



All County Preferred Property Management

Move-In/Move-Out Inspection Form

FORM MUST BE SUBMITTED TO OUR OFFICE WITHIN (7) CALENDAR DAYS FROM YOUR LEASE START DATE.

Fax: (321) 607-3707 Email: Applications@AllCountyPreferred.com.

Please note that this form is for security deposit processing purposes ONLY. It is not a wish list of items to be fixed upon move in. If an item needs to be repaired, please complete an online maintenance request. Cosmetic notations will be addressed at the owner's discretion.

Tenant Name(s) :

Address & Apt. No :

City :

State :

Zip :

Move-In Date :

Inspection Date :

Time :

By :

Unless otherwise noted, the premises are in clean, good working order and undamaged. Use the key below.

Key & Abbreviations :

OK In Good Condition	NC Needs Cleaning	NSC Needs Spot Cleaning
	NP Needs Painting	NSP Needs Spot Painting
NA Not Applicable	NR Needs Repair	RP Needs Replacing

LIVING ROOM

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/blinds			
Closet			
Elec. Fix.			
Light bulbs			
TOTAL			

Comments :



ENTRY/HALL

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Elec. Fix.			
Closet			
Stairs			
TOTAL			

Comments :

BEDROOM #1

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/blinds			
Closet			
Elec. Fix.			
Light bulbs			
TOTAL			

Comments :

BEDROOM #2

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/blinds			
Closet			
Elec. Fix.			
Light bulbs			
TOTAL			

Comments :



BEDROOM #3

BEDROOM #4

	Move-In		Move-out		Cost	Move-In		Move-out		Cost
Floor										
Walls										
Ceiling										
Doors										
Windows										
Screens										
Shades/blinds										
Closet										
Elec. Fix.										
Light bulbs										
TOTAL										

Comments :

Comments :

BEDROOM #5

BEDROOM #6

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/blinds			
Closet			
Elec. Fix.			
Light bulbs			
TOTAL			

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/blinds			
Closet			
Elec. Fix.			
Light bulbs			
TOTAL			

Comments :

Comments :



BATHROOM#1

BATHROOM#2

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Cabinets			
Drawers			
Sink/plumbing			
Shelves			
Mirror			
Tub/shower			
Caulking			
Counter			
Fan			
Elec. Fix.			
Light bulbs			
TOILET			
Bowl			
Seat			
Flush			
TOTAL			

	Move-In	Move-out	Cost

Comments :

Comments :



BATHROOM #3

BATHROOM #4

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Cabinets			
Drawers			
Sink/plumbing			
Shelves			
Mirror			
Tub/shower			
Caulking			
Counter			
Fan			
Elec. Fix.			
Light bulbs			
TOILET			
Bowl			
Seat			
Flush			
TOTAL			

	Move-In	Move-out	Cost

Comments :

Comments :



KITCHEN

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Cabinets			
Drawers			
Sink/Plumbing			
Counters			
Fan			
Elec. Fix.			
Light Bulbs			
DISHWASHER			
Inside/Parts			
Outside Controls			
REFRIGERATOR			
Inside/Parts			
Outside			
Lights			
STOVE/OVEN			
Outside			
Burners			
Vent			
Timer/Controls			
Surface			
Light			
Racks			
Drip Pan			
TOTAL			

Comments :



DINING ROOM

	Move-In	Move-out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades/Blinds			
TOTAL			

Comments :

MECHANICAL

	Move-In	Move-out	Cost
Water heater			
Smoke detector			
Thermostat			
Heating			
A/C			
TOTAL			

Comments :

OTHER

	Move-In	Move-out	Cost
Parking area			
Lawn/Garden			
Patio/Deck			
Washer/Dryer			
TOTAL			

Comments :

TOTAL COST OF DAMAGES: \$_____.



Move-In/Move-Out Inspection Form

I/we, _____ (tenants), understand that unless otherwise noted, all damages are under the tenant's responsibility and will be deducted from the security deposit upon move-out.

Videos and/or photographs have been taken of the unit:

Yes

No

If yes, the original copies are in the possession of the

Landlord

Tenant

MOVE-IN INSPECTION

MOVE-OUT INSPECTION

Landlord/Agent Signature

Date

Tenant Signature

Date

Tenant Signature

Date

Landlord/Agent Signature

Date

Tenant Signature

Date

Tenant Signature

Date

Tenant Signature

Date

Tenant's Forwarding Address:
