MOVE-IN INSPECTION FORM

Instructions: Please mark each item for its existing condition. Provide any remarks that describe conditions requiring attention.

	EXISTING C	CONDITION	
EXTERIOR			Remarks if item needs attention
	Good Condition	Needs Attention	
Foundation			
Walls			
Roof			
Electric Fixtures			
Windows/Screen			
Exterior Doors			
Gutters			
Shutters			
Mailbox			
Porch Deck			
GROUNDS			
Lawn			
Shrubs/Trees			
Walks			
Driveway			
Fence			
Exterior Storage			
SYSTEMS			
Cooling System			
Heating System			
Electrical			
Plumbing			*
Security			
Water Softener			
Sump Pump			
Garage Door Water Heater			
Lawn Sprinkler			
LIVING ROOM			
Floor			
Walls			
Ceiling			
Electric Fixtures			
Windows			
Doors/Locks			
Closet			

Page 1 of 3



North Carolina Association of REALTORS®, Inc.

Tenant Initials _____ Landlord Agent Initials _____



	EXISTING (CONDITION	
KITCHEN	Good Condition	Needs Attention	Remarks if item needs attention
Floors			
Walls			
Ceiling			
Electric Fixtures			
Windows			
Doors/Locks			
Cabinets			
Sink			
SHIK			
APPLIANCES			
Stove			
Refrigerator			
Dishwasher			
DED DO OM 1			
BEDROOM 1 Floor			
Walls			
Ceiling			
Electric Fixtures			
Windows			
Doors			
Closet			
Closet			
BEDROOM 2			
Floor			
Walls			
Ceiling			
Electric Fixtures			
Windows			
Doors			
Closet			
Closet			
		~	
BEDROOM 3			
Floor			
Walls			
Ceiling			
Electric Fixtures			
Windows			
Doors			
Closet			

	EXISTING CONDITION							
BATHROOMS				Remarks if item needs attention				
	Good Condition Ne			Attention				
	# 1	# 2	# 1	# 2				
Floors								
Walls								
Ceiling								
Electric Fixtures								
Window								
Door								
Tub/Shower								
Toilet								
Towel Rack								
Tissue Holder								
Cabinet								
OWNER								
OTHER								
I certify that I have conducted a walk-through inspection of the premises. I have examined each appropriate item and noted the condition. I understand that I am responsible for any and all damage resulting from my negligence or the negligence of my guests. I also understand that this inspection form shall become a part of the Residential Rental Contract (NCAR Form 410 - T).								
Tenant agrees to place	in Tenant'	s name all	utilities fo	r which he	/she is responsible.			
THE NORTH CAROLINA ASSOCIATION OF REALTORS®, INC. MAKES NO REPRESENTATION AS TO THE LEGAL VALIDITY OR ADEQUACY OF ANY PROVISION OF THIS FORM IN ANY SPECIFIC TRANSACTION.								
C'amatana a								
Signatures:								
Tenant				(Se	al) Date			
				(50.				
Tenant				(Se	al) Date			
					1) 5			
Landlord				(Se	al) Date			