

MOVE- OUT INSPECTION CHECKLIST

Instructions: Landlord and Tenant view the property and complete the checklist together and mutually agree on the condition of the property upon move-out by signing this form. Each party keeps a copy of the signed checklist.

BE SPECIFIC and DETAILED when filling out the checklist.

PROPERTY ADDRESS: _____

DATE OF INSPECTION: _____

ITEM	MOVE OUT CONDITION	
FRONT DOOR ENTRANCE		
Front door open/close		
Door locks are working		
Door handle working		
LIVING/ DINING ROOM		
Floor & Floor Covering		
Walls & Ceiling		
Light fixtures working		
Window(s) & Screen		
Window Coverings (If any)		
Smoke Alarm		
Carbon Monoxide		
Curtain Rods/ Window Coverings (If any)		
KITCHEN		
Walls & Ceiling		
Light fixtures working		
Cabinets		

Countertops		
Appliances Included: * Fridge * Stove		
Appliances in working order		
BEDROOMS		
Floor & Floor Covering		
Walls & Ceiling		
Window(s) & Screen		
Window Coverings (If any)		
Closet, door and track		
Light fixtures working		
Door hardware		
Pest Citings:	YES	NO
NOTES:		
Landlord Name(s):	_____	_____
Landlord Signature(s):	_____	_____
	Date: _____	Date: _____
Tenant Name(s):	_____	_____
Tenant Signature(s):	_____	_____
	Date: _____	Date: _____