

# MOVE-IN/MOVE-OUT ITEMIZED STATEMENT

|                  |  |                         |  |                       |  |                       |  |                     |  |
|------------------|--|-------------------------|--|-----------------------|--|-----------------------|--|---------------------|--|
| Resident Name(s) |  | Initial Inspection Date |  | Initial Inspection by |  | Final Inspection Date |  | Final Inspection By |  |
| Address/Apt. #   |  | City                    |  | State                 |  | Zip                   |  | Move in Date        |  |
|                  |  |                         |  |                       |  |                       |  | Move out Date       |  |

The condition of these premises is clean, undamaged, in good working order and adequate for customary use unless otherwise noted hereon. Use codes and comments to describe exceptions. Cross out items not applicable.

**CODES:** **NCC** - Needs complete cleaning • **REP** - Replace • **SC** - Needs spot cleaning • **SP** - Needs spot painting • **RPR** - Needs repair • **PT** - Needs painting • **SCR** - Scratched • **CLN** - Clean • **NEW** – New

| Kitchen             | Move-in Inspection | Initial Inspection<br>(Residents option) | Final Inspection |
|---------------------|--------------------|--|------------------|
| Ceiling             |                    |  |                  |
| Doors               |                    |  |                  |
| Walls               |                    |  |                  |
| Floors              |                    |  |                  |
| Hood/Filter         |                    |  |                  |
| Fan/Light           |                    |  |                  |
| Microwave           |                    |  |                  |
| Counter top         |                    |  |                  |
| Sink/Faucets        |                    |  |                  |
| Drains/Disposal     |                    |  |                  |
| Cabinet/Doors       |                    |  |                  |
| Shelves/Drawers     |                    |  |                  |
| Under sink          |                    |  |                  |
| Windows             |                    |  |                  |
| Screens             |                    |  |                  |
| Window coverings    |                    |  |                  |
| Electric fixtures   |                    |  |                  |
| Light bulbs         |                    |  |                  |
| <b>Stove/Oven</b>   |                    |  |                  |
| Stove-Outside       |                    |  |                  |
| Burners             |                    |  |                  |
| Drip pans           |                    |  |                  |
| Vent                |                    |  |                  |
| Timer/Controls      |                    |  |                  |
| Oven surfaces       |                    |  |                  |
| Oven racks          |                    |  |                  |
| Broiler pan         |                    |  |                  |
| Light               |                    |  |                  |
| <b>Refrigerator</b> |                    |  |                  |
| Inside (all parts)  |                    |  |                  |
| Outside             |                    |  |                  |
| <b>Dishwasher</b>   |                    |  |                  |
| Outside/Controls    |                    |  |                  |
| Inside (all parts)  |                    |  |                  |
| <b>Dining Room</b>  |                    |  |                  |
| Walls               |                    |  |                  |
| Ceiling             |                    |  |                  |
| Window coverings    |                    |  |                  |
| Shades              |                    |  |                  |
| Closet              |                    |  |                  |
| Doors               |                    |  |                  |
| Floor               |                    |  |                  |
| Windows             |                    |  |                  |
| Screens             |                    |  |                  |
| Electric fixtures   |                    |  |                  |
| Light bulbs         |                    |  |                  |



| Living Room        | Move-in Inspection | Initial Inspection<br>(Residents option) | Final Inspection |
|--------------------|--------------------|--|------------------|
| Walls              |                    |  |                  |
| Ceiling            |                    |  |                  |
| Doors              |                    |  |                  |
| Windows            |                    |  |                  |
| Screens            |                    |  |                  |
| Window coverings   |                    |  |                  |
| Floor              |                    |  |                  |
| Closet             |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |
| Fireplace          |                    |  |                  |
| <b>1st Bedroom</b> |                    |  |                  |
| Walls              |                    |  |                  |
| Ceiling            |                    |  |                  |
| Windows            |                    |  |                  |
| Screens            |                    |  |                  |
| Window coverings   |                    |  |                  |
| Doors              |                    |  |                  |
| Closet             |                    |  |                  |
| Floor              |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |
| <b>2nd Bedroom</b> |                    |  |                  |
| Walls              |                    |  |                  |
| Ceiling            |                    |  |                  |
| Windows            |                    |  |                  |
| Screens            |                    |  |                  |
| Window coverings   |                    |  |                  |
| Doors              |                    |  |                  |
| Closet             |                    |  |                  |
| Floor              |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |
| <b>3rd Bedroom</b> |                    |  |                  |
| Walls              |                    |  |                  |
| Ceiling            |                    |  |                  |
| Windows            |                    |  |                  |
| Screens            |                    |  |                  |
| Window coverings   |                    |  |                  |
| Doors              |                    |  |                  |
| Closet             |                    |  |                  |
| Floor              |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |
| <b>Other Room</b>  |                    |  |                  |
| Walls              |                    |  |                  |
| Ceiling            |                    |  |                  |
| Closet/Cabinets    |                    |  |                  |
| Windows            |                    |  |                  |
| Window coverings   |                    |  |                  |
| Screen             |                    |  |                  |
| Floor              |                    |  |                  |
| Door               |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |



