APARTMENT/HOUSE INVENTORY FORM

Name:_____ **Address**:_____
Landlord Name:_____

This form does not require the landlord to make repairs. This form is designed to make all parties aware of any existing problems/issues.

This form should be given to your landlord within the first 7 days of moving into your apartment/house.

Code: E = Excellent – New or Almost New
G = Good – Shows minimum wear and tear
F = Fair – Satisfactory
U = Unsatisfactory – Excessively damaged/ Needs Repair
M = Missing

Keys Issued:
#_____ Date____
Keys Returned:
#_____ Date____

	CHECK IN		CHECK OUT		
ITEM	**CODE**	**COMMENTS**	**CODE**	**COMMENTS**	
Entry Door/Porch					
Living Room/ Dining:					
Walls					
Ceiling					
Floor/Carpet					
Couch					
Chairs					
Tables					
Windows/Screens					
Entertainment Shelf					
Dining Table					
Dining Chairs					
Ceiling Fan					
Kitchen:					
Walls					
Ceiling/Light Fixture					
Floor/Carpet					
Cabinets					
Sink					
Counter					
Range					
Refrigerator					
Dishwasher					
Microwave					
Bathroom 1:					
Walls					
Ceiling					
Floor/Carpet					
Light Fixtures					
Cabinets					
Sink					
Tub/Shower					
Toilet					
Mirror					

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Name_____
Address_____

	CHECK IN		CHECK OUT		
ITEM	**CODE**	**COMMENTS**	**CODE**	**COMMENTS**	**BILL**
Bathroom 2:					
Walls					
Ceiling/Light Fixture					
Floor/Carpet					
Cabinets					
Sink					
Tub/Shower					
Toliet					
Mirror					
Bedroom:					
Walls					
Ceiling					
Floor/Carpet					
Mattress/Bed Frame					
Chest					
Desk					
Desk Chair					
General					
Smoke Detector					
Fire Extinquisher					
Other:					

Reminder: Keep a copy of this document for yourself.
Do not provide the only copy to your landlord!

Check-In:
Resident Signature:_____ Date:_____
Landlord.Signature:_____Date:_____
(or date mailed to landlord)

Check-Out:
Resident Signature:_____ Date:_____
LandlordSignature:_____ Date:_____
(or date mailed to landlord)

Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____
Roommate Signatures (s):_____ Date:_____