**LANDLORD-TENANT MOVE-IN CHECKLIST**

|  |  |  |  |
| --- | --- | --- | --- |
| Property: | | Tenant(s) name(s): | |
| Apartment no. | Bedrooms: | Move-in date: | Move-out date: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Entrance/halls** | **Condition** | | **Cost to correct** |
| **Move-in** | **Move-out** |
| Steps and landings |  |  |  |
| Handrails |  |  |  |
| Doors |  |  |  |
| Hardware/locks |  |  |  |
| Floors/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceilings |  |  |  |
| Windows/coverings |  |  |  |
| Lighting1 |  |  |  |
| Electrical outlets |  |  |  |
| Closets2 |  |  |  |
| Fire alarms/equipment |  |  |  |
| **Living room** | | | |
| Floor/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceiling |  |  |  |
| Windows/covering |  |  |  |
| Lighting |  |  |  |
| Electrical outlets |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Dining room** | **Condition** | | **Cost to correct** |
| **Move-in** | **Move-out** |
| Floor/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceiling |  |  |  |
| Windows/coverings |  |  |  |
| Lighting |  |  |  |
| Electrical outlets |  |  |  |
| **Kitchen** | | | |
| Range |  |  |  |
| Refrigerator |  |  |  |
| Sink/faucets |  |  |  |
| Floor/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceiling |  |  |  |
| Windows/coverings |  |  |  |
| Lighting |  |  |  |
| Electrical outlets |  |  |  |
| Cabinets |  |  |  |
| Closets/pantry2 |  |  |  |
| Exhaust fan |  |  |  |
| Fire alarms/equipment |  |  |  |
| **Bedroom(s)** | | | |
| Doors and locks |  |  |  |
| Floor/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceiling |  |  |  |
| Windows/covering |  |  |  |
| Closets2 |  |  |  |
| Lighting |  |  |  |
| Electrical outlets |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Bathroom(s)** | **Condition** | | **Cost to correct** |
| **Move-in** | **Move-out** |
| Sink/faucets |  |  |  |
| Shower/tub |  |  |  |
| Curtain rack/door |  |  |  |
| Towel rack |  |  |  |
| Toilet |  |  |  |
| Doors/locks |  |  |  |
| Floor/coverings |  |  |  |
| Walls/coverings |  |  |  |
| Ceiling |  |  |  |
| Windows/coverings |  |  |  |
| Closets |  |  |  |
| Cabinets |  |  |  |
| Exhaust fan |  |  |  |
| Lighting |  |  |  |
| Electrical outlets |  |  |  |
| **Other equipment** | | | |
| Heating equipment |  |  |  |
| Air-conditioning unit(s) |  |  |  |
| Hot-water heater |  |  |  |
| Smoke/fire alarms |  |  |  |
| Thermostat |  |  |  |
| Doorbell |  |  |  |
| Total |  |  |  |
| 1. Fixtures, bulbs, switches, and timers 2. Floor/walls/ceiling, shelves/rods, lighting 3. Water pressure and hot water | | | |

|  |  |  |
| --- | --- | --- |
| Move-in  This unit is in decent, safe, and sanitary condition. Any deficiencies identified in this report will be remedied within 30 days of the date the tenant moves into the unit.  I have inspected the premises and found this unit to be in decent, safe, and sanitary condition. Any deficiencies are noted above. I recognize that i am responsible for keeping the apartment in good condition, except for normal wear. In the event of damage, i agree to pay the cost to restore the apartment to its original condition.  Tenant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tenant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | **Move-out**  Manager's/landlord’s signature  - agree with move-out inspection  - disagree with move-out inspection due to the following items:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tenant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tenant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |