



PROPERTY CONDITION CHECKLIST

Owner/Agent Name: Charles B Cosse Estate

Date: 07/21/2025

Resident Name(s): Denise Ziegler

Premises Address: 26 20 NE 195th St / Ln

City: Shoreline

WA Zip: 98155

Building Name: Canterbury Court Apartments

Unit: A3

Lease / Rental Agreement Term Start Date: 08/01/2025

Move-out Date: _____

INSTRUCTIONS

Before Move-In: For each item, include date of installation if possible and other information like serial numbers for major appliances in the first column. In the second column, describe condition at move-in (e.g., "new", "freshly painted, professional cleaned", "minor wear with 5 inch scratch".) If Owner/Agent is collecting a security deposit or applies for WA State Landlord Mitigation Funds, the Resident must sign this form at the time of lease signing, before taking occupancy (RCW 59.18.260).

After Move-Out: Owner/Agent must describe the condition of each item (e.g., "no change", "2 broken window panes" or "extensive damage - see attached photos"). Clean and make repairs then send completed Property Condition Checklist with Deposit Refund Statement to Resident within the period required by RCW 59.18.280.

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
GROUNDS:			
Fences/Gates	N/A		
Landscape	N/A		
Lawn	N/A		
Other	N/A		
ENTRY / HALL / STAIRS:			
Ceiling		no visible damage	
Closet		doors in okay condition rail track is rusty + worn	
Entry Door/Locks		framing has pet damage, door stained	
Floor (specify type)		carpet is older + worn piece missing by door	
Light Fixtures		original, in good condition	
Walls (specify paint and wallpaper)		mil holes, older paint	
Window Coverings (specify type)	N/A	N/A	
Windows / Tracks / Screens	N/A	N/A	
Other			

MOVE-IN SIGN: OWNER/AGENT INITIALS (Signature)

RESIDENT INITIALS (Signature)

MOVE-OUT: OWNER/AGENT INITIALS _____

PROPERTY CONDITION CHECKLIST | REVIEWED: 7/2023 | REVISED 7/25/2023

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PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
LIVING ROOM:			
Ceiling		no visible damage	
Door(s)	N/A	N/A	
Fireplace	N/A	N/A	
Floor (Type)	carpet	older, random pattern spots throughout	
Light Fixtures	N/A	N/A	
Walls (specify paint and wallpaper)		nail holes, older paint	
Window Coverings (Type)		older in good condition	
Windows/Tracks Screens		stained curtains clean	
KITCHEN:			
Cabinets/Counters	drawers have stains & wear	counters have cut marks under sink right side door split cabinets are stained + have slight counter caulking is worn damage	
Ceiling		no visible damage	
Diswasher (Make/Serial #)	Whirlpool FH2402311		
Disposal		last changed in 2023 in working condition	
Door(s)	N/A	N/A	
Floor (Type)	vinyl	stain near kitchen entrance	
Light Fixtures		original in good condition	
Refrigerator (Make/Serial #)	Whirlpool VS14P76321	last changed in 2016 scratches + rusting on side	
Sink/Faucet			
Stove (Make/Serial #)	Whirlpool RB4031501	oven scratched + rusty oven is dirty, stove knobs dirty?	
Hood/Fan/Filter/ Microwave		(last changed in 2023)	
Walls (specify paint and wallpaper)		no visible damage	
Window Coverings (Type)	N/A	N/A	
Window/Tracks Screens	N/A	N/A	