| 1st Bath           | Move-in Inspection | Initial Inspection<br>(Residents option) | Final Inspection |
|--------------------|--------------------|--|------------------|
| Ceiling            |                    |  |                  |
| Walls/Tile         |                    |  |                  |
| Floors             |                    |  |                  |
| Cabinets           |                    |  |                  |
| Shelves            |                    |  |                  |
| Doors              |                    |  |                  |
| Mirror             |                    |  |                  |
| Tub/Shower         |                    |  |                  |
| Caulking           |                    |  |                  |
| Shower Door/Tracks |                    |  |                  |
| Basin              |                    |  |                  |
| Drains             |                    |  |                  |
| Faucets            |                    |  |                  |
| Counter tops       |                    |  |                  |
| Exhaust fan        |                    |  |                  |
| Bowl/Seat          |                    |  |                  |
| Towel racks        |                    |  |                  |
| Window             |                    |  |                  |
| Screen             |                    |  |                  |
| Electric fixtures  |                    |  |                  |
| Light bulbs        |                    |  |                  |

| 2nd Bath           |  |  |  |
|--------------------|--|--|--|
| Ceiling            |  |  |  |
| Walls/Tile         |  |  |  |
| Floors             |  |  |  |
| Cabinets           |  |  |  |
| Shelves            |  |  |  |
| Doors              |  |  |  |
| Mirror             |  |  |  |
| Tub/Shower         |  |  |  |
| Caulking           |  |  |  |
| Shower Door/Tracks |  |  |  |
| Basin              |  |  |  |
| Drains             |  |  |  |
| Faucets            |  |  |  |
| Counter tops       |  |  |  |
| Exhaust fan        |  |  |  |
| Bowl/Seat          |  |  |  |
| Towel racks        |  |  |  |
| Window             |  |  |  |
| Screen             |  |  |  |
| Electric fixtures  |  |  |  |
| Light bulbs        |  |  |  |

| Systems            |  |  |  |
|--------------------|--|--|--|
| Smoke detectors    |  |  |  |
| Furnace/Thermostat |  |  |  |
| Air Conditioning   |  |  |  |
| Water Heater       |  |  |  |
| Water Softener     |  |  |  |

| Laundry Room     |  |  |  |
|------------------|--|--|--|
| Washer/Dryer     |  |  |  |
| Hookups          |  |  |  |
| Light fixtures   |  |  |  |
| Window/Coverings |  |  |  |
| Floor            |  |  |  |
| Door             |  |  |  |
| Other            |  |  |  |



| Front Porch           | Move-in Inspection | Initial Inspection<br>(Residents option) | Final Inspection |
|-----------------------|--------------------|--|------------------|
| Electric fixtures     |                    |  |                  |
| Light bulbs           |                    |  |                  |
| <b>Back Porch</b>     |                    |  |                  |
| Electric fixtures     |                    |  |                  |
| Light bulbs           |                    |  |                  |
| <b>Garage/Carport</b> |                    |  |                  |
| Electric fixtures     |                    |  |                  |
| Light bulbs           |                    |  |                  |
| Remote/Opener         |                    |  |                  |
| Floor                 |                    |  |                  |
| Walls                 |                    |  |                  |
| Garage door           |                    |  |                  |
| <b>Yard</b>           |                    |  |                  |
| Landscaping           |                    |  |                  |
| Sprinklers            |                    |  |                  |
| Fences/Gates          |                    |  |                  |
| Other                 |                    |  |                  |
| <b>Number of Keys</b> |                    |  |                  |
| Door                  |                    |  |                  |
| Laundry Room          |                    |  |                  |
| Mailbox               |                    |  |                  |
| Other                 |                    |  |                  |

**According to state law:**

Any security shall be held by the landlord for the tenant who is party to the lease or agreement. The claim of a tenant to the security shall be prior to the claim of any creditor for the landlord. (Civil Code Section 1950.5(d)). According to Civil Code Section 1950.5(b), the security deposit may be used by the owner for any purpose, including, but not limited to, any of the following:

- (1) The compensation of a landlord for a tenant's default in the payment rent.
- (2) The repair of damages to the premises, exclusive of ordinary wear and tear, caused by the tenant or by a guest or licensee of the tenant.
- (3) The cleaning of the premises upon termination of the tenancy necessary to return the unit to the same level of cleanliness it was in at the inception of the tenancy. The amendments to this paragraph enacted by the act adding this sentence shall apply only to tenancies for which the tenant's right to occupy begins after January 1, 2003. (Amendment underlined)
- (4) To remedy future defaults by the tenant in any obligation under this rental agreement to restore, replace, or return personal property or appurtenances, exclusive of ordinary wear and tear, if the security deposit is authorized to be applied thereto by the rental agreement.

From the time of the initial inspection until the termination of the tenancy, the tenant may remedy the deficiencies identified in the initial inspection, in a manner consistent with the rights and obligations of the parties under the rental agreement, in order to avoid deductions from the security deposit.

**The law allows the Owner/Agent to use the security deposit for legal deductions itemized in this statement that are not corrected by the Resident prior to the termination of the tenancy or that were not identified due to the presence of the Residents' possessions during the time of the initial inspection. It also allows Owner/Agent to use the security deposit to correct any damages that occur to the unit/property between the time of the initial inspection and the termination of the tenancy.**

**An itemized statement will be sent to you within 21 calendar days after the Owner/Agent has regained possession of the premises.**

**Move-In Inspection:**

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Resident: \_\_\_\_\_ Date: \_\_\_\_\_

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

**Initial Inspection:**

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

**Move-Out Inspection:**

Owner/Agent: \_\_\_\_\_ Date: \_\_\_\_\_

