

Residential Property Move-In / Move-Out Inspection Sheet

General Information			
Tenant Name:	<input type="text"/>	Property Address:	<input type="text"/>
Move-In Date:	<input type="text" value="MM/DD/YYYY"/>	Move-Out Date:	<input type="text" value="MM/DD/YYYY"/>
Landlord/Inspector:	<input type="text"/>	Phone Number:	<input type="text"/>

Instructions: Rate the condition of each item using codes (e.g., S = Satisfactory, NA = Not Applicable, NC = Needs Cleaning, NR = Needs Repair) and write explanatory comments.

Area / Item	Move-In Condition		Move-Out Condition	
	Status	Comments / Damages	Status	Comments / Damages
1. LIVING ROOM				
Walls & Baseboards	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Flooring / Carpet	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Windows & Screens	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Light Fixtures & Outlets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. KITCHEN				
Stove & Oven	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Refrigerator & Freezer	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sinks, Faucets & Disposal	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Countertops & Cabinets	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. BATHROOM(S)				
Toilet	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Shower & Tub	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sinks & Mirrors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Exhaust Fan	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. BEDROOMS				
Doors & Locks	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Closets & Shelves	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. UTILITIES & OTHER				
Smoke / CO Detectors	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Heating / AC System	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Move-In Signatures	Move-Out Signatures

Move-In Signatures	Move-Out Signatures
<p>Tenant acknowledges the condition of the property at move-in is represented accurately above.</p> <p>Tenant Signature: <input data-bbox="274 228 635 266" type="text"/></p> <p>Date: <input data-bbox="162 300 422 338" type="text"/></p> <p>Landlord/Representative Signature: <input data-bbox="103 459 461 497" type="text"/></p> <p>Date: <input data-bbox="162 530 422 568" type="text"/></p>	<p>Tenant acknowledges the condition of the property at move-out is represented accurately above.</p> <p>Tenant Signature: <input data-bbox="981 228 1342 266" type="text"/></p> <p>Date: <input data-bbox="869 300 1129 338" type="text"/></p> <p>Landlord/Representative Signature: <input data-bbox="810 459 1168 497" type="text"/></p> <p>Date: <input data-bbox="869 530 1129 568" type="text"/></p>