

FOR OFFICE USE ONLY	
Date Received:	
Received By:	

Inventory Condition Form

RESIDENTIAL RENTAL PROPERTY MOVE-IN CHECK LIST

(Please provide a copy for Resident)

This inventory Check In form is for your protection as well as ours. Please take the time to fill in the appropriate spaces. Your deposit money is refundable only to the extent not used for cleaning, damage or back rent.

PROPERTY ADDRESS: 1 North Pole, Colleg St. TX 77840

TENANT (S): Mr. & Mrs. Clause

MOVE-IN DATE: August 1, 2014 MOVE-OUT DATE July 25, 2015

Items

Foyer

Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Door [] Poor [] Needs Work [] Good [] Excellent or Other _____

Kitchen

Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Counter Tops [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Cabinets [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Sink [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Stove [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Stove Top [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Microwave [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Window [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Dishwasher [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Refrigerator [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Faucet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Hood Exhaust [] Poor [] Needs Work [] Good [] Excellent or Other _____

Living Room

Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Fire Place [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Ceiling Fan [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Hallways

Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Closet Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Closet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Master Bedroom

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Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Ceiling Fan [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Master Bathroom

Window [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Bathtub/Shower [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Cabinet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Sink & Mirror [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Toilet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Closet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Fixtures [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Faucet(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Vent Exhaust [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Bedroom 1

Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Ceiling Fan [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Bedroom 2

Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Ceiling Fan [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Additional Room

Windows [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Ceiling Fan [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Bathroom 2

Walls [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Bath/Shower [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Toilet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Sink/Mirror [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Cabinet [] Poor [] Needs Work [] Good [] Excellent or Other _____
 Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____

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- Fixtures [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Faucet(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Vent Exhaust [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Laundry Room

- Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Floor [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Faucet(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Door [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Plumbing [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Dyer Exhaust [] Poor [] Needs Work [] Good [] Excellent or Other _____

Garages

- Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Garage doors [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Garage [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Door [] Poor [] Needs Work [] Good [] Excellent or Other _____

Back Yard Dwelling

- Patio/Deck [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Retaining Wall [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Grass [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Sprinklers [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Ext. Light(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Faucet(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Front Yard Dwelling

- Grass [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Sprinklers [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Driveway [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Ext. Lights [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Faucet(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Porch [] Poor [] Needs Work [] Good [] Excellent or Other _____
- Elec. Socket(s) [] Poor [] Needs Work [] Good [] Excellent or Other _____

Breaker Box Located Y [] N [] **Water Valve Cut Off Located** Y [] N []

*Please use the following lines to add the rooms and areas of your property:
 The following items were found to be in need of adjustment, installation, or repair:

Items

Received Upon Move-In

- Door Keys [] Yes [] No
- Mail Box Key(s) [] Yes [] No [] Does not Apply
- Garage Door Openers [] Yes [] No [] Does not Apply
- Copy of Rental Agreement [] Yes [] No
- Signed Copy of Move-In [] Yes [] No

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Additional Items Received Upon Move-in _____

I hereby acknowledge that the above is an accurate statement of the condition of the property at the time of my taking occupancy. I further understand that I shall be required to deliver the unit in the same condition at the termination of my tenancy or to pay for any costs incurred by the LANDLORD to restore the property to its original condition at the time I took possession of the property, normal wear and tear excepted.

MOVE-IN

Signature	Date	Tenant Signature(s)	Date
_____	_____	_____	_____
Tuple Properties		_____	_____
		_____	_____
		_____	_____
		_____	_____