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## MOVE-IN / MOVE-OUT INSPECTION REPORT

Property Address: \_\_\_\_\_

Resident: \_\_\_\_\_ Inspection Date \_\_\_\_\_, 20\_\_

ROOM	OK	MOVE-IN CONDITION	OK	MOVE-OUT CONDITION
<b>GENERAL</b> Paint-interior – Walls & Ceiling Paint-exterior – Walls & Trim Windows – Screens – Drapes Pet odor – damage Smoke Detectors Entry Bell Light Fixture – front Light Fixture – rear Patios Yard, Garden, etc. Other:				
<b>LIVING ROOM</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>DINING ROOM</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>KITCHEN</b> Stove & Oven Refrigerator Disposal & Dishwasher Cabinets & Counters Sinks Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>FAMILY ROOM (DEN)</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				

<b>BEDROOM 1</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>BEDROOM 2</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>BEDROOM 3</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				
<b>BEDROOM 4</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				

<b>ROOM</b>	<b>OK</b>	<b>MOVE-IN CONDITION</b>	<b>OK</b>	<b>MOVE-OUT CONDITION</b>
<b>BATH 1</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets Shower – Sink – Tub Shower Rod or Door Faucets Towel Bars Toilet – Seat – Paper Holder				
<b>BATH 2</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets Shower – Sink – Tub Shower Rod or Door Faucets Towel Bars Toilet – Seat – Paper Holder				
<b>BATH 3</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets Shower – Sink – Tub Shower Rod or Door Faucets Towel Bars Toilet – Seat – Paper Holder				
<b>HALL</b> Carpets – Floors Doors & Locks Fixtures & Lights Switches & Outlets				

**General Comments:**

**KEYS**

Front Door Key(s) ..... # \_\_\_\_\_  
Back Door Key(s) ..... # \_\_\_\_\_  
Garage Door Key(s) ..... # \_\_\_\_\_  
Garage Door Opener(s) ..... # \_\_\_\_\_  
Other Key(s) ..... # \_\_\_\_\_

**Other Notes:**

2 blank forms received by Resident: Resident's Initials \_\_\_\_\_

Resident accepts the responsibility to complete this form within seven (7) days of taking possession and to return a completed, signed copy to Management. Failure to do so shall be Resident's acknowledgment that Property is in perfect condition in every particular.

Resident agrees that this represents an accurate description of the current condition and assumes responsibility for the property as of \_\_\_\_\_, 20\_\_\_\_.

**MOVE-IN**

**Resident** \_\_\_\_\_ **Date** \_\_\_\_\_ **Manager** \_\_\_\_\_

**Resident** \_\_\_\_\_ **Date** \_\_\_\_\_ **Manager** \_\_\_\_\_

I have this day returned to Management all keys that exist to this property.

**MOVE-OUT**

**Resident** \_\_\_\_\_ **Date** \_\_\_\_\_ **Manager** \_\_\_\_\_

**Resident** \_\_\_\_\_ **Date** \_\_\_\_\_ **Manager** \_\_\_\_\_