Move-in CheckList

Please fill in the fields below based on the condition of the apartment. Both the landlord and the tenant need to sign to verify.

Kitchen	Excellent		Comments:	Bedroom	Excellent	Comments:
Miconen	Good				Good	
	Fair			#1	Fair	
	Poor				Poor	
appliances in working	condition Y	es	No	Smoke Detector Ye	s No	
moke Detector Ye	s No			Dadraan	Excellent	Comments:
Carbon Dioxide Detect	or Yes N	lo		Bedroom	Good	
				#2	Fair	
Bathroom			Comments:		Poor	
	Good	Ш		Smoke Detector Ye		
	Fair			SHOKE BELEELOI TE	3 140	
	Poor			Bedroom	Excellent	Comments:
	Excellent		Comments:		Good	
Front	Good			#3	Fair	
Entry	Fair				Poor	<u> </u>
 ,	Poor			Smoke Detector Ye	s No	
				Living	Excellent	Comments:
Rear	Excellent		Comments:	Living	Good	<u> </u>
11001	Good			Room	Fair	
Entry	Fair				Poor	
	Poor			Smoke Detector Ye	s No	
Set	s of Keys pro	ovided	d at move-in:	Date:		
Additional Comm	nents / Arrar	ngeme	ents:			
Sign to Verify:						
Landlord				 Tenant		