



APARTMENT/HOUSE//TOWNHOUSE//INCOMING INSPECTION REPORT

To Be Completed And Returned In Seven Days

This form is to be completed in duplicate in the presence of the incoming or vacating tenant who will receive a copy.

LANDLORD'S NAME..... SUITE No.....
 BUILDING ADDRESS.....
 NAME(S).....
 NEW PHONE NUMBER..... NUMBER OF BEDROOMS.....

	OK	COMMENTS			EXPENSE
KITCHEN — STOVE					
FLOORS					
REFRIGERATOR					
COUNTER TOP					
SINK					
CUPBOARDS					
DISHWASHER					
WALLS					
BATHROOMS — PLUMBING & FIXTURES	1	2	3		
VANITY					
WALL TILES					
SOAP, TOWEL HOLDERS					
MEDICINE CABINET					
WALLS					
MIRROR					
FLOORS					
ELECTRIC FIXTURES — OPERATIONAL					
SMOKE DETECTOR					
OUTLETS & SWITCHES					
INTERCOM					
CARPET					
WINDOWS					
SCREENS					
DRAPES & TRACKS					
CLOSET — RODS					
CEILINGS & WALLS					
FLOORS, BASEBOARDS, RADIATORS					
DOORS & LOCKS					
PATIO, BALCONY DOOR & SCREENS					
PARTITION & RAILING					
LOCKER					
REC. ROOM					
BASEMENT — (Laundry) Dryer-Washer					
GARAGE					
WALLS					
KEYS					
GIVEN TO TENANT					
RETURNED					

INCOMING
 THE UNDERSIGNED, HAVING INSPECTED THE ABOVE NOTED PREMISES AGREES THAT THEY ARE IN SUCH CONDITION AS RECORDED ON THIS INSPECTION.

DATE _____ TENANTS SIGNATURE _____
 INSPECTED BY _____ TENANTS SIGNATURE _____
 VACATING
 DATE _____ TENANTS SIGNATURE _____
 INSPECTED BY _____ TENANTS SIGNATURE _____
 _____ OWNER OR AGENT SIGNATURE

VACATING TENANT'S FORWARDING ADDRESS

NAME _____ STREET ADDRESS _____ APT. NO. _____ CITY _____ TELEPHONE _____
 NAME _____ STREET ADDRESS _____ APT. NO. _____ CITY _____ TELEPHONE _____
 NAME _____ STREET ADDRESS _____ APT. NO. _____ CITY _____ TELEPHONE _____