

RENTAL PROPERTY MOVE-IN CHECKLIST

Property Address _____ Apartment # _____
 City/State/Zip _____
 Tenant _____
 Move-in Date _____ Inspected By _____
 Initial Inspection Date _____ Inspected By _____
 Move-Out Date _____ Inspected By _____

| | MOVE IN <small>OK NOT</small> | INITIAL INSPECTION <small>OK NOT</small> | MOVE OUT <small>OK NOT</small> |
|----------------------------------|---|---|---|
| HEAT/PLUMBING | | | |
| Heating | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Air Conditioning | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Water Heater | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Plumbing | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Washer/Dryer | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| SAFETY | | | |
| Door Locks | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Smoke Detector | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Fire Extinguisher | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| EXTERIOR | | | |
| Garage/Car Port | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Landscaping | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Pool/Spa | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| ENTRY/LIVING/DINING AREAS | | | |
| Walls/Ceiling | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Floor Coverings | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Doors/Screens | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Outlets/Switches | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Light Fixtures | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Windows/Latches | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Windows/Screens | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Window Coverings | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Closets | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Fireplace/Other | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| KITCHEN | | | |
| Walls/Ceiling | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Floor | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Doors/Screens | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Outlets/Switches | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Light Fixtures | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Windows/Latches | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Screens/Shades | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Window Coverings | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Oven/Range | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Fan/Light/Controls | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Refrigerator | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Dishwasher | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Sink/Faucets | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Disposal | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Counter Tops | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |
| Cabinets/Other | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ | <input type="checkbox"/> <input type="checkbox"/> _____ |

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Property Address _____

Apartment # _____

| | MOVE IN | | INITIAL INSPECTION | | MOVE OUT | |
|-----------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | OK | NOT | OK | NOT | OK | NOT |
| BATHROOM 1 | | | | | | |
| Walls/Ceiling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlets/Switches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doors/Windows/Latches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mirror/Towel Racks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shelves/Cabinets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tub/Shower/Toilet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Basin/Faucets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| BATHROOM 2 | | | | | | |
| Walls/Ceiling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlets/Switches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doors/Windows/Latches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Exhaust Fan | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mirror/Towel Racks | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shelves/Cabinets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tub/Shower/Toilet | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Basin/Faucets | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| MASTER BEDROOM | | | | | | |
| Walls/Ceiling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlets/Switches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doors/Windows/Latches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Screens/Shades | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Closets/Other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| BEDROOM 1 | | | | | | |
| Walls/Ceiling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlets/Switches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doors/Windows/Latches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Screens/Shades | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Closets/Other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| BEDROOM 2 | | | | | | |
| Walls/Ceiling | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Floor Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Outlets/Switches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Light Fixtures | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Doors/Windows/Latches | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Screens/Shades | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Window Coverings | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Closets/Other | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Tenant agrees with the move-in conditions noted above and understands that reasonable cost of repairs at time of move-out, other than normal wear and tear, may be deducted from Tenant's security deposit.

Tenant _____ Date _____ Owner _____ Date _____

Modoco LLC by Richard Ken

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