MOVE-IN SIGN: OWNER/AGENT INITIALS



RESIDENT INITIALS

D3

MOVE-OUT: OWNER/AGENT INITIALS

PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
BATHROOM 1 (SPECIFY ROOM LOCATION): <u>only bathroom</u>			
Cabinets/Counters	<u>vanity + drawers - worn + discolored</u>	<u>cuts in medicine cabinet is chipping + worn inside vanity has water damage</u>	
Ceiling		<u>worn + wear + tear no visible damage</u>	
Doors(s)		<u>scratched + small hole on entry side</u>	
Exhaust Fan/Heater			
Floor (Type)	<u>vinyl</u>	<u>cuts in vinyl + scratches flooring has discoloration</u>	
Light Fixtures		<u>lifting near vanity original, in good condition</u>	
Sink/Faucet		<u>newer faucet</u>	
Toilet	<u>2024</u>	<u>newer toilet</u>	
Towel Racks/Accessories			
Tub/Shower/Showerhead/Faucet		<u>tub caulking is worn + old</u>	
Walls (specify paint and wallpaper)		<u>nail holes, no visible damage</u>	
Window Coverings (Type)	<u>N/A</u>	<u>N/A</u>	
Windows/Tracks/Screens	<u>N/A</u>	<u>N/A</u>	
TP Holder:		<u>worn + discolored</u>	
BATHROOM 2 (SPECIFY ROOM LOCATION): <u>N/A</u>			
Cabinets/Counters	<u>N/A</u>		
Ceiling	<u>N/A</u>		
Doors(s)	<u>N/A</u>		
Exhaust Fan/Heater	<u>N/A</u>		
Floor (Type)	<u>N/A</u>		
Light Fixtures	<u>N/A</u>		
Sink/Faucet	<u>N/A</u>		
Toilet	<u>N/A</u>		
Towel Racks/Accessories	<u>N/A</u>		
Tub/Shower/Showerhead/Faucet	<u>N/A</u>		

MOVE-IN SIGN: OWNER/AGENT INITIALS



RESIDENT INITIALS



MOVE-OUT: OWNER/AGENT INITIALS

PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
BATHROOM 2 (CONTINUED):			
Walls (specify paint and wallpaper)	N/A		
Window Coverings (Type)	N/A		
Windows/Tracks/ Screens	N/A		
BEDROOM 1 (SPECIFY ROOM LOCATION): <u>only room</u>			
Ceiling		<u>no visible damage, old paint</u>	
Closets/Shelves		<u>doors are original, in good</u>	
Door(s)		<u>track rusted condition</u>	
Floor (Type)		<u>entry face of door chipped</u>	
Light Fixtures		<u>on bottom</u>	
Walls (specify paint and wallpaper)		<u>older carpet in good condition</u>	
Window Coverings (Type)		<u>original, in good condition</u>	
Windows/Tracks/ Screens		<u>nail holes, no visible damage</u>	
Other			
BEDROOM 2 (SPECIFY ROOM LOCATION): <u>N/A</u>			
Ceiling			
Closets/Shelves			
Door(s)			
Floor (Type)			
Light Fixtures			
Walls (specify paint and wallpaper)			
Window Coverings (Type)			
Windows/Tracks/ Screens			
Other			

MOVE-IN SIGN: OWNER/AGENT INITIALS

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RESIDENT INITIALS

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MOVE-OUT: OWNER/AGENT INITIALS

PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
BEDROOM 3 (SPECIFY ROOM LOCATION): <u>N/A</u>			
Ceiling	N/A		
Closets/Shelves	N/A		
Door(s)	N/A		
Floor (Type)	N/A		
Light Fixtures	N/A		
Walls (specify paint and wallpaper)	N/A		
Window Coverings (Type)	N/A		
Windows/Tracks/Screens	N/A		
Other	N/A		
UTILITY ROOM: <u>wall has water damage, particle board disintegrating/crumbling</u>			
Ceiling			
Closets/Shelves		<u>lowest shelf broken</u>	
Door(s)		<u>older + stained</u>	
Floor (Type)	<u>vinyl</u>	<u>original</u>	
Light Fixtures	<u>N/A</u>	<u>N/A</u>	
Walls (specify paint and wallpaper)		<u>3 hole on N.H. side, partition wall has large chip below</u>	
Window Coverings (Type)	<u>N/A</u>	<u>N/A</u>	
Window/Tracks/Screens		<u>track has rust</u>	
GARAGE:			
Cabinet/Shelves	N/A		
Entry Door/Locks	N/A		
Floor (Type)	N/A		
Garage Door/Locks	N/A		
Light Fixtures	N/A		

