Landlord/Tenant Walk-Through Checklist
GENERAL CONDITION OF RENTAL UNIT AND PREMISES

_____ _____ _____

Street Address Unit Number City

	Condition on Arrival	Condition on Departure	Estimated Cost of Repair/Replacement
LIVING ROOM			
Floors & Floor Coverings			
Drapes & Window Coverings			
Walls & Ceilings			
Light Fixtures			
Windows, Screens & Doors			
Front Door & Locks			
Smoke Detector			
Fireplace			
Other			
KITCHEN			
Floors & Floor Coverings			
Walls & Ceilings			
Light Fixtures			
Cabinets			
Counters			

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Stove/Oven			
Refrigerator			
Dishwasher			
Garbage Disposal			
Sink & Plumbing			
Smoke Detector			
Other			
DINING ROOM			
Floors & Floor Covering			
Walls & Ceilings			
Light Fixtures			
Windows, Screens & Doors			
Smoke Detector			
Other			
BATHROOM			
Floors & Floor Coverings			
Walls & Ceilings			
Windows, Screens & Doors			
Light Fixtures			
Bathtub/Shower			
Sink & Counters			

Toilet			
Other			
BEDROOM			
Floors & Floor Coverings			
Windows, Screens & Doors			
Walls & Ceilings			
Light Fixtures			
Smoke Detector			
Other			
OTHER AREAS			
Heating System			
Air Conditioning			
Lawn/Garden			
Stairs and Hallway			
Patio, Terrace, Deck, etc.			
Basement			
Parking Area			
Other			

[ ] Tenants acknowledge that all smoke detectors and fire extinguishers were tested in their presence and found to be in working order and that the testing procedure was explained to them. Tenants agree to test all detectors at least once a month and to report any problems to Landlord/Manager in writing. Tenants agree to replace all smoke detector batteries as necessary.

FURNISHED PROPERTY

	Condition on Arrival	Condition on Departure	Estimated Cost of Repair/Replacement
LIVING ROOM			
Coffee Table			
End Tables			
Lamps			
Chairs			
Sofa			
Other			
KITCHEN			
Broiler Pan			
Ice Trays			
Other			
DINING ROOM			
Chairs			
Stools			
Table			
Other			
BATHROOM			
Mirrors			

Shower Curtain			
Hamper			
Other			
BEDROOM			
Beds (single)			
Beds (double)			
Chairs			
Chests			
Dressing Tables			
Lamps			
Mirrors			
Night Tables			
Other			
OTHER AREAS			
Bookcases			
Desks			
Pictures			
Other			

Use this space to provide any additional explanation:

Landlord/Tenant Checklist completed on moving in on _____ and approved by:

_____ and
Landlord/Manager

_____
Tenant

_____
Tenant

_____
Tenant

_____
Tenant

Landlord/Tenant Checklist completed on moving out on _____ and approved by:

_____ and
Landlord/Manager

_____
Tenant

_____
Tenant

_____
Tenant

_____
Tenant