Floor/Walls/Ceiling, Shelves/Rods, Lighting 3. Water pressure and Hot water			

Move-In

This unit **is in decent, safe and sanitary condition. **Any deficiencies identified in this report will be remedied within thirty (30) days of the date the tenant moves into the unit.

Manager's/Landlord's Signature

I have inspected the apartment and found **this unit to be in decent, safe, and sanitary condition. Any deficiencies are noted above. **I recognize that I am responsible for keeping the apartment in good condition, with the exception of normal wear. In the event of damage, I agree to pay the cost to restore the apartment to its original condition.

Resident's Signature

Resident's Signature

	By	Date
Prepared	_____	_____
Reviewed	_____	_____
Prepared	_____	_____
Reviewed	_____	_____

Move-Out

Manager's Signature

___ Agree with move-out inspection.
___ Disagree with move-out inspection
If disagree, list specific items of disagreement.

Resident's Signature

Resident's Signature

	By	Date
Prepared	_____	_____
Reviewed	_____	_____
Prepared	_____	_____
Reviewed	_____	_____