

INVENTORY AND CONDITION REPORT

Unit Address: _____

Instructions: Beside each item indicate “Damaged” (describe), Torn, Dirty, Missing, Stained, etc., in the Move-In column. The property owner/agent, tenant, and SLHA (optional) inspector must sign prior to Lease Approval. Any item left blank or not mentioned is assumed to be in acceptable condition. A SLHA inspector will complete the Move-Out column as indicated above when the tenant vacates the unit and any claim for reimbursement for tenant caused damages by the owner will be based solely on the information contained on this report.

MOVE-IN

Tub/Shower Enclosure _____

LIVING ROOM:

MOVE-OUT

Walls _____
Ceiling _____
Floor _____
Carpet _____
Drapes _____
Blinds _____
Lt. Fixtures _____
Screens _____
Other _____

DINING ROOM:

Walls _____
Ceiling _____
Floor _____
Carpet _____
Drapes _____
Blinds _____
Lt. Fixtures _____
Screens _____
Other _____

KITCHEN:

Walls _____
Ceiling _____
Floor _____
Carpet _____
Drapes _____
Blinds _____
Lt. Fixtures _____
Screens _____
Other _____

HALLWAY:

Walls _____
Ceiling _____
Floor _____
Carpet _____
Lt. Fixtures _____
Other _____

BATH#1:

Walls _____
Ceiling _____
Formica/Tile _____
Cabinets _____
Fixtures _____
Windows _____
Doors _____
Screens _____

BATH#2

Walls _____

Ceiling _____

Formica/Tile _____

Cabinets _____

Fixtures _____

Windows _____

Doors _____

Screens _____

Tub/Shower Enclosure _____

BEDROOM#1

Walls _____

Ceiling _____

Floor _____

Carpet _____

Drapes _____

Blinds _____

Lt. Fixtures _____

BEDROOM#2

Walls _____

Ceiling _____

Floor _____

Carpet _____

Drapes _____

Blinds _____

Lt. Fixtures _____

Screens _____

Other _____

BEDROOM#3

Walls _____

Ceiling _____

Floor _____

Carpet _____

Drapes _____

Blinds _____

Lt. Fixtures _____

Screens _____

Other _____

BEDROOM#4

Walls _____

Ceiling _____

Floor _____

Carpet _____

Drapes _____

Blinds _____

Lt. Fixtures _____

Screens _____

Other _____

The undersigned have inspected the unit and agree that this report is an accurate report of the condition of the unit for purposes of determining the extent of tenant-caused damages, if any.			
MOVE-IN:		MOVE-OUT:	
_____	_____	_____	_____
Tenant	Date	Tenant	Date
_____	_____	_____	_____
Owner/Agent	Date	Owner/Agent	Date