



Address \_\_\_\_\_

Tenant Name/Nombre de Inquilino : \_\_\_\_\_

NOTE THE CONDITION OF EACH AREA AND DOCUMENT ANY VISABLE DAMAGE BELOW.

NOTA LA CONDICION DE CASA QUARTA Y FAVOR DE NOTAD LO ABAJO.

ROOM/QUARTO	COMMENTS/COMENTARIOS	COMMENTS/COMENTARIOS
PLEASE PRINT--	MOVE IN DATE:	MOVE OUT DATE:
<b>Kitchen ~ Cocina</b>		
Stove/Oven ~ Estufa/Horno		
Refridgerator ~ Nevera		
Cabinets ~ Gabinete		
Sinks ~ Fregadero		
Light Fixtures ~ Luces		
Walls/Ceilings ~ Pared/Techo		
Carpeting ~ Alfombra		
Tile ~ Embaldosar		
Curtain/Blinds ~ Cortinas		
Wndows/Screens ~ Ventanas		
Tub/Shower ~ Banadera/Ducha		
Toilets ~ Taza de Bano		
Other ~ Otro		

When completed and signed, this form will be attached to your Rental Agreement. Defects not noted on this checklist when moving in, are the tenants responsibility and will be deducted from the security deposit if not repaired prior to vacating the premises. If you fail to complete and return this form, the landlord will presume that no defects exist. MAKE A THROUGH INSPECTION OF THE PREMISES AND NOTE ALL DEFECTS.

Signed Tenant: \_\_\_\_\_

Property Manager: \_\_\_\_\_