MOVE-IN/MOVE-OUT INSPECTION Address Apt# Resident name(s)___ DATE: MOVE -OUT INSPECTION DATE: _ MOVE -IN INSPECTION The following inspection reveals any damage beyond normal wear & tear to The resident accepts responsibility for the condition of the above described apartment "AS IS" with any exceptions below. determine deductions from deposit. CONDITION CONDITION LIVING ROOM LIVING ROOM Walls Ceiling/Lights __ Ceiling/Lights ___ Floor Floor Blinds/Screens Blinds/Screens Doors Doors Other Other KITCHEN/ DINING ROOM KITCHEN/ DINING ROOM Walls Walls Ceiling/Lights ___ Ceiling/Lights ___ Floor Floor Blinds/Screens Blinds/Screens Doors Doors Cabinets Cabinets Countertops _____ Countertops _____ Appliances _ Appliances __ Other Other **UTILITY ROOM UTILITY ROOM** Walls Walls Ceiling/Lights ___ Ceiling/Lights ___ Floor Floor Doors Doors Other Other HALL HALL Walls Walls Ceiling/Lights _____ Ceiling/Lights ___ Floor Floor Doors Doors Other Other BEDROOMS MASTER #2 #3 BEDROOMS MASTER #2 #3 Walls Walls Ceiling/Lights _ Ceiling/Lights _ Floor Floor Blinds/Screens Blinds/Screens Doors Doors Other Other BATHROOMS HALL **BEDROOM** BATHROOMS HALL **BEDROOM** Walls Walls Ceiling/Lights __ Ceiling/Lights ___ Floor Floor Cabinets/Countertops____ Cabinets/Countertops Tub/Fixtures ____ Tub/Fixtures ___ Doors Doors Other Other MISCELLANEOUS MISCELLANEOUS STORAGE AREA STORAGE AREA KEYS: APT POOL KEYS: APT MAIL POOL RESIDENT TAG RESIDENT TAG INSPECTED FOR PET DAMAGE: INSPECTED FOR PET DAMAGE: Date: ____ Name Date: NOTICE: The resident shall be responsible for the condition of this Date Vacated: apartment "AS IS" and any damage beyond normal wear & tear will be paid Forwarding Address__ for at Resident's expense. MOVE-OUT INSPECTION RESULTS HEREBY ACCEPTED: MOVE-IN INSPECTION RESULTS HEREBY ACCEPTED: Resident _ Resident _ Resident Resident __ Manager/Agent ___ Manager/Agent ___