

CHECK-IN/CHECK-OUT CONDITION REPORT

TENANT(S): _____

ADDRESS: _____ UNIT: _____

CITY: _____ STATE: _____ ZIP: _____

Rating Scale = (E)Excellent (VG) Very Good (G)Good (F)Fair (P)Poor								
	IN	Out		In	Out		In	Out
LIVING AREAS			KITCHEN			BEDROOM 3		
Walls			Walls			Walls		
Windows			Stove/Racks			Windows		
Blinds/Drapes			Refrigerator			Blinds/Drapes		
Rods			Ice Trays			Rods		
Floor			Shelves/Drawer			Floor		
Carpet/Vinyl/Wood			Disposal			Light Fixtures		
Light Fixtures			Dishwasher			Doors/Woodwork		
Doors/Woodwork			Counter Tops			Locks		
Locks			Cabinets			Ceilings		
Ceilings			Sink			Electric Outlets		
Electrical Outlets			Floor					
Garbage Cans			Windows					
TV Antenna/Cable			Blinds/Drapes			BATH ROOM		
Fireplace						Towel Bars		
Cleanliness						Sink & Vanity		
						Toilet		
BEDROOM 1			BEDROOM 2			Tub/Shower		
Walls			Walls			Fan (Exhaust)		
Windows			Windows			Floor		
Blinds/Drapes			Blinds/Drapes			Electric Outlets		

Rating Scale = (E)Excellent (VG) Very Good (G)Good (F)Fair (P)Poor								
Rods			Rods			Light Fixtures		
Floor			Floor					
Light Fixtures			Light Fixtures			Essential Services		
Doors/Woodwork			Doors/Woodwork			Plumbing		
Locks			Locks			Heating		
Ceilings			Ceilings			Electricity		
Electrical Outlets			Electric Outlets			Hot Water		
						Smoke Detectors		

Description of Damage:

I accept this unit in the above condition:

I left this unit in the above condition:

Tenant _____ Date _____

Tenant _____ Date _____

Tenant _____ Date _____

Tenant _____ Date _____

Landlord _____ Date _____

Landlord _____ Date _____

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andlord shall notify the

Landlord _____ Date _____

Date



ing the premises for termination of the l
the security deposit, the landlord shall ha
n interest, if otherwise required, or the l
ce by certified mail to the tenant's last k
claim on the deposit and the reason for
in substantially the following form:

ice of my intention to impose a claim fo
y deposit due to _____. I
utes. You are hereby notified that you r
y deposit within 15 days from the time y
y claim from your security deposit. You

(Landlord's Address)

(Landlord's Address)

Received:

Tenant _____ Date _____

Date _____

Tenant	Date
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Date _____