

Here's what the lessor/agent does

1. Inspects the premises and marks the 'Clean/Undamaged/Working' column for each item in the premises. Where a mark is not appropriate, writes a description in the 'Other items or comments (if any)' column.
2. If there are any items in the room that are not listed, adds them to the 'Other items or comments (if any)' column. The spare space can be used for details about additional items.
3. Gives a signed copy of the Condition Report to the tenant/s (keeping a copy for their records). Explains to the tenant/s that they must add their comments to the report, sign each page and return it to the lessor/agent within three (3) days.
4. Encourages the tenant/s to discuss any items where they disagree with the lessor's/agent's assessment of the condition of the premises. Any agreement reached can be recorded in the 'Additional Comments/Information' section, or supporting documentation can be attached to this report.
5. Makes sure each page of the report is signed by all parties, and gives a copy of the final report back to the tenant/s within 14 days of receiving it from the tenant/s.
6. Keeps the signed copy of the report from the tenant/s, so it can be compared with the condition of the premises at the end of the tenancy. The lessor/agent must keep a copy of the report for at least one (1) year after the tenancy agreement ends.

Here's what the tenant does

1. Inspects the premises and comments on any item where they disagree with the lessor/agent's report, or where they believe the report does not reflect the true condition of the premises.
2. Discusses with the lessor/agent any items where they disagree with their assessment.
3. Signs EACH PAGE of the report.
4. Returns a signed copy of each page to the lessor/agent within three (3) days. Although the lessor/agent is required to provide the tenant with a copy of the final report, tenants might also like to make a copy for their own records.
5. Uses this report when preparing the Exit Condition report at the end of the tenancy.

The Act contains penalties for non-compliance with its requirements for preparing, signing and providing copies of the condition reports.

If you require further information or assistance, contact the Residential Tenancies Authority on 1300 366 311.

Water Charging

Under the Residential Tenancies and Rooming Accommodation Act 2008, tenants can only be charged for water consumption costs if the rental premises are individually metered (or water is delivered by vehicle) and the agreement states the tenant must pay for water. The tenant can only be charged for ALL water consumption costs if the premises are also water efficient.

Are the premises individually metered? Yes No

Water meter reading
at start of tenancy:

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Are the premises water efficient?

For the premises to be water efficient, specified devices in the premises must have the equivalent of a *3 star WELS rating or higher. That is:

- internal cold water taps (including single mixer taps) and showerheads must have a maximum flow rate of 9 litres/minute, and
- toilets must have a dual flush function that does not exceed 6.5 litres on full flush and 3.5 litres on half flush and have a maximum average flush volume of 4 litres (based on the average of 1 full flush and 4 half flushes).

* For more information about the WELS scheme visit: www.waterrating.gov.au

Kitchen sink taps Yes No

Hand Basins Yes No

Laundry taps (tub) Yes No

Showerheads Yes No

Toilets Yes No

Tenants cannot be charged for water consumption costs unless the requirements of the Residential Tenancies and Rooming Accommodation Act 2008 are met.

Signature of lessor or lessor's agent

Date

	/ /
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**Entry Condition Report –
General Tenancies – Page 2**

Residential Tenancies and Rooming Accommodation Act 2008 (Section 65)

Address of rental premises

Postcode

Name of tenant/s

Name of lessor/agent

		Lessor / agent			Item	Tenant	
		Other items or comments (if any)				Comment on lessor/agent's report	
		Clean	Undamaged	Working			
Entry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points		
Lounge Room		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TV/power points		
Dining Room		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TV/power points		
Kitchen / Meals		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cupboards/drawers		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bench tops/tiling		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sink/disposal unit/taps		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Stove top/griller		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Oven		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Exhaust fan/rangehood		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Dishwasher		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points			
Family Room		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings		
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points		

Tenant - sign and return to lessor/agent – keep a copy for your records

Lessor/agent's signature

Tenant/s signature

1.

2.

3.

Lessor / agent					Item	Tenant
Other items or comments (if any)		Clean	Undamaged	Working	Comment on lessor/agent's report	
Bedroom 1		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wardrobe/drawers/shelves	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points	
Ensuite		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls/tiling	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bath	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shower/shower screen	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wash basin/vanity	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mirror/cabinet	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Towel rails	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points		
Bedroom 2		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wardrobe/drawers/shelves	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points	
Bedroom 3		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wardrobe/drawers/shelves	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points	
Bedroom 4		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/walls	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wardrobe/drawers/shelves	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/light fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/floor coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power points	

Tenant – sign and return to lessor/agent – keep a copy for your records

Lessor/agent's signature

Tenant/s signature

1.

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	Lessor / agent Other items or comments (if any)				Item	Tenant Comment on lessor/agent's report
		Clean	Undamaged	Working		
Bathroom		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/Walls/Tiling	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/Screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/Curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/Light Fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/Floor Coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bath	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Shower/Shower Screen	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wash Basin/Vanity	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mirror/Cabinet	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Towel Rails	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Toilet	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power Points	
Laundry		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Doors/Walls	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Windows/Screens	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Blinds/Curtains	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Ceiling/Light Fittings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Floor/Floor Coverings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wash Tubs	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Washing Machine/Dryer	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power Points		
General		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Smoke Alarms	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Security Devices	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Balcony/Porch/Deck	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garage/Car Port/Storeroom	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gates/Fences	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Grounds/Garden	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Staircases/Railings	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Street Number/Letter box	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Paving/Pergola	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Hot Water System	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Keys/Locks/Remotes	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pool/Equipment	
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wheelie & Recycle Bins	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Garden Shed		
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Air conditioner/Fans		

Tenant – sign and return to lessor/agent – keep a copy for your records

Additional comments / information
(supporting documentation can be attached)

Lessor/agent signature	Date
	/ /

Tenant 1 signature	Date
	/ /

Tenant 2 signature	Date
	/ /

Tenant 3 signature	Date
	/ /

Electrical Safety Switches

Is there a safety switch on the premises?

Yes No

For more information on electrical safety switches: www.dir.qld.gov.au or call 1300 650 662.