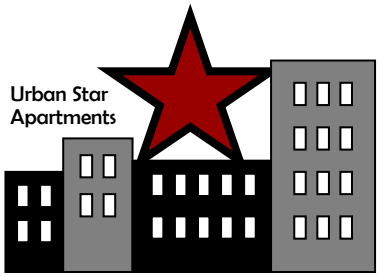
Move In/Out Condition Report



urbanstar@comcast.net

201 W. 42ND St Savannah, GA 31401 (912) 596-1358

You should complete this checklist, noting the condition of the rental property, and return it to the landlord within 7 days after obtaining possession of the rental unit.

Tenant's Name:
Property Address:

	Move-In Condition	Move-Out Condition
General		
Walls:	_____	_____
Floors:	_____	_____
Window Screens:	_____	_____
Lighting:	_____	_____
Doors:	_____	_____
Window Treatments:	_____	_____
Smoke Detector:	_____	_____
Heater/Air Conditioning:	_____	_____
Other:	_____	_____
	_____	_____
Kitchen		
Stove		
Range: (Make/Color)	_____	_____
Broiler Pan:	_____	_____
Oven:	_____	_____
Exhaust/Hood/Fan:	_____	_____
Refrigerator		
Refrigerator:(Make/Color)	_____	_____
Ice Cube Tray:	_____	_____
Shelves:	_____	_____

NC- Needs Cleaning **NP**- Needs Painting **NSP**- Needs Spot Painting
NR- Needs Repair **RP**- Needs Replacement

Miscellaneous

Sink:	_____	_____
Microwave: (Make/Color)	_____	_____
Washer/Dryer:	_____	_____
Other:	_____	_____

Bathroom

Light Fixtures:	_____	_____
Medicine Cabinet:	_____	_____
Towel Racks:	_____	_____
Sink:	_____	_____
Bath/Shower:	_____	_____
Bath Tub Fixtures:	_____	_____
Toilet:	_____	_____
Walls/Ceiling:	_____	_____
Flooring:	_____	_____

Comments: _____

Move-In

_____	_____
Signature of Resident	Date of Move-In Inspection
_____	_____
Signature of Resident	Date of Move-In Inspection
_____	_____
Signature of Manager	Date Keys Delivered to Tenant

Move-Out

_____	_____
Signature of Resident	Date of Move-Out Inspection
_____	_____
Signature of Resident	Date of Move-Out Inspection
_____	_____
Signature of Manager	Date Keys Received from Tenant

NC- Needs Cleaning **NP**- Needs Painting **NSP**- Needs Spot Painting
NR- Needs Repair **RP**- Needs Replacement