

MOVE-IN/MOVE-OUT INVENTORY FORM
1243 Virginia Ave. Glendale, CA 91202

Tenant Name: _____

Unit #: _____

Complete the move-in section of this form and return it to us within seven (7) days of moving into the unit. Test all locks, window latches, smoke detectors, and equipment. This form is not a repair request. Submit all requests for repairs separately in accordance with your lease. You and your Landlord may also use this form upon move-out. Keep a copy for your records. Note any defects in the items listed below.

All items are presumed to be in good condition, unless noted otherwise as follows: INITIAL HERE

- NC: Needs Cleaning**
- NSC: Needs Spot Cleaning**
- NP: Needs Painting**
- NSP: Needs Spot Painting**
- NR: Needs Repair**
- S: Scratched**
- RP: Needs Replacing**
- Other:** _____

Additions to this form may be made as necessary. Attach additional paper if more space is needed but remember to include copies for both you and the Landlord Both parties should sign any additional pages after each inspection. Cross out any items that do not apply.

	Condition on Arrival Note condition using the key above, including existing damage and wear & tear DATE: _____	Condition on Initial Move-Out Inspection Note deterioration beyond reasonable use and wear & tear for which tenant is alleged to be responsible DATE: _____	Condition on Departure Note deterioration beyond reasonable use and wear & tear for which tenant is alleged to be responsible DATE: _____
KITCHEN			
Floors			

Walls & Ceilings			
Light Fixtures			
Cabinets/Cupboards/ Drawers (including hardware)			
Countertop			
Stove/Oven/Range hood (broiler pans, grills, etc)			
Dishwasher			
Garbage Disposal			
Sink/Faucets/Plumbing			
Refrigerator			
Windows/Window Coverings/Screens			
Electric Fixtures (Plugs and Switches)			
Other			
LIVING ROOM / DINING ROOM / HALLS / ENTRY			
Floors			
Windows/Window Coverings/Screens			
Walls & Ceilings			
Light Fixtures			

Closets, including doors			
Front Door & Locks			
Electric Fixtures (Plugs and Switches)			
Other			
BATHROOM 1 (Main Floor)			
Floors			
Walls & Ceilings			
Windows/Window Coverings/Screens			
Light Fixtures			
Bathtub/Shower			
Toilet			
Cabinets/ Drawers/ Counters (including hardware)			
Sink/Faucets/Plumbing			
Electric Fixtures (Plugs and Switches)			
Other			
BATHROOM 2 (Primary Bedroom)			
Floors			

Walls & Ceilings			
Windows/Window Coverings/Screens			
Light Fixtures			
Bathtub/Shower			
Toilet			
Cabinets/Drawers/Counters (including hardware)			
Sink/Faucets/Plumbing			
Electric Fixtures (Plugs and Switches)			
Other			
BATHROOM 3 (Second Floor, if applicable)			
Floors			
Walls & Ceilings			
Windows/Window Coverings/Screens			
Light Fixtures			
Bathtub/Shower			
Toilet			
Cabinets/ Drawers/ Counters (including hardware)			

Sink/Faucets/Plumbing			
Electric Fixtures (Plugs and Switches)			
Other			
BEDROOM 1 (Primary Bedroom)			
Floors			
Windows/Window Coverings/Screens			
Walls & Ceilings			
Light Fixtures			
Closets			
Electric Fixtures (Plugs and Switches)			
Other			
BEDROOM 2 (Small)			
Floors			
Windows/Window Coverings/Screens			
Walls & Ceilings			
Light Fixtures			
Closets			
Electric Fixtures (Plugs			

and Switches)			
Other			
BEDROOM 3 – If applicable			
Floors			
Windows/Window Coverings/Screens			
Walls & Ceilings			
Light Fixtures			
Closets			
Electric Fixtures (Plugs and Switches)			
Other			
OTHER AREAS			
Heating System			
Air Conditioning			
Stairs and Hallway			
Patio, Terrace, Deck, Roof etc.			
Storage Units (In-Unit)			
Storage Unit (Subterranean Parking)			
Parking Area			

Smoke Detectors/ Carbon Monoxide Detectors – tested and operational			
Washer			
Dryer			
Other			

Condition on Arrival

I acknowledge that the above is an accurate assessment of the condition of the property as of the date signed. *I understand that unless otherwise noted, all discrepancies will be my responsibility and will be deducted from the security deposit at the time of move-out.*

Lessee Signature: _____ Date _____

Lessee Signature: _____ Date _____

This form was returned to Lessor on (date) _____; Lessor Signature _____

Condition on Initial Move-Out Inspection

I acknowledge that the above is an accurate assessment of the condition of the property as of the date signed.

Lessee Signature: _____ Date _____

Lessee Signature: _____ Date _____

Lessor Signature: _____ Date _____

Condition on Departure

I acknowledge that the above is an accurate assessment of the condition of the property as of the date signed.

Lessee Signature: _____ Date _____

Lessee Signature: _____ Date _____

Lessor Signature: _____ Date _____