

Rental Property Inspection Checklist

Property Address
1st Tenant's Name
Phone Number
Move-In Date

Inspection Date
2nd Tenant's Name
Phone Number
Move-Out Date

Item	Condition On Arrival	Condition on Departure	Comment
General Interior			
Walls			
Ceilings			
Flooring			
Lighting			
Sockets			
Smoke detectors			
Heating/AC units			
Windows			
Doors			
Entrance Hall			
Entrance door			
Closet			
Clothes hanger and Shoe rack			
Mirror			
Kitchen			
Sink and faucet			
Counter-tops and cabinets			
Refrigerator			
Stove/Oven			
Microwave			
Kettle			
Table and chairs			
Bathroom			
Toilet			
Sink			
Shower/Bath			
Mirror			
Bedroom			
Bed frame and Mattress			
Curtains/Blinds			
Nightstands			
Wardrobe			
Living Room			
Sofa/Couch			
Coffee table			
TV and remote (if provided)			
Shelving/storage units			