## **COMMENCEMENT OR TERMINATION INVENTORY CHECKLIST**

## "YOU SHOULD COMPLETE THIS CHECKLIST NOTING THE CONDITION OF THE RENTAL PROPERTY AND RETURN IT TO THE LANDLORD WITHIN 7 DAYS AFTER OBTAINING POSSESSION OF THE RENTAL UNIT. YOU ARE ALSO ENTITLED TO REQUEST AND RECEIVE A COPY OF THE LAST TERMINATION INVENTORY CHECKLIST WHICH SHOWS WHAT CLAIMS WERE CHARGEABLE TO THE LAST PRIOR TENANTS."

This form may be used for both commencement and termination inventory checklist.

	Beginning Condition	Ending Condition
	Date	Date
<b>Kitchen</b> Walls/ceiling		
Floors/trim/doors		
Sink/counter/plumbing		
Light fixture		
Stove/refrigerator		
Window treatments		
Smoke detectors		
Other		
Bathroom Walls/ceiling		
Floor/trim/doors		
Toilet/plumbing		
Shower/tub		
Sink		
Window treatments		
Rx cabinet/mirror		
Light fixture		
Other		
Living Room Walls/ceiling		
Floor/trim/doors		
Light fixture		
Window treatments		
Smoke detectors		
Other		

	Beginning Condition	Ending Condition
	Date	Date
Dining Room Walls/ceiling		
Floors/trim/doors		
Light fixture		
Window treatments		
Smoke detectors		
Other		
Bedroom Walls/ceiling		
Floor/trim/doors		
Light fixture		
Window treatments		
Smoke detectors		
Other		
Bedroom Walls/ceiling		
Floor/trim/doors		
Light fixture		
Window treatments		
Smoke detectors		
Other		
Exterior Porch/entry		
Screens/storms		
Yard/shrubs		
Garage/out bldgs		
Locks/keys		
Additional comments:		
I have examined the ren	ntal unit at	erty will be considered free of defects.
	above, and condition as stated. _ Landlord's signature	
Date	Tenant's signature(s)	<u></u>