

STANDARD APARTMENT INSPECTION FORM

NOTICE: " 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".

The physical condition of the apartment/house as well as its cleanliness should be accurately noted in the column labeled "Beginning". Please describe the current condition of the premises as listed and note all damage. Also list all furniture by room and its condition. e.g. new, scratched, stained, ripped, worn, etc. You will be provided with a copy of the inspection form for future reference. *Please note:* the final inspection of your apartment when you vacate will be conducted by the Landlord or his agent and at least one Tenant representative. An appointment for this inspection should be made in advance. Assessments to your security deposit will be charged on the sole basis of this form. It is up to you the Tenant to make sure that this form is accurate.

ENTRY	BEGINNING	TERMINATION
a. door, jams, locks, stop		
b. flooring		
c. walls, baseboards		
d. light fixture		
e. other		
2. LIVING ROOM		
a. carpet or flooring		
b. walls, baseboard		
c. window(s) screen		
lock, crank, track		
curtians, blinds		
d. light fixture, outlets, switches		
e. furniture - list		
3. HALLWAY OR STAIRS		
a. carpet or flooring		
b. walls, baseboards		
c. light fixtures, outlets, switches		
4. KITCHEN		
a. flooring		
b. walls, baseboards		
c. cabinets		

- d. countertop
- e. sink & faucet
- f. stove-elements, drip pan
- g. oven/broiler racks
- h. microwave/hood/lights
- i. refrigerator, trays/bins
- j. GFCIs - test
- k. light fixtures, outlets, switches
- l. table and chairs No. _____
- m. other

5. BATHROOM (S)

- a. Flooring
- b. wall, baseboards
- c. door, jamb casing, lock
- d. cabinet, top, sink, faucet
- e. medicine cabinet/ mirror
- f. toilet, roll holder
- g. tub/shower, faucet
- h. light fixtures, bulbs, fan
- i. GFCI - test
- j. towel bars
- k. other

7. BEDROOM #1

- a. carpet - flooring
- b. walls, baseboards
- c. door, jamb, casing, knob set
- d. windows, screens, lock, track
- e. curtains, blinds
- f. light fixtures, outlets, switches
- g. closet, door(s)
- h. furniture - list

8. BEDROOM #2

- a. carpet - flooring
- b. walls, baseboards
- c. door, jamb, casing, knob set
- d. windows, screens, lock, track
- e. curtains, blinds
- f. light fixtures, outlets, switches
- g. closet door(s)

h. furniture - list

8. BEDROOM #3

- a. carpet - flooring
- b. walls, baseboards
- c. door, jamb, casing, knob set
- d. windows, screens
- e. curtains, blinds
- f. light fixtures, outlets, switches
- g. closet, doors
- h. furniture - list

9. MISCELLANEOUS

- a. ceilings
- b. smoke alarm - test
- e. no-trash, empty trash can
- f. fire extinguisher

Notice: "You must notify your Landlord in writing within 4 days after you move of a forwarding address where you can be reached and where you will receive mail; otherwise your Landlord shall be relieved of sending you an itemized list of damages and the penalties adherent to that failure."

TENANTS FORWARDING ADDRESS (To be completed at checkout) or within 4 days of termination of rental agreement)

NAME; _____ Apartment # _____ Location _____

Address; _____

Rental Period Begins; _____

Rental Period Ends; _____

Tenant's or Tenant's Representative; _____

Tenants's or Tenant's Representative; _____

Landlord; _____ RAS SALES Robert & Diane Stites
323 White st.
Hancock, Mi. 49930
(906) 482- 0162

Landlord; _____ Stites Inc. Phillip Stites
716 Ryan St.
Hancock, Mi. 49930
(906) 482- 6082

Beginning Date ____/____/____ Tenant _____ Landlord _____ Page 3 of 3