



DATE: ____-____-____

TENANT NAME(S): _____

RENTAL ADDRESS: _____ UNIT# _____

CITY: _____ STATE: _____ ZIP: _____

G= GREAT

A= ACCEPTABLE

F= FAIR

P= POOR

NA= NOT APPLICABLE

[illegible]

Notes on Move-In Condition: _____

I accept the unit in the above condition. Tenant has 7 days to amend in writing and present to Landlord for signature:

X

Name _____ Date _____

X

Name _____ Date _____

X _____
Name _____ Date _____

X

Name _____ Date _____

Notes on Move-Out Condition: _____

I left the unit in the above condition.

X
Name _____ Date _____

X

Name _____ Date _____

X _____
Name _____ Date _____

X

Name _____ Date _____

Forwarding Address(es): _____

I agree that all personal property left on the premises may be sold or disposed of by the Landlord without complying with the requirements of ORS 90.425(1) to (25) and (27).

X	X	X
Landlord/Owner/Agent	Tenant	Tenant
Date	Date	Date



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X		X	
Tenant	Date	Tenant	Date