

# Move-In Inspection Form

2012-2013

Please fill out the inspection form THOROUGHLY. This will ensure that any damages upon arrival will not be charged to your account. Once completed, hand this form into the rental office as soon as possible. Move-In Inspection Forms will only be accepted until **September 3<sup>rd</sup>, 2012**. After that date, Move-In Inspection Forms will be invalid and any damages not previously recorded will be your responsibility during move-out inspections.

Entry Door: \_\_\_\_\_

## LIVING ROOM

Windows: \_\_\_\_\_ Screens: \_\_\_\_\_

Walls: \_\_\_\_\_

Floor: \_\_\_\_\_

Sofa/Chair: \_\_\_\_\_

Table: \_\_\_\_\_ Smoke Detector: \_\_\_\_\_

Curtain Rods: \_\_\_\_\_ Light Fixture: \_\_\_\_\_

## KITCHEN

Walls: \_\_\_\_\_

Floor: \_\_\_\_\_

Cupboards: \_\_\_\_\_ Counter Tops: \_\_\_\_\_

Refrigerator: \_\_\_\_\_ Fire Extinguisher: \_\_\_\_\_

Stove: \_\_\_\_\_ Oven: \_\_\_\_\_

Sink: \_\_\_\_\_ Light Fixture: \_\_\_\_\_

## HALLWAY

Walls: \_\_\_\_\_

Floor: \_\_\_\_\_

Closet/Door: \_\_\_\_\_ Light Fixture: \_\_\_\_\_

## BEDROOMS

	BEDROOM 1	BEDROOM 2	BEDROOM 3	BEDROOM 4
Bedroom Door				
Windows/Screens				
Curtain Rods				
Walls				
Floor				
Closet/Door				
Beds/Mattresses				
Dresser/Desk				
Light Fixture				

## BATHROOMS

	BATHROOM 1	BATHROOM 2
Bedroom Door		
Windows/Screens		
Curtain Rods		
Walls		
Floor		
Closet/Door		
Beds/Mattresses		
Dresser/Desk		
Light Fixture		

Apartment Number: \_\_\_\_\_ Date: \_\_\_\_\_

*I hereby agree that all of my descriptions are as accurate and detailed as possible. I understand that if I do not hand this Move-In Inspection Form by Monday, September 3<sup>rd</sup>, 2012, any damages not previously recorded will be my responsibility during move-out inspections.*

Tenant Signature: \_\_\_\_\_