

Move-In Inspection & Inventory Report

All parties agree that this report will be returned to Landlord within 3 days of move-in

PROPERTY ADDRESS: _____

Move-in Date: _____ Tenant(s): _____

	INSPECTION ITEM:	Check (☐) Existing Condition		NOTES: Your comments are required if "Needs Attention" column is checked (☐) <i>Please list inspection item number before each comment you make and use multiple lines if necessary.</i>
		Good or Functional	Needs Attention	
1.	EXTERIOR			
2.	Foundation			
3.	Walls			
4.	Roof			
5.	Paint			
6.	Chimney			
7.	Electrical Outlets, Switches & Fixtures			
8.	Windows & Screens			
9.	Doors <i>(Are there deadbolts?)</i>			
10.	Gutters			
11.	Water Faucets			
12.	Mailbox			
13.	Doorbell			
14.	Patios and/or Decks			
15.	Lawn			
16.	Shrubs and/or Trees			
17.	Walkways			
18.	Driveway			
19.	Fences			
20.	Storage Units			
21.	Water Drainage			
22.	Other:			
23.	Other:			
24.	Other:			
25.	Other:			
26.	ENTRY			
27.	Flooring <i>(type & color?)</i>			
28.	Sheetrock			
29.	Wall Coverings / Paint			
30.	Baseboard & Moldings			
31.	Ceiling			
32.	Electrical Outlets, Switches & Fixtures			
33.	Windows & Window Latches			
34.	Window Coverings			
35.	Door(s)			
36.	Door Hardware / Locks			
37.	Closet			
38.	Door Stops			
39.	Other:			
40.	LIVING ROOM			
41.	Flooring <i>(type & color?)</i>			
42.	Sheetrock			
43.	Wall Coverings / Paint			
44.	Baseboard & Moldings			
45.	Ceiling			
46.	Electrical Outlets, Switches & Fixtures			

Move-In Inspection and Inventory Item:		Good or Functional	Needs Attention	Your comments are required If "Needs Attention" column is checked (U)
47.	Windows & Window Latches			
48.	Window Coverings			
49.	Door(s)			
50.	Door Hardware			
51.	Door Stops			
52.	Other:			
53.	DINING ROOM <input type="checkbox"/> <i>Not Applicable</i>			
54.	Flooring (<i>type & color?</i>)			
55.	Sheetrock			
56.	Wall Coverings / Paint			
57.	Baseboard & Moldings			
58.	Ceiling			
59.	Electrical Outlets, Switches & Fixtures			
60.	Windows & Window Latches			
61.	Window Coverings			
62.	Door(s)			
63.	Door Hardware			
64.	Door Stops			
65.	Other:			
66.	KITCHEN			
67.	Flooring (<i>type & color?</i>)			
68.	Sheetrock			
69.	Wall Coverings / Paint			
70.	Baseboard & Moldings			
71.	Ceiling			
72.	Electrical Outlets, Switches & Fixtures			
73.	Windows & Window Latches			
74.	Window Coverings			
75.	Door(s)			
76.	Door Hardware			
77.	Door Stops			
78.	Pantry / Closet			
79.	Sink(s) <i>how many?</i> _____			<input type="checkbox"/> Porcelain <input type="checkbox"/> Stainless steel <input type="checkbox"/> Composite <input type="checkbox"/> Other
80.	Faucets & Plumbing			
81.	Disposal			<input type="checkbox"/> None
82.	Cabinet Doors & Drawers			
83.	Cabinet Interiors			
84.	Countertops			
85.	Refrigerator (<i>list Mfg., model, color and serial #</i>)			<input type="checkbox"/> None <input type="checkbox"/> Has icemaker <input type="checkbox"/> Refrig is stored in garage (<i>if so, must keep it plugged in and running</i>)
86.	Stove / Oven (<i>list Mfg., model, color and serial #</i>)			<input type="checkbox"/> None <input type="checkbox"/> Free-standing <input type="checkbox"/> Built-in <input type="checkbox"/> Self cleaning electric <input type="checkbox"/> Continuous cleaning electric <input type="checkbox"/> Basic electric <input type="checkbox"/> Natural gas
87.	Cooktop (<i>list Mfg., model, color and serial #</i>)			<input type="checkbox"/> None <input type="checkbox"/> Electric <input type="checkbox"/> Natural gas
88.	Exhaust fan (<i>list color</i>)			<input type="checkbox"/> None <input type="checkbox"/> Vented <input type="checkbox"/> Self-venting
89.	Dishwasher (<i>list Mfg., model, color and serial #</i>)			<input type="checkbox"/> None

Move-In Inspection and Inventory Item:		Good or Functional	Needs Attention	Your comments are required If "Needs Attention" column is checked (H)
90.	Microwave <i>(list Mfg., model, color and serial #)</i>			<input type="checkbox"/> None
91.	Other:			
92.	Other:			
93.	FAMILY ROOM <input type="checkbox"/> <i>Not Applicable</i>			
94.	Flooring <i>(type & color?)</i>			
95.	Sheetrock			
96.	Wall Coverings / Paint			
97.	Baseboard & Moldings			
98.	Ceiling			
99.	Electrical Outlets, Switches & Fixtures			
100.	Windows & Window Latches			
101.	Window Coverings			
102.	Door(s)			
103.	Door Hardware			
104.	Door Stops			
105.	Closet(s)			
106.	Other:			
107.	HALLS / STAIRS			
108.	Flooring <i>(type & color?)</i>			
109.	Sheetrock			
110.	Wall Coverings / Paint			
111.	Baseboard & Moldings			
112.	Ceiling			
113.	Electrical Outlets, Switches & Fixtures			
114.	Door(s)			
115.	Door Hardware			
116.	Door Stops			
117.	Closet(s)			
118.	Other:			
119.	MASTER BEDROOM			
120.	Flooring <i>(type & color?)</i>			
121.	Sheetrock			
122.	Wall Coverings / Paint			
123.	Baseboard & Moldings			
124.	Ceiling			
125.	Electrical Outlets, Switches & Fixtures			
126.	Windows & Window Latches			
127.	Window Coverings			
128.	Door(s)			
129.	Door Hardware			
130.	Door Stops			
131.	Closet(s)			
132.	Other:			
133.	MAIN / MASTER BATH <input type="checkbox"/> <i>Exclusively used by Master Bedroom</i>			
134.	Flooring <i>(type & color?)</i>			
135.	Sheetrock			
136.	Wall Coverings / Paint			
137.	Baseboard & Moldings			
138.	Ceiling			
139.	Electrical Outlets, Switches & Fixtures			<input type="checkbox"/> Has GFI Outlet
140.	Windows & Window Latches			<input type="checkbox"/> None
141.	Window Coverings			
142.	Door(s)			
143.	Door Hardware			
144.	Door Stops			

Move-In Inspection and Inventory Item:		Good or Functional	Needs Attention	Your comments are required If "Needs Attention" column is checked (☒)
145.	Sink(s) <i>how many?</i> _____			<input type="checkbox"/> Porcelain <input type="checkbox"/> Steel <input type="checkbox"/> Composite <input type="checkbox"/> Other
146.	Vanity			<input type="checkbox"/> None
147.	Mirror			
148.	Towel Bar(s)			
149.	Soap Dish			<input type="checkbox"/> None
150.	Toilet			
151.	Toilet Paper Holder			
152.	Tub			<input type="checkbox"/> None <input type="checkbox"/> Tub/Shower combo
153.	Shower			<input type="checkbox"/> None
154.	Tub and/or Shower Doors			<input type="checkbox"/> None
155.	Tile, Grout and/or Caulk			
156.	Faucets & Plumbing			
157.	Exhaust Fan			
158.	Linen Closet			
159.	Other:			
160.	Other:			
161.	2nd BEDROOM (Give location)			
162.	Flooring (type & color?)			
163.	Sheetrock			
164.	Wall Coverings / Paint			
165.	Baseboard & Moldings			
166.	Ceiling			
167.	Electrical Outlets, Switches & Fixtures			
168.	Windows & Window Latches			
169.	Window Coverings			
170.	Door(s)			
171.	Door Hardware			
172.	Door Stops			
173.	Closet(s)			
174.	Other:			
175.	3rd BEDROOM (Give location) <input type="checkbox"/> Not Applicable			
176.	Flooring (type & color?)			
177.	Sheetrock			
178.	Wall Coverings / Paint			
179.	Baseboard & Moldings			
180.	Ceiling			
181.	Electrical Outlets, Switches & Fixtures			
182.	Windows & Window Latches			
183.	Window Coverings			
184.	Door(s)			
185.	Door Hardware			
186.	Door Stops			
187.	Closet(s)			
188.	Other:			
189.	4th BEDROOM (Give location) <input type="checkbox"/> Not Applicable			
190.	Flooring (type & color?)			
191.	Sheetrock			
192.	Wall Coverings / Paint			
193.	Baseboard & Moldings			
194.	Ceiling			
195.	Electrical Outlets, Switches & Fixtures			
196.	Windows & Window Latches			
197.	Window Coverings			
198.	Door(s)			
199.	Door Hardware			
200.	Door Stops			
201.	Closet(s)			

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202.	Other:			
203.	2 nd BATH <input type="checkbox"/> Not Applicable			
204.	Flooring (type & color?)			
205.	Sheetrock			
206.	Wall Coverings / Paint			
207.	Baseboard & Moldings			
208.	Ceiling			
209.	Electrical Outlets, Switches & Fixtures			<input type="checkbox"/> Has GFI Outlet
210.	Windows & Window Latches			<input type="checkbox"/> None
211.	Window Coverings			
212.	Door(s)			
213.	Door Hardware			
214.	Door Stops			
215.	Sink(s) how many? _____			<input type="checkbox"/> Porcelain <input type="checkbox"/> Steel <input type="checkbox"/> Composite <input type="checkbox"/> Other
216.	Vanity			<input type="checkbox"/> None
217.	Mirror			
218.	Towel Bar(s)			
219.	Soap Dish			<input type="checkbox"/> None
220.	Toilet			
221.	Toilet Paper Holder			
222.	Tub			<input type="checkbox"/> None <input type="checkbox"/> Tub/Shower combo
223.	Shower			<input type="checkbox"/> None
224.	Tub and/or Shower Doors			<input type="checkbox"/> None
225.	Tile, Grout and/or Caulk			
226.	Faucets & Plumbing			
227.	Exhaust Fan			
228.	Linen Closet			
229.	Other:			
230.	Other:			
231.	3 rd BATH <input type="checkbox"/> Not Applicable			
232.	Flooring (type & color?)			
233.	Sheetrock			
234.	Wall Coverings / Paint			
235.	Baseboard & Moldings			
236.	Ceiling			
237.	Electrical Outlets, Switches & Fixtures			<input type="checkbox"/> Has GFI Outlet
238.	Windows & Window Latches			<input type="checkbox"/> None
239.	Window Coverings			
240.	Door(s)			
241.	Door Hardware			
242.	Door Stops			
243.	Sink(s) how many? _____			<input type="checkbox"/> Porcelain <input type="checkbox"/> Steel <input type="checkbox"/> Composite <input type="checkbox"/> Other
244.	Vanity			<input type="checkbox"/> None
245.	Mirror			
246.	Towel Bar(s)			
247.	Soap Dish			<input type="checkbox"/> None
248.	Toilet			
249.	Toilet Paper Holder			
250.	Tub			<input type="checkbox"/> None <input type="checkbox"/> Tub/Shower combo
251.	Shower			<input type="checkbox"/> None
252.	Tub and/or Shower Doors			<input type="checkbox"/> None
253.	Tile, Grout and/or Caulk			
254.	Faucets & Plumbing			
255.	Exhaust Fan			
256.	Linen Closet			
257.	Other:			

