

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 | | |
| Rods | | | Rods | | | Light Fixtures | | |
| Floor | | | Floor | | | | | |
| Light Fixtures | | | Light Fixtures | | | Essential Services | | |
| Doors/Woodwork | | | Doors/Woodwork | | | Plumbing | | |
| Locks | | | Locks | | | Heating | | |

| | | | | | | | | |
|--|--|--|------------------|--|--|-----------------|--|--|
| Rating Scale = (E)Excellent (VG) Very Good (G)Good (F)Fair (P)Poor | | | | | | | | |
| Ceilings | | | Ceilings | | | Electricity | | |
| Electrical Outlets | | | Electric Outlets | | | Hot Water | | |
| | | | | | | Smoke Detectors | | |

Description of Damage:

Disclosure of visible evidence of mold in areas readily accessible within in the interior of the dwelling

The dwelling does ____ does not ____ contain visible evidence of mold.

Landlord **Date**

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