Apartment Inspection Form

Address/Unit #:	
Resident Name(s):	
Move-in Date:	Move-out Date:

Entryway	Inspected at Move-in	Inspected at Move-out
Door/Frame	☐	☐
Flooring	☐	☐
Closet	☐	☐
Walls/Ceiling/Lights	☐	☐
Notes:		

Living Room	Inspected at Move-in	Inspected at Move-out
Walls/Ceiling	☐	☐
Flooring	☐	☐
Windows/Blinds	☐	☐
Lights/Outlets	☐	☐
Notes:		

This checklist is not all-inclusive. For educational purposes only.

Kitchen	Inspected at Move-in	Inspected at Move-out
Walls/Ceiling	☐	☐
Flooring	☐	☐
Windows	☐	☐
Pantry	☐	☐
Cabinets/Drawers	☐	☐
Countertops	☐	☐
Appliances	☐	☐
Lights/Outlets	☐	☐
Other	☐	☐
Notes:		

Bedroom(s)	Inspected at Move-in	Inspected at Move-out
Walls/Ceiling	☐	☐
Flooring	☐	☐
Windows	☐	☐
Closet	☐	☐
Lights/Outlets	☐	☐
Notes:		

This checklist is not all-inclusive. For educational purposes only.

Bathroom(s)	Inspected at Move-in	Inspected at Move-out
Tub/Shower/Toilet	☐	☐
Vanity/Sink	☐	☐
Cabinets	☐	☐
Flooring	☐	☐
Lights/Outlets	☐	☐
Notes:		

Other	Inspected at Move-in	Inspected at Move-out
HVAC	☐	☐
Mold	☐	☐
FOBs	☐	☐
Laundry	☐	☐
Water Pressure	☐	☐
Patio/Balcony	☐	☐
Fire Extinguisher	☐	☐
Smoke Detectors	☐	☐
Notes:		

Move-in Inspection	
Resident Signature(s):	Date:
Landlord Signature:	

Move-out Inspection	
Resident Signature(s):	Date:
Landlord Signature:	

This checklist is not all-inclusive. For educational purposes only.