MOVE-IN SIGN: OWNER/AGENT INITIALS



RESIDENT INITIALS



MOVE-OUT: OWNER/AGENT INITIALS

PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
GARAGE (CONTINUED):			
Walls (specify paint and wallpaper)	N/A		
Windows/Tracks Screens	N/A		
Other	N/A		
General:			
Storage Area			
Washer	N/A		
Dryer	N/A		
Water Heater			
	<input type="checkbox"/> Inaccessible	Set to 120°F: <input type="checkbox"/> Yes <input type="checkbox"/> No	Set to 120°F: <input type="checkbox"/> Yes <input type="checkbox"/> No
Smoke Detector(s)		Functioning: <input type="checkbox"/> Yes <input type="checkbox"/> No	Functioning: <input type="checkbox"/> Yes <input type="checkbox"/> No
CO Detector(s)		Functioning: <input type="checkbox"/> Yes <input type="checkbox"/> No	Functioning: <input type="checkbox"/> Yes <input type="checkbox"/> No
OTHER ROOM 1 (SPECIFY ROOM TYPE & LOCATION): <u>Dining Area</u>			
Ceiling	N/A	<u>no visible damage</u>	
Closet/Shelves	N/A	<u>N/A</u>	
Door(s)	N/A	<u>N/A</u>	
Floor (Type)	N/A	<u>carpet random patch spots throughout</u>	
Light Fixtures	N/A	<u>original + in great condition</u>	
Walls (specify paint and wallpaper)	N/A	<u>nail holes, no visible damage</u>	
Window Coverings (Type)	N/A	<u>much older, in fair condition</u>	
Windows/Tracks/ Screens	N/A	<u>tracks are dirty</u>	
Other	N/A		

 MOVE-IN SIGN: OWNER/AGENT INITIALS 8

 RESIDENT INITIALS 03

MOVE-OUT: OWNER/AGENT INITIALS _____

PROPERTY CONDITION CHECKLIST

ITEM	DATE NEW / INFO	DETAILED CONDITION AT MOVE-IN	DETAILED CONDITION AT MOVE-OUT
OTHER ROOM 2 (SPECIFY ROOM TYPE & LOCATION): _____			
Ceiling	N/A		
Closet/Shelves	N/A		
Door(s)	N/A		
Floor (Type)	N/A		
Light Fixtures	N/A		
Walls (specify paint and wallpaper)	N/A		
Window Coverings (Type)	N/A		
Windows/Tracks/Screens	N/A		
Other	N/A		

Additional Items
 INCLUDED FURNITURE, APPLIANCES, ETC. NOT LISTED ELSEWHERE:

vanity near floor discolored & worn Kitchen - Left edge of sink separated.
vanity right side edge open - unfinished Kitchen - under sink left bottom edge
Kitchen - left side bottom side of light back wall damaged worn and discolored
Kitchen Floor - Random stains
D3.

MOVE-IN CONDITION ACKNOWLEDGMENT AND SIGNATURES

I/We have inspected the above premises prior to occupancy and accept the unit as habitable with the conditions noted. I/We understand that upon vacating the above unit, charges will be assessed for cleaning required. Repair and replacement costs resulting from resident negligence will also be added.

This checklist is pursuant to Washington State Landlord/Tenant Law, RCW 59.18.260. Both Resident and Owner/Agent should retain a signed copy of the completed Property Condition Checklist with your rental agreement.

Owner/Agent: <u>Charles B Cosse Estate</u>	Signature: <u>[Signature]</u>	Date: <u>7/28/25</u>
Resident: <u>Denise Ziegler</u>	Signature: <u>[Signature]</u>	Date: <u>7-28-25</u>
Resident: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____
Resident: _____	Signature: _____	Date: _____

MOVE-OUT ACKNOWLEDGEMENT AND SIGNATURE

I have inspected the above premises after the above listed resident(s) moved out, and observed the conditions noted. Charges will be assessed for cleaning and repair/replacement costs resulting from resident negligence. This form along with the completed Deposit Refund Statement and any remaining deposit funds will be mailed to Resident within within the period required by RCW 59.18.280.

Owner/Agent: _____ Signature: _____ Date: _____