

RENT QC LLC Move in / Move out Checklist

Tenant Name (s)	
Street Address	
Unit #	
City	
Amount of Deposit	
Date Move In	
Date Move Out	
Broke Lease	Yes / No

Office Use Only

LIVING ROOM	MOVE IN CONDITION	MOVE OUT CONDITION
Floors & Floor Coverings		
Drapes & Window Coverings		
Walls & Ceilings		
Light Fixtures		
Windows, Screens, & Doors		
Front Door & Locks		
Other		
KITCHEN	MOVE IN CONDITION	MOVE OUT CONDITION
Floor & Floor coverings		
Walls & Ceilings		
Light Fixtures		
Cabinets		
Counters		
Stove/Oven		
Refrigerator		
Dishwasher		
Garbage Disposal		
Sink & Plumbing		
Windows, Screens & Door		
Other		
DINNING ROOM	MOVE IN CONDITION	MOVE OUT CONDITION
Floor & Floor Coverings		
Walls & Ceilings		
Light Fixtures		
Window, Screens & Doors		
Other		
BATHROOM(S)	MOVE IN CONDITION	MOVE OUT CONDITION
Floor & Floor Coverings		
Walls & Ceilings		
Windows, Screens, & Doors		
Light Fixtures		
Bathtub/Shower		
Sink & Counters		
Toilet		
Other		

BEDROOMS (S)	MOVE IN CONDITION		MOVE OUT CONDITION	
	Bedroom 1	Bedroom 2	Bedroom 1	Bedroom 2
Floor & Floor Coverings				
Windows, Screens, & Doors				
Wall & Ceilings				
Light Fixures				
Other				
OTHER AREAS	MOVE IN CONDITION		MOVE OUT CONDITION	
Heating System				
Air Condition				
Other				

Use this space to provide any additional explanation:

Move IN

Move OUT

Landlord / Manager Date

Landlord / Manager Date

Tenant Date

Tenant Date

Tenant Date

Tenant Date

Tenant Date

Tenant Date