



MOVE-IN - INSPECTION REPORT

- **PLEASE NOTE:** The property you are moving into is not in brand new condition. Wear and tear from previous tenants is to be expected.
- Please conduct a move-in inspection and return this completed and signed form to our office by emailing it to Pat@harvesthomesict.com within 7 days of your lease start date.
- You should conduct your move-in inspection during daylight hours. Please document the condition of the property by noting wear and tear or other cosmetic issues.

If you find the property in disrepair, or an amenity is not functioning properly, a service request must be submitted via your online tenant portal.

PLEASE DO NOT PROVIDE SERVICE REQUESTS VIA THE INSPECTION REPORT. THIS INFORMATION WILL NOT BE CAPTURED IN THE SERVICE REQUEST LOG AND WILL NOT BE ACCEPTED.

- Please remember that it is possible to find something wrong with a household system or appliance that our inspection didn't identify once you start using the systems and appliances regularly.

MOVE-OUT - INSPECTION REPORT

- Please conduct a move-out inspection and return this completed and signed form to our office when you return keys on or before the last day of your lease.
- You should conduct your move-out inspection during daylight hours and after you have removed all of your personal belongings. Please document the condition of the property by noting any wear and tear or other cosmetic issues. **If there is anything at the property that is in disrepair, or an amenity is not functioning properly please submit a service request using your online tenant portal.**

Digital Pictures should be taken to document all known issues.

You can type directly into this document on a computer, save the file with the address as the name and email it to Pat@harvesthomesict.com

Address: _____

Lease Start Date _____

ITEM	MOVE-IN CONDITION	MOVE-OUT CONDITION
ENTRANCE Ceilings/Walls		
ENTRANCE Windows/Doors INCLUDING LOCKS		
ENTRANCE Floors/Tiles		
KITCHEN Ceilings/Walls		
KITCHEN Windows/Doors		
KITCHEN Floors/Tiles		
KITCHEN Appliances		
HALLWAYS Ceilings/Walls		
HALLWAYS Windows/Doors		
HALLWAYS Floors/Tiles		
LIVING ROOM		
DINING AREA		
BEDROOM(S) Ceilings/Walls		

ITEM	MOVE-IN CONDITION	MOVE-OUT CONDITION
BEDROOM(S) Windows/Doors and Closets		
BEDROOM(S) Floors/Tiles		
BATHROOM(S) Ceilings/Walls		
BATHROOM(S) Windows/Door		
BATHROOM(S) Floors/Tiles		
BATHROOM(S) Toilet/Shower/Sink		
Water Pressure		
Hot Water		
Leaks/Drains		
Electrical Outlets		
Fire Extinguisher		
Pests		
Heat & Air Conditioning		

Rental Inspection Checklist - Other Items

OTHER ITEMS	MOVE-IN CONDITION	MOVE-OUT CONDITION

TO BE COMPLETED WITHIN 1 WEEK OF LEASE START DATE ON PAGE 1

Tenant signature below indicates examination of the property within 1 week of the start date of the lease. Please return to:

Print Name: _____ Sign: _____ Date: _____

BELOW: TO BE COMPLETED AT MOVE-OUT ONLY

Tenant signature below indicates examination of the property and notation of the move-out condition.

Print Name: _____ Sign: _____ Date: _____

SECURITY DEPOSIT INFORMATION:

Per your lease, deposit returns will be sent within 60 days of delivery of possession of the premises to the Landlord or termination of the lease, whichever occurs last.

Security deposit refunds are issued in one check to all tenants on the terminating lease unless the following written approval is completed.

Tenant signature below indicates waiver of rights to security deposit funds and authorizes check to be made out to the indicated party.

Check shall be made out to: _____

Print Name: _____ Sign: _____ Date: _____

Print Name: _____ Sign: _____ Date: _____

Print Name: _____ Sign: _____ Date: _____

Print Name: _____ Sign: _____ Date: _____

Forwarding Address – where check will be sent: