



Rental Move-In and Move-Out Checklist

Instructions: Tenant(s) should complete this checklist just prior to or within 24 hours of moving in. The tenant(s) and landlord or property manager should review the property, then complete, and sign this checklist as a mutual agreement on the condition of the property upon move-in. Each party keeps a signed copy of the checklist. The tenant(s) and landlord or property manager should examine this checklist during the pre-move-out inspection and again after move-out to determine if any portion of the security deposit will be deducted for cleaning or repairs.

Tenant Name(s) :

Address & Apt. No :

City :

State :

Zip :

Move-In Date :

Inspection Date :

Time :

By :

Unless otherwise noted, the premises are in clean, good working order and undamaged. Use the key below.

Key & Abbreviations :

NC Needs Cleaning
NP Needs Painting
NR Needs Repair

NSC Needs Spot Cleaning
NSP Needs Spot Painting
RP Needs Replacing

LIVING ROOM

| | Move-in | Move-out | Cost |
|------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Doors | | | |
| Windows | | | |
| Screens | | | |
| Shades/blinds | | | |
| Closet | | | |
| Light fixtures | | | |
| Outlets/switches | | | |
| Lightbulbs | | | |
| | | | |

Comments :

ENTRY/HALL

| | Move-in | Move-out | Cost |
|------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Light fixtures | | | |
| Outlets/switches | | | |
| Closet | | | |
| Stairs | | | |
| | | | |

Comments :

BEDROOM #1

| | Move-in | Move-out | Cost |
|------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Doors | | | |
| Windows | | | |
| Screens | | | |
| Shades/blinds | | | |
| Closet | | | |
| Light fixtures | | | |
| Outlets/switches | | | |
| Lightbulbs | | | |
| | | | |

Comments :

BEDROOM #2

| | Move-in | Move-out | Cost |
|------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Doors | | | |
| Windows | | | |
| Screens | | | |
| Shades/blinds | | | |
| Closet | | | |
| Light fixtures | | | |
| Outlets/switches | | | |
| Lightbulbs | | | |
| | | | |

Comments :

KITCHEN

| | Move-in | Move-out | Cost |
|---------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Doors | | | |
| Windows | | | |
| Screens | | | |
| Cabinets | | | |
| Drawers | | | |
| Sink/plumbing | | | |
| Counters | | | |
| Fan | | | |
| Light fixtures | | | |
| Lightbulbs | | | |
| DISHWASHER | | | |
| Interior/parts | | | |
| Exterior | | | |
| Controls | | | |
| REFRIGERATOR | | | |
| Interior/parts | | | |
| Exterior | | | |
| Lights | | | |
| STOVE/OVEN | | | |
| Exterior | | | |
| Burners | | | |
| Vent | | | |
| Timer/controls | | | |
| Surface | | | |
| Light | | | |
| Racks | | | |
| Drip pan | | | |
| | | | |

Comments :



DINING ROOM

| | Move-in | Move-out | Cost |
|------------------|---------|----------|------|
| Floor | | | |
| Walls | | | |
| Ceiling | | | |
| Doors | | | |
| Windows | | | |
| Screens | | | |
| Shades/blinds | | | |
| Light fixtures | | | |
| Outlets/switches | | | |

Comments :

MECHANICAL

| | Move-in | Move-out | Cost |
|----------------|---------|----------|------|
| Water heater | | | |
| Smoke detector | | | |
| Thermostat | | | |
| Heating | | | |
| A/C | | | |
| | | | |

Comments :

OTHER

| | Move-in | Move-out | Cost |
|--------------|---------|----------|------|
| Parking area | | | |
| Lawn/Garden | | | |
| Patio/Deck | | | |
| Washer/Dryer | | | |
| | | | |

Comments :

TOTAL COST OF DAMAGES: \$ _____.



Rental Move-In and Move-Out Checklist

I/we, _____ (tenants), understand that unless otherwise noted, all damages are under the tenant's responsibility and will be deducted from the security deposit upon move-out.

| | | |
|--|-----------------------------------|---------------------------------|
| Videos and/or photographs have been taken of the unit: | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, the original copies are in the possession of the | <input type="checkbox"/> Landlord | <input type="checkbox"/> Tenant |

MOVE-IN INSPECTION

| | |
|---------------------------------|-------------|
| <i>Landlord/Agent Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |

MOVE-OUT INSPECTION

| | |
|---------------------------------|-------------|
| <i>Landlord/Agent Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |
| <i>Tenant Signature</i> | <i>Date</i> |
| _____ | _____ |

Tenant's Forwarding Address:
