

**Central Florida
Realty Partners, Inc.**
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Longwood, FL 32779

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Instructions: Tenant(s) must complete and return this checklist within TWO business days of moving in. Tenant(s) should make a copy of this checklist for their records. Landlord/Property Manager will use this move-in checklist during the move out inspection and use as reference when determining any claims against the Security Deposit. **BE SPECIFIC and DETAILED** when filling out the checklist. If an area(s) is acceptable, check the box under the "OK" column. Please be advised, this is strictly a move in checklist. Any items that warrant a repair must also be submitted online through the the **tenant portal maintenance request**.

Property Address

Landlord/Manager Name (Print)

Tenant Name (Print)

Tenant Name (Print)

Tenant Name (Print)

Tenant Name (Print)

Tenant Name (Print)

ITEM	OK	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE	OK
LIVING ROOM	<input type="checkbox"/>			<input type="checkbox"/>
Floor & Floor Covering	<input type="checkbox"/>			<input type="checkbox"/>
Walls & Ceiling	<input type="checkbox"/>			<input type="checkbox"/>
Door(s)	<input type="checkbox"/>			<input type="checkbox"/>
Door Lock(s) & Hardware	<input type="checkbox"/>			<input type="checkbox"/>
Lighting Fixture(s)	<input type="checkbox"/>			<input type="checkbox"/>
Window(s) & Screen(s)	<input type="checkbox"/>			<input type="checkbox"/>
Window Covering(s)	<input type="checkbox"/>			<input type="checkbox"/>
Smoke Detector &/or CO Detector	<input type="checkbox"/>			<input type="checkbox"/>
Fireplace	<input type="checkbox"/>			<input type="checkbox"/>
Other				
KITCHEN				
Floor & Floor Coverings	<input type="checkbox"/>			<input type="checkbox"/>
Walls & Ceiling	<input type="checkbox"/>			<input type="checkbox"/>
Door(s)	<input type="checkbox"/>			<input type="checkbox"/>
Door Lock(s) and Hardware	<input type="checkbox"/>			<input type="checkbox"/>
Window(s) & Screen(s)	<input type="checkbox"/>			<input type="checkbox"/>
Window Covering(s)	<input type="checkbox"/>			<input type="checkbox"/>
Light Fixture(s)	<input type="checkbox"/>			<input type="checkbox"/>
Cabinets	<input type="checkbox"/>			<input type="checkbox"/>
Counters	<input type="checkbox"/>			<input type="checkbox"/>
Stove/Oven/Range Hood	<input type="checkbox"/>			<input type="checkbox"/>
Refrigerator	<input type="checkbox"/>			<input type="checkbox"/>
Dishwasher	<input type="checkbox"/>			<input type="checkbox"/>
Sink(s) & Plumbing	<input type="checkbox"/>			<input type="checkbox"/>
Garbage Disposal	<input type="checkbox"/>			<input type="checkbox"/>
Fire extinguisher &/or CO Detector	<input type="checkbox"/>			<input type="checkbox"/>
Other				

CONDITION OF RENTAL PROPERTY CHECKLIST

ITEM	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
DINING ROOM		
Floor & Floor Covering(s)		
Walls & Ceiling		
Light Fixture(s)		
Window(s) & Screen(s)		
Window Covering(s)		
Other		
BATHROOM #1		
Floors & Floor Covering(s)		
Walls & Ceilings		
Counters & Surfaces		
Window(s) & Screen(s)		
Window Covering(s)		
Sink & Plumbing		
Bathtub/Shower		
Toilet		
Light Fixture(s)		
Door(s)		
Door Lock(s) & Hardware(s)		
Other		
BATHROOM #2		
Floor & Floor Covering(s)		
Walls & Ceiling		
Counters & Surfaces		
Window(s) & Screen(s)		
Window Covering(s)		
Sink & Plumbing		
Bathtub/Shower		
Toilet		
Light Fixture(s)		
Door(s)		
Door Lock(s) & Hardware(s)		
Other		

CONDITION OF RENTAL PROPERTY CHECKLIST

ITEM	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
BEDROOM #1		
Floor & Floor Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Walls & Ceiling <input type="checkbox"/>		<input type="checkbox"/>
Window(s) & Screen(s) <input type="checkbox"/>		<input type="checkbox"/>
Window Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Closet(s), including doors & tracks <input type="checkbox"/>		<input type="checkbox"/>
Lighting Fixture(s) <input type="checkbox"/>		<input type="checkbox"/>
Smoke Detector &/or CO Detector <input type="checkbox"/>		<input type="checkbox"/>
Door(s) <input type="checkbox"/>		<input type="checkbox"/>
Door Lock(s) & Hardware <input type="checkbox"/>		<input type="checkbox"/>
Other		
BEDROOM #2		
Floor & Floor Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Walls & Ceiling <input type="checkbox"/>		<input type="checkbox"/>
Window(s) & Screen(s) <input type="checkbox"/>		<input type="checkbox"/>
Window Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Closet, including doors & tracks <input type="checkbox"/>		<input type="checkbox"/>
Lighting Fixtures <input type="checkbox"/>		<input type="checkbox"/>
Smoke Detector &/or CO Detector <input type="checkbox"/>		<input type="checkbox"/>
Door(s) <input type="checkbox"/>		<input type="checkbox"/>
Door Lock(s) & Hardware <input type="checkbox"/>		<input type="checkbox"/>
Other		
BEDROOM #3		
Floor & Floor Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Walls & Ceiling <input type="checkbox"/>		<input type="checkbox"/>
Window(s) & Screen(s) <input type="checkbox"/>		<input type="checkbox"/>
Window Covering(s) <input type="checkbox"/>		<input type="checkbox"/>
Closet, including doors & tracks <input type="checkbox"/>		<input type="checkbox"/>
Lighting Fixtures <input type="checkbox"/>		<input type="checkbox"/>
Smoke Detector &/or CO Detector <input type="checkbox"/>		<input type="checkbox"/>
Door(s) <input type="checkbox"/>		<input type="checkbox"/>
Door Lock(s) & Hardware <input type="checkbox"/>		<input type="checkbox"/>
Other		

CONDITION OF RENTAL PROPERTY CHECKLIST

ITEM	CONDITION ON ARRIVAL	CONDITION ON DEPARTURE
OTHER		
Heating System <input type="checkbox"/>		<input type="checkbox"/>
Air Conditioning <input type="checkbox"/>		<input type="checkbox"/>
Stair(s) <input type="checkbox"/>		<input type="checkbox"/>
Hallway(s) <input type="checkbox"/>		<input type="checkbox"/>
Lawn(s) & Garden(s) <input type="checkbox"/>		<input type="checkbox"/>
Patio, Terrace, Deck, etc <input type="checkbox"/>		<input type="checkbox"/>
Parking Area(s) <input type="checkbox"/>		<input type="checkbox"/>
Other		
Other		
Other		
Other		
# of Keys Received:		

Tenants acknowledge that all smoke detectors, carbon monoxide 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.

Comments: Move In

Comments: Move Out

MOVE-IN INSPECTION DATE:

Owner/Agent Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature

MOVE-OUT INSPECTION DATE:

Owner/Agent Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature

Tenant Signature