

Move In and Move Out Inspection Sheet

Resident(s) Bruce & Ratre Davidson
 Address 2603 NE 195th Ln C-9
 Phone 206 641-1130 253 457-4319



IMPORTANT!

Check these inspections closely! They will determine if you owe any charges when you move out.
 This form must be completed by both parties at the initiation and termination of the lease.

Record of Condition

Area	MOVE IN	Date: <u>8/13/17</u>	MOVE OUT	Date: _____	Est. Charge
Appliances					
Washer and Dryer	<u>N/A</u>				
Range	<u>good some repairs (chips on counter) bottom drawer is broken</u>				
Hood Fan	<u>good</u>				
Dishwasher	<u>good</u>				
Disposal	<u>little loud</u>				
Refridgerator	<u>good</u>				
Kitchen					
Sink/Faucets	<u>good</u>				
Cabinets and Hardware	<u>good</u>				
Floor	<u>2 tears by bridge</u>				
Walls/Ceiling	<u>good</u>				
Fixtures and Bulbs	<u>good</u>				
Living Room					
Floor	<u>new carpet</u>				
Walls/Ceiling	<u>good</u>				

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Record of Condition

Area	MOVE IN Date: <u>8/13/17</u>	MOVE OUT Date: _____	Est. Charge
Windows	good		
Blinds	good		
Sliding Door	good		
Deck/Storage	good freshly painted		
	Bathroom 1	Bathroom 2	
Medicine Cabinet and Vanity	some ware		
Toilet/Seat	new		
Ceramic Tile/Caulk	all		
Towel Bars	older		
Faucets	good		
Walls/Ceiling	good		
	Bedroom 1	Bedroom 2	
Walls/Ceiling	good	good	
Floor/Carpet	new	new	
Closet Doors	good but has 2 sm holes	good	
Windows	good	good	
Blinds	good	good	

Move in
 Tenant Signature: [Signature]
 Resident Manager: [Signature]
 Date: 8/13/17

Move out
 Tenant Signature: _____
 Resident Manager: _____
 Date: _____