



Move-In/Move-Out Inspection Form

To be completed by Landlord, LEI Tenant, and Fair Tide Case Manager prior to move-in and upon move-out, as outlined in the LEI Program Manual.

Landlord Name	LEI Tenant Name(s)

Property Address	City	State	Zip

Move-In			Initials		
Move-In Date	Inspection Date	Inspection Time	Landlord	LEI Tenant	Case Manager
Move-Out			Initials		
Move-Out Date	Inspection Date	Inspection Time	Landlord	LEI Tenant	Case Manager

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

Key & Abbreviations:

NC: Needs Cleaning
NP: Needs Painting
NR: Needs Repair
SC: Scratched

NSC: Needs Spot Cleaning
NSP: Needs Spot Painting
RP: Needs Replacing
Other: _____

LIVING ROOM	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Shades			
Closet			
Elec Fix.			
Light bulbs			

KITCHEN	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Curtain			
Cabinets			
Drawers			
Sink			
Counters			
Fan/Light			
Elec Fix.			
Light bulbs			

REFRIGERATOR	Move-In	Move-Out	Cost
Inside/parts			
Outside			
Light			

STOVE/OVEN	Move-In	Move-Out	Cost
Outside			
Burners			
Vent			
Timer/Controls			
Surface			
Light			
Racks			
Drip pan			

DISHWASHER	Move-In	Move-Out	Cost
Inside/parts			
Outside			
Controls			

BATHROOM #1	Move-In	Move-Out	Cost
Floor			
Walls/Tile			
Ceiling			
Doors			
Cabinets			
Drawers			
Sink			
Shelves			
Mirror			
Tub/Shower			
Caulking			
Counter			
Fan			
Bowl/seat			
Towel rack			
Window			
Elec Fix.			
Light bulbs			

BATHROOM #2	Move-In	Move-Out	Cost
Floor			
Walls/Tile			
Ceiling			
Doors			
Cabinets			
Drawers			
Sink			
Shelves			
Mirror			
Tub/Shower			
Caulking			
Counter			
Fan			
Bowl/seat			
Towel rack			
Window			
Elec Fix.			
Light bulbs			

BEDROOM #1	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/Blinds			
Elec Fix.			
Light bulbs			

BEDROOM #2	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/Blinds			
Elec Fix.			
Light bulbs			

BEDROOM #3	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/Blinds			
Elec Fix.			
Light bulbs			

ENTRANCE/HALL	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			
Closet			
Shades/Blinds			
Elec Fix.			
Light bulbs			

DINING ROOM	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Doors			
Windows			
Screens			

FRONT PORCH	Move-In	Move-Out	Cost
Elec Fix.			
Light bulbs			

BACK PORCH	Move-In	Move-Out	Cost
Elec Fix.			
Light bulbs			

GARAGE	Move-In	Move-Out	Cost
Floor			
Walls			
Ceiling			
Elec Fix.			
Light bulbs			

MECHANICAL	Move-In	Move-Out	Cost
Water Heater			
Smoke Det.			
Thermostat			
Furnace			
A/C			

# OF KEYS	Move-In	Move-Out	Cost
Front Door			
Mailbox			
other:			

Comments:

Condition of Premises: Absent any additional statements or indications to the contrary, including any Comments above, the Landlord, LEI Tenant(s), and Fair Tide Case Manager agree that the leased premises are presently in the condition stated herein, acknowledging that he/she/they inspected the premises on the date above-stated. This document shall be saved by all parties and become part of Fair Tide's file for such further and future use as the parties may deem the same necessary.

Move-In

Move-Out

Date: _____ Landlord Signature: _____ / _____ Date: _____

Date: _____ Tenant Signature: _____ / _____ Date: _____

Date: _____ Case Mgr. Signature: _____ / _____ Date: _____

Supporting Photos or Documentation: Prior to Move-In or upon move-out, it may be helpful to take and mutually share video(s) or photos documenting any existing issues or concerns that are not adequately reflected by the notes or comments herein. If such photos have been taken, the parties above agree to share them when necessary or upon request.

Tenant Forwarding Address	City	State	Zip