## **Move-In/Move-Out Checklist**

	Conditions	Entrance	Living Room	Dining Room	Bath 1	Bath 2	Kitchen	Bdrm. 1	Bdrm. 2	Bdrm. 3	Bdrm. 4
Ceiling & Walls	Clean Ceiling										
	Clean Woodwork										
	Clean Walls										
	Ceiling/Walls Cracks										
	Ceiling/Walls Holes										
	Ceiling/Walls Paint										
Windows	Clean/Damaged Window										
	Open/Close Window										
	Window Screen										
	Window Lock										
	Clean/Damaged Blinds										
	Door Sturdiness										
Doors	Door Wear & Tear										
	Door Lock(s)										
	Key Unlock/Lock Door(s)										
	Working Deadbolt/Chain										
	Light Switch/Lighting										
	Clean/Damaged Light Fixtures										
	Air Conditioning/Heating										
Electricity	Functioning Thermostat/Dial										
	Working/Clean Phonejacks										
	Working/Clean Electrical Outlets										
Windows  Doors	Clean/Operating Fireplace										
	Working/Clean Washer/Dryer										
	Working/Clean Refrigerator										
Appliances	Working/Clean Microwave										
	Working/Clean Dishwasher										
	Working/Clean Stove Top										
	Working/Clean Oven										
	Toilet Cleanliness/Functionality										
	Clean Sink										
	Water Pressure in Sink										
	Water Temperature in Sink										

## Move-In/Move-Out Checklist PAGE 2 Living **Dining Conditions Entrance** Bath 1 Bath 2 **Kitchen** Bdrm. 1 Bdrm. 2 Bdrm. 3 Bdrm. 4 Room Room Clean/Damaged Shower/Bath Toilet, Sink, Water Pressure in Shower/Bath and Shower Water Temperature in Shower/Bath Clean/Damaged Tile/Carpet **Floor** Clean/Damaged Floor Clean/Damaged Counter Top Clean/Damaged Cupboards Clean/Functioning Pipes Misc. Signs of Insects/Rodents Adequate Ventilation (Exhaust Fan) **Working Fire Detector NOTES:**

SIGNATURES:	ROOM NUMBER		
Tenant 1:		Landlord:	
Tenant 2:		Date of Inspection:	
Tenant 3:		Move-In/Out Date:	
Tenant 4:		Housing Address:	