

# Post Move Out Inspection Sign Off Form

This form is used to document the condition of the rental property upon the tenant's move-out and to finalize the inspection sign-off for security deposit processing.

## 1. General Information

Tenant Name(s):

Property Address:

Move-Out Date:

Forwarding Address:

Contact Phone:

## 2. Move-Out Inspection Checklist

State the condition of each area. Enter "OK", "Cleaned", "Damaged", or "N/A", and add specific notes as needed.

Area	Condition (OK / Damaged / Cleaned)	Estimated Repair/Cleaning Cost	Comments / Details
Kitchen (Oven, Fridge, Cabinets, Counters)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Living Room (Walls, Floors, Windows)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Dining Room (Walls, Floors, Outlets)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Master Bedroom (Closet, Carpets, Doors)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Additional Bedroom(s)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bathrooms (Tub, Toilet, Sink, Tiles)	<input type="text"/>	<input type="text"/>	<input type="text"/>
Hallways / Entryway	<input type="text"/>	<input type="text"/>	<input type="text"/>
Exterior / Patio / Balcony	<input type="text"/>	<input type="text"/>	<input type="text"/>
Keys Returned (Door, Mailbox, Garage)	<input type="text"/>	<input type="text"/>	<input type="text"/>

## 3. Security Deposit and Deductions Summary

Original Security Deposit Received: \$

Estimated Total Deductions (from checklist): \$

Estimated Refund Amount (if any): \$

Estimated Amount Owed by Tenant (if deductions exceed deposit): \$

## 4. Acknowledgment and Sign-Off

By signing below, the Landlord/Inspector and Tenant acknowledge that they have jointly inspected the premises. The Tenant agrees that the condition of the premises is as noted above, and understands that any estimated deductions are subject to final receipts and itemization as required by local landlord-tenant laws.

**Tenant Signature:**

**Landlord / Inspector Signature:**

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Date:

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Date: