Rental Inspection Checklist

Complete this inventory checklist as soon as you sign the lease. Do not move anything into your

apartment till after you have filled this out. Take pictures of any damages, dents, marks, etc… Have the apartment manager/landlord sign it as well. If your manager will not sign it send him/her a copy of it. You should keep the original copy for your records.

|  |  |  |  |
| --- | --- | --- | --- |
| **Living Room** | Quantity/Specific Location | Condition on Arrival | Condition on Departure |
| Walls and Ceiling |  |  |  |
| Floor Covering |  |  |  |
| Windows (curtains, blinds, etc…) |  |  |  |
| Doors |  |  |  |
| Light Fixtures |  |  |  |
| Lamp (s) |  |  |  |
| Furniture (if applicable) |  |  |  |
| Baseboards/Moldings |  |  |  |
| Other |  |  |  |
|  |
| **Kitchen** | Quantity/Specific Location | Condition on Arrival | Condition on Departure |
| Stove, Oven, Range, Hood, Broiler, Pans,Burners, etc… |  |  |  |
| Floor Covering |  |  |  |
| Windows (curtains, blinds, etc…) |  |  |  |
| Doors |  |  |  |
| Light Fixtures |  |  |  |
| Cabinets/Drawers |  |  |  |
| Counter Surfaces |  |  |  |
| Sink, Gargage Disposal, Faucet |  |  |  |
| Microwave Oven |  |  |  |
| Refrigerator |  |  |  |
| Furniture |  |  |  |
| Dishwasher |  |  |  |
| Other |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Bathroom** | Quantity/Specific Location | Condition on Arrival | Condition on Departure |
| Walls and Ceiling |  |  |  |
| Floor Covering |  |  |  |
| Windows (curtains, blinds, etc…) |  |  |  |
| Doors |  |  |  |
| Light Fixtures |  |  |  |
| Cabinets/Drawers |  |  |  |
| Counter Surfaces |  |  |  |
| Sink and Faucet |  |  |  |
| Toilet/Tissue Holder |  |  |  |
| Shower and Tub |  |  |  |
| Towel Racks |  |  |  |
| Mirror/MedicineCabinet |  |  |  |
| Water (hot andpressure) |  |  |  |
|  |
| **Bedroom** | Quantity/Specific Location | Condition on Arrival | Condition on Departure |
| Walls and Ceiling |  |  |  |
| Floor Covering |  |  |  |
| Windows (curtains, blinds, etc…) |  |  |  |
| Doors |  |  |  |
| Light Fixtures |  |  |  |
| Closets (Doors and tracks) |  |  |  |
| Book Shelves |  |  |  |
| Molding and Baseboards |  |  |  |
| Furniture (if applicable) |  |  |  |
| Mirror |  |  |  |
| Other |  |  |  |
|  |
| **Other Areas: Specify** | Quantity/Specific Location | Condition on Arrival | Condition on Departure |
| Walls and Ceiling |  |  |  |
| Floor Covering |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Windows (curtains, blinds, etc…) |  |  |  |
| Doors |  |  |  |
| Light Fixtures |  |  |  |
| Closets (Doors and tracks) |  |  |  |
| Book Shelves |  |  |  |
| Molding and Baseboards |  |  |  |
| Furniture (if applicable) |  |  |  |
| Doorbell/Knocker |  |  |  |
| Mailbox (check lock) |  |  |  |
| Yard, Patio, Deck |  |  |  |
| External Doors and Locks |  |  |  |
| Outside Lights |  |  |  |
| Other |  |  |  |

Move – In Inventory Date Move-Out Inventory Date

Tenant’s Signature Tenant’s Signature

Landlord’s Signature Landlord’s Signature