

CONDITION FORM

NOTICE: 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. You are also entitled to request and receive a copy of the last termination inventory checklist which shows what claims were chargeable to the last prior tenants.

Inventory and Condition Form

This is an Inventory & Condition Form to the Apartment Lease Contract executed on _____, by you, the resident(s), for the dwelling you have agreed to rent.

That dwelling is: Apt # _____ at _____

(name of apartments) located at _____

(street address) in _____.

You must note on this form all defects or damage and return it to our representative. Otherwise, everything will be considered to be in a clean, safe, and good working condition. Please mark through items listed below if they don't exist. This form protects both you (the resident) and us (the owner). We'll use it in determining what should and should not be considered your responsibility upon move-out.

Resident's Name: _____ Home Phone: (____) _____ Work Phone: (____) _____

Resident's Name: _____ Home Phone: (____) _____ Work Phone: (____) _____

Resident's Name: _____ Home Phone: (____) _____ Work Phone: (____) _____

Resident's Name: _____ Home Phone: (____) _____ Work Phone: (____) _____

<input type="checkbox"/> Move-In or <input type="checkbox"/> Move-Out Condition (Check one)

Living Room

Walls _____
Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____
Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Closet, Rods, Shelves _____
Closet Lights, Fixtures _____
Lamps, Bulbs _____
Other _____

Kitchen

Walls _____
Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____
Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____

Cabinets, Drawers, Handles _____
Countertops _____
Stove/Oven, Trays, Pans, Shelves _____
Vent Hood _____
Refrigerator, Trays, Shelves _____
Refrigerator Light, Crisper _____
Dishwasher, Dispensers, Racks _____
Sink/Disposal _____
Microwave _____
Other _____

General Items

Thermostat _____
Cable TV or Master Antenna _____
A / C Filter _____
Washer / Dryer _____
Garage Door _____
Ceiling Fans _____
Exterior Doors, Screens / Screen Doors, Doorbell _____
Fireplace _____
Other _____

Dining Room

Walls _____
Wallpaper _____
Plugs, Switches, A / C Vents _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Closet, Rods, Shelves _____
Closet Lights, Fixtures _____
Other _____

Halls

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____

Doors, Stops, Locks _____
Closet, Rods, Shelves _____
Closet Lights, Fixtures _____
Other _____

Exterior (if applicable)

Patio / Yard _____
Fences / Gates / Gate Latches or Locks _____
Faucets _____
Balconies _____
Other _____

Bedroom (describe which one) _____

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Closets, Rods, Shelves _____
Closet Lights, Fixtures _____
Other _____

Bedroom (describe which one) _____

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Closets, Rods, Shelves _____
Closet Lights, Fixtures _____
Other _____

Bedroom (describe which one) _____

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____

Closets, Rods, Shelves _____
Closet Lights, Fixtures _____
Other _____

Bath (describe which one) _____

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Exhaust Fan / Heater _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Sink, Faucet, Handles, Stopper _____
Countertops _____
Mirror _____
Cabinets, Drawers, Handles _____
Toilet, Paper Holder _____
Bathtub, Enclosure, Stopper _____
Showers, Doors, Rods _____
Tile _____
Other _____

Bath (describe which one) _____

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Exhaust Fan / Heater _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Sink, Faucet, Handles, Stopper _____
Countertops _____
Mirror _____
Cabinets, Drawers, Handles _____
Toilet, Paper Holder _____
Bathtub, Enclosure, Stopper _____
Showers, Doors, Rods _____
Tile _____
Other _____

Half Bath

Walls _____

Wallpaper _____
Plugs, Switches, A / C Vents _____
Woodwork / Baseboards _____
Ceiling _____
Light Fixtures, Bulbs _____
Exhaust Fan / Heater _____
Floor / Carpet _____

Doors, Stops, Locks _____
Windows, Latches, Screens _____
Window Coverings _____
Sink, Faucet, Handles, Stopper _____
Countertops _____
Mirror _____
Cabinets, Drawers, Handles _____
Toilet, Paper Holder _____
Tile _____
Other _____

Safety-Related Items (put "N / A" if not applicable)

Door Knob Locks _____
Keyed Deadbolt Locks _____

Keyless Deadbolts _____
Sliding Door Pin Locks _____
Sliding Door Latches _____
Sliding Door Security Bars _____
Door Viewers _____
Window Latches _____
Porch and Patio Lights _____
Smoke Detectors _____
Alarm System _____
Fire Extinguisher (look at charge level BUT DO NOT TEST)

Garage Door Opener(s) _____
Gate Access Card(s) _____
Apt. Key(s) _____
Mail Key(s) _____
Bldg. Key(s) _____
Other _____

Date of Move-In: _____
or
Date of Move-Out: _____

Acknowledgement. You acknowledge that you have inspected and tested all of the safety-related items (if in the dwelling) and that they are working, except as noted above. All items will be assumed to be in good condition unless otherwise noted on this form. You acknowledge receiving written operating instructions on the alarm system and gate access entry systems (if there are any). You acknowledge testing the smoke detector(s) and verifying that they are working. You acknowledge that you and management have inspected the apartment unit and that no signs of bedbugs or other pests are present. This unit is in a decent, safe and sanitary condition.

In signing below, you accept this inventory as part of the Lease Contract and agree that it accurately reflects the condition of the premises for purposes of determining any refund due to you when you move out.

Resident: _____ **Date of Signing:** _____

Landlord's Representative: _____ **Date of Signing:** _____

NOTICE: You must notify your landlord in writing within 4 days after you move of a forwarding address where you can be reached and where you will receive mail; otherwise your landlord shall be relieved of sending you an itemized list of damages and the penalties adherent to that failure.