

Move In - Move Out Quality Checklist

Please evaluate the items below about your home, write down any comments you have, and sign the bottom of this form. This will help us to minimize the risk of charging for damages at the end of your stay.

Date: _____

Tenants: _____

Property: _____

Hallways & Entryways

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows/Doors			
Locks			
Other:			

Living Room

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Other:			

Dining Room

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Other:			

Kitchen

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			

Kitchen, con't.			
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Dishwasher			
Refrigerator			
Cabinets			
Countertops			
Windows & Screens			
Other:			

Bedroom #1			
Who will be living in this room?		Location:	
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Closet			
Other:			

Bedroom #2			
Who will be living in this room?		Location:	
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Closet			
Other:			

Bedroom #3			
Who will be living in this room?		Location:	
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Closet			
Other:			

Bedroom #4

Who will be living in this room? _____ Location: _____

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Closet			
Other:			

Bedroom #5

Who will be living in this room? _____ Location: _____

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Windows & Screens			
Closet			
Other:			

Bathroom #1

Location: _____

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Cabinets & Mirrors			
Toilet			
Shower/Tub			
Other:			

Bathroom #2

Location: _____

Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Cabinets & Mirrors			
Toilet			

Bathroom #2, con't.			
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Shower/Tub			
Other:			

Bathroom #3			
Location: _____			
Are the following items in satisfactory condition?	Clean	No Damages	If in need of attention, please explain in detail.
Walls & Baseboards			
Floors			
Fixtures			
Cabinets & Mirrors			
Toilet			
Shower/Tub			
Other:			

Additional Comments:

Please sign below to indicate that you agree with the above assessment. If any problems occur during your stay, please don't hesitate to contact us at (317)752-6174. Thank you!

Signature: _____
 Printed Name: _____

Date: _____

Signature: _____
 Printed Name: _____

Date: _____

Signature: _____
 Printed Name: _____

Date: _____

Signature: _____
 Printed Name: _____

Date: _____

 Scott Jacobson, Owner

Date: _____