



Tenant(s):

INSPECTION REPORT

Address:			
THIS FORM MUST BE RETURNED AND SIGNED WITHIN 48 HOURS OR TENANT WILL BE HELD RESPONSIBLE FOR ALL DAMAGES.			
	MOVE-IN INSPECTION	MOVE-OUT INSPECTION	
	Date	Date	
ROOMS	The Tenant accepts responsibility for the condition of the above described property "AS IS" with any exceptions listed below.	If the following inspection reveals any damages beyond normal wear and tear, deductions are to be made from Tenant's security deposit.	
Living-Dining			
	☐ Okay	☐ Okay	
Kitchen			
	☐ Okay	☐ Okay	
Halls			
	☐ Okay	□ Okov	
Dadraam (1)	□ Oray	☐ Okay	
Bedroom (1)			
	☐ Okay	☐ Okay	
Bedroom (2)			
	☐ Okay	☐ Okay	
Bedroom (3)			
	☐ Okay	☐ Okay	
Bedroom (4)			
	☐ Okay	☐ Okay	

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□ Okay

Bathroom (1)

Okay

Bathroom (2)		
24(2)		
	☐ Okay	☐ Okay
Bathroom (3)		
	☐ Okay	☐ Okay
Outside		
	☐ Okay	☐ Okay
Other Comments	MOVE-IN INSPECTION	MOVE-OUT INSPECTION
	☐ Okay	☐ Okay
	NOTICE: The Tenant(s) shall be responsible for the condition of property "AS IS", and any damage beyond normal wear and tear will be paid for at the Tenant's expense.	Date Vacated:
		All keys returned including deadbolt and mail box?
		Forwarding Address:
	Tenant	Tenant
	Tenant	Tenant
	Landlord	Landlord

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