	Move-In Inspection and Inventory Item:	Good or Functional	Needs Attention	Your comments are required If "Needs Attention" column is checked (U)
258.	Other:			
259.	4th BATH <input type="checkbox"/> <i>Not Applicable</i>			
260.	Flooring (<i>type & color?</i>)			
261.	Sheetrock			
262.	Wall Coverings / Paint			
263.	Baseboard & Moldings			
264.	Ceiling			
265.	Electrical Outlets, Switches & Fixtures			<input type="checkbox"/> Has GFI Outlet
266.	Windows & Window Latches			<input type="checkbox"/> None
267.	Window Coverings			
268.	Door(s)			
269.	Door Hardware			
270.	Door Stops			
271.	Sink(s) <i>how many?</i> _____			<input type="checkbox"/> Porcelain <input type="checkbox"/> Steel <input type="checkbox"/> Composite <input type="checkbox"/> Other
272.	Vanity			<input type="checkbox"/> None
273.	Mirror			
274.	Towel Bar(s)			
275.	Soap Dish			<input type="checkbox"/> None
276.	Toilet			
277.	Toilet Paper Holder			
278.	Tub			<input type="checkbox"/> None <input type="checkbox"/> Tub/Shower combo
279.	Shower			<input type="checkbox"/> None
280.	Tub and/or Shower Doors			<input type="checkbox"/> None
281.	Tile, Grout and/or Caulk			
282.	Faucets & Plumbing			
283.	Exhaust Fan			
284.	Linen Closet			
285.	Other:			
286.	Other:			
287.	GARAGE / CARPORT <input type="checkbox"/> <i>Not Applicable</i>			
288.	Floor			
289.	Walls			
290.	Garage Doors <i>how many?</i> _____			<input type="checkbox"/> Wood <input type="checkbox"/> Masonite <input type="checkbox"/> Metal
291.	Gar. Door Hardware			
292.	Gar. Door Openers <i>how many?</i> _____			<input type="checkbox"/> None <input type="checkbox"/> Has safety reverse mechanism
293.	Remotes Controls <i>how many?</i>			<input type="checkbox"/> None
294.	Ceiling			
295.	Electrical Outlets, Switches & Fixtures			
296.	Windows & Window Latches			
297.	Other Door(s)			
298.	Other Door Hardware			
299.	Door Stops			
300.	Cabinets			
301.	Workbench			
302.	Other:			
303.	Other:			
304.	SYSTEMS			
305.	Cooling			<input type="checkbox"/> Not Applicable
306.	Heating			
307.	Electrical			
308.	Plumbing			
309.	Security System			<input type="checkbox"/> Not Applicable
310.	Lawn Sprinkler			<input type="checkbox"/> Not Applicable
311.	Sump Pump			<input type="checkbox"/> Not Applicable
312.	Water Softener			<input type="checkbox"/> Not Applicable

Move-In Inspection and Inventory Item:		Good or Functional	Needs Attention	Your comments are required If "Needs Attention" column is checked (☒)
313.	Other:			
314.	Other:			
315.	ADDITIONAL ROOM #1 (Identify)			
316.	Flooring (type & color?)			
317.	Sheetrock			
318.	Wall Coverings / Paint			
319.	Baseboard & Moldings			
320.	Ceiling			
321.	Electrical Outlets, Switches & Fixtures			
322.	Windows & Window Latches			
323.	Window Coverings			
324.	Door(s)			
325.	Door Hardware			
326.	Door Stops			
327.	Closet(s)			
328.	Other:			
329.	Other:			
330.	ADDITIONAL ROOM #2 (Identify)			
331.	Flooring (type & color?)			
332.	Sheetrock			
333.	Wall Coverings / Paint			
334.	Baseboard & Moldings			
335.	Ceiling			
336.	Electrical Outlets, Switches & Fixtures			
337.	Windows & Window Latches			
338.	Window Coverings			
339.	Door(s)			
340.	Door Hardware			
341.	Door Stops			
342.	Closet(s)			
343.	Other:			
344.	Other:			
345.	ADDITIONAL ROOM #3 (Identify)			
346.	Flooring (type & color?)			
347.	Sheetrock			
348.	Wall Coverings / Paint			
349.	Baseboard & Moldings			
350.	Ceiling			
351.	Electrical Outlets, Switches & Fixtures			
352.	Windows & Window Latches			
353.	Window Coverings			
354.	Door(s)			
355.	Door Hardware			
356.	Door Stops			
357.	Closet(s)			
358.	Other:			
359.	ADDITIONAL ROOM #4 (Identify)			
360.	Flooring (type & color?)			
361.	Sheetrock			
362.	Wall Coverings / Paint			
363.	Baseboard & Moldings			
364.	Ceiling			
365.	Electrical Outlets, Switches & Fixtures			
366.	Windows & Window Latches			
367.	Window Coverings			
368.	Door(s)			
369.	Door Hardware			
370.	Door Stops			