

STANDARD RESIDENTIAL MOVE-IN CHECKLIST

Property: [FULL RENTAL PROPERTY ADDRESS] **City / State:** , [STATE] **Lease dated: Move-In Inspection Date:**

This Move-In Checklist (this "Checklist") is made and entered into by and between [LANDLORD OR PROPERTY MANAGER NAME], with an address of [LANDLORD ADDRESS] ("Landlord"), and the undersigned tenant(s) (individually and collectively, "Tenant"), in connection with the residential lease agreement between the parties dated (the "Lease"). This Checklist is incorporated into and made a part of the Lease. Its purpose is to establish the condition of the premises at the commencement of tenancy so that, at the conclusion of tenancy, damage caused by Tenant can be distinguished from normal wear and tear.

1. Parties

Landlord: [LANDLORD OR PROPERTY MANAGER NAME] — [LANDLORD ADDRESS]

Tenant(s):

- [TENANT 1 FULL LEGAL NAME]

2. Security Deposit

Landlord holds a security deposit of **\$0.00** in connection with the Lease. Return of the deposit, and any itemized deductions, are governed by the Lease and applicable state law referenced in Section 10 of this Checklist.

3. Condition Rating Scale

The following scale applies to each inspection item. Items that are not applicable should be marked "N/A".

E = Excellent **G** = Good **F** = Fair **P** = Poor **D** = Damaged **N/A** = Not Applicable

Each item below is rated at Move-In and again at final Move-Out.

4. Room-by-Room Condition Inventory

Column legend — **MI** = Move-In **MO** = Move-Out

4.1 Entryway / Foyer

Item	MI	MO	Notes / Photo #	MI	MO	Notes / Photo #
Door, locks, deadbolt	___	___	_____	___	___	_____
Flooring	___	___	_____	___	___	_____
Walls / paint	___	___	_____	___	___	_____
Light fixtures	___	___	_____	___	___	_____

_____ | | Closet (door, rod, shelf) | _____ | _____ | _____ |

4.2 Living Room / Common Area

| Item | MI | MO | Notes / Photo # | |---|---|---|---| | Flooring | _____ | _____ | _____ | | Walls / ceiling | _____ | _____ | _____ | | Windows, locks, screens, blinds | _____ | _____ | _____ | | Electrical outlets and switches | _____ | _____ | _____ | | Light fixtures / ceiling fan | _____ | _____ | _____ | | Smoke detector (tested) | _____ | _____ | _____ | | Carbon monoxide detector (tested) | _____ | _____ | _____ |

4.3 Kitchen

| Item | MI | MO | Notes / Photo # | |---|---|---|---| | Flooring | _____ | _____ | _____ | | Walls / ceiling | _____ | _____ | _____ | | Cabinets (doors, hinges, handles) | _____ | _____ | _____ | | Countertops | _____ | _____ | _____ | | Sink and faucet | _____ | _____ | _____ | | Garbage disposal | _____ | _____ | _____ | | Dishwasher | _____ | _____ | _____ | | Range / oven / stovetop | _____ | _____ | _____ | | Refrigerator (including ice maker) | _____ | _____ | _____ | | Microwave | _____ | _____ | _____ | | Exhaust fan / range hood | _____ | _____ | _____ |

4.4 Bedrooms (1 total)

For each bedroom, document: flooring, walls, ceiling, windows, closet, outlets/switches, light fixtures/ceiling fan, and smoke detector. Add additional rows below as needed.

| Bedroom # | Flooring | Walls/Ceiling | Windows/Closet | Outlets/Fixtures | Smoke Detector | Notes / Photo # | |---|---|---|---|---|---|---| | 1 | _____ | _____ | _____ | _____ | _____ | _____ |

4.5 Bathrooms (1 total)

For each bathroom, document: flooring, walls/tile/grout, ceiling, toilet, tub/shower (drain/caulk/grout), sink and faucet, mirror/medicine cabinet, exhaust fan, GFCI outlets (required by code), light fixtures, towel bars. Add rows as needed.

| Bathroom # | Flooring/Walls | Toilet | Tub/Shower | Sink/Fixtures | GFCI/Exhaust | Notes / Photo # | |---|---|---|---|---|---| | 1 | _____ | _____ | _____ | _____ | _____ | _____ |

5. Smoke and Carbon Monoxide Detector Certification

Landlord certifies that, as of the Move-In Inspection Date, **1** smoke detector(s) have been installed, tested, and found to be in working order, and **0** carbon monoxide detector(s) have been installed, tested, and found to be in working order, in the locations required by applicable state and local law.

Tenant acknowledges that Tenant has personally tested each detector by pressing the test button and confirms that it sounded an audible alarm. Tenant is responsible for replacing batteries and reporting any malfunction to Landlord in writing promptly.

6. Key and Access Device Inventory

Tenant acknowledges receipt of the following keys and access devices:

- Unit keys: **2**
- Mailbox keys: **1**
- Garage remotes / fobs: **0**

All keys and access devices remain the property of Landlord and must be returned at the conclusion of tenancy. Unreturned keys and devices may be deducted from the security deposit at reasonable replacement cost in accordance with the Lease.

Photographic Evidence Acknowledgment

Photographs dated were taken at the time of this inspection and are incorporated by reference into this Checklist. A total of **0** photograph(s) were taken. Both Landlord and Tenant acknowledge that the photographs accurately depict the condition of the premises as of the Move-In Inspection Date and may be introduced as evidence in any subsequent dispute regarding condition, damage, or security-deposit disposition. Under California Evidence Code \u00a771553 (and analogous rules in other states), digital photographs are admissible as evidence of the matters depicted.

Normal Wear and Tear — Definition

For purposes of this Checklist and the Lease, "normal wear and tear" means the natural, gradual deterioration of the premises resulting from ordinary, intended use over the course of the tenancy — not damage caused by negligence, carelessness, abuse, or accident attributable to Tenant, Tenant's family, or Tenant's guests.

Examples of normal wear and tear (not chargeable to Tenant): minor scuffs on walls from furniture placement; carpet worn thin in high-traffic areas; faded paint from sunlight; loose door hinges from normal use; minor fading of window treatments.

Examples of tenant-caused damage (chargeable to Tenant): holes in walls larger than picture-hanging tacks; stains on carpet from spills; broken window glass; burns on countertops; pet damage; missing fixtures; unauthorized modifications; damage from smoking (where smoking was prohibited).

The parties acknowledge that "normal wear and tear" is defined by case law in most states and that edge cases will be resolved in accordance with governing-state case law.

Fair Housing Notice

This Checklist is completed and applied in a manner consistent with the federal Fair Housing Act (42 U.S.C. \u00a7\u00a73601\u20133619) and applicable state and local fair-housing laws. Condition ratings,

deductions, and enforcement decisions shall not be based on race, color, national origin, religion, sex (including sexual orientation and gender identity), familial status, or disability.

10. State-Specific Notices and Deadlines

11. Tenant's Right to Object; Acknowledgment

Tenant has had the opportunity to personally inspect the premises. Tenant's signature below acknowledges **receipt of this Checklist and the opportunity to inspect**. Tenant's signature **does not constitute agreement with every condition rating** unless Tenant has initialed each item. Tenant may deliver written objections to Landlord within the period required by applicable state or local law (see Section 10). Written objections should be delivered to Landlord at the address in Section 1 and retained with proof of delivery.

Tenant written objections (attach additional pages if needed):

If Tenant refuses or is unable to sign: Landlord shall note the refusal, the date, and the reason, and shall nonetheless deliver a copy of the Checklist to Tenant by a method reasonably calculated to achieve actual receipt.

12. Signatures — Move-In Inspection

The undersigned acknowledge that the above records accurately reflect the condition of the premises as of the Move-In Inspection Date.

Landlord / Authorized Agent

PRINTED NAME

SIGNATURE

DATE

Tenant 1

PRINTED NAME

SIGNATURE

DATE

14. Signatures — Final Move-Out Inspection

Move-Out Inspection Date: _____

Total keys and access devices returned: _____

Forwarding address for deposit return: _____

Landlord (Move-Out)

PRINTED NAME

SIGNATURE

DATE

Tenant (Move-Out)

PRINTED NAME

SIGNATURE

DATE