

RESIDENTIAL MOVE-IN & MOVE -OUT CHECKLIST

Upon move in, tenant is required to complete a Move-In Checklist. Note any discrepancies in condition of unit and **return within 7 days.**

Emmerich & Associates
453 Grand Ave, Schofield, WI 54476

Tenant: _____

Address: _____

Date: ____/____/____

Tenant Phone #: _____

	ITEM	MOVE-IN	MOVE-OUT
K	Apartment door		
E	Mall Box		
Y	Basement		
S	Garage		
L	Walls/Ceiling		
R	Lights (bulbs & fixtures)		
&	Floor Coverings		
D	Doors/Woodwork		
R	Window Coverings/Hardware		
	Other:		
K	Stove/Hood		
	Refrigerator		
K	Dishwasher		
I	Garbage Disposal		
T	Counter tops/Cabinets		
C	Sink/Hardware/Drain		
H	Walls/Ceiling		
E	Lights (bulbs & fixtures)		
N	Floor Coverings		
	Window Coverings/Hardware		
	Other:		
H	Floor Coverings		
A	Doors/Woodwork		
L	Lights (bulbs & fixtures)		
L	Walls/Ceiling		
S	Smoke Detector		
B	Floor Coverings		
R	Walls/Ceiling		
#	Doors/Woodwork		
1	Window/Screens		
	Window Coverings/Hardware		
	Lights (bulbs & fixtures)		
B	Tub/Shower/Bars		
A	Sink/Vanity/Drains		
T	Commode/Seat		
H	Fans/Heater		
#	Paper Holder, etc.		
1	Cabinet/Mirror		
	Floor Coverings		
	Doors/Woodwork		
	Walls/Ceiling/Lights		
B	Floor Coverings		
R	Walls/Ceiling		
#	Doors/Woodwork		
2	Window/Screens		
	Window Coverings/Hardware		
	Lights (bulbs & fixtures)		

	ITEM	MOVE-IN	MOVE-OUT
B R # 3	Floor Coverings		
	Walls/Ceiling		
	Doors/Woodwork		
	Window/Screens		
	Window Coverings/Hardware		
B A T H # 2	Lights (bulbs & fixtures)		
	Tub/Shower/Bars		
	Sink/Vanity/Drains		
	Commode/Seat		
	Fans/Heater		
	Paper Holder, etc.		
	Cabinet/Mirror		
M I S C	Floor Coverings		
	Doors/Woodwork		
	Walls/Ceiling/Lights		
	Baseboard Heating		
	Heating Controls		
	Air Conditioner/Sleeve		
	Furnace Filter		
	Water Heater		
	Basement (general)		
	Storage Locker		
	Exterior (general)		
	Garage (general)		
	Yard (general)		
Water Softener			
Washer/Dryer			
Other:			

Comments:

The undersigned has examined and knows the condition of the retail unit, its equipment and appliances and has received same in good order, with only those exceptions listed above.

Date: ____/____/____ SIGNATURE OF TENANT: _____

Date: ____/____/____ SIGNATURE OF TENANT: _____

Date: ____/____/____ SIGNATURE OF TENANT: _____

Date: ____/____/____ SIGNATURE OF TENANT: _____

FOR OFFICE USE ONLY: DO NOT WRITE BELOW THIS LINE

Date Received: ____/____/____ Received By: _____

Date Vacated: ____/____/____ Date Inspected: _____

Inspected By: _____ Property #: _____

Comments:

