



HUXLEY TOWNHOMES

AT PRAIRIE RIDGE

Tenant's Inspection Worksheet

Upon move-in of the dwelling located at: _____

TENANTS: _____

will complete the following renter's inspection worksheet. At lease termination, this inspection worksheet is again used to evaluate the dwelling. Fines will be assessed for any deterioration in the condition of the dwelling at rates agreed to in the lease.

The tenants have examined the premises and agree that the specific items are in good, clean and sanitary order, and in good condition and repair, unless noted to the contrary in this checklist. The tenants also must return this worksheet to either their on-site managers or to the office no later than seven days after move-in. *If no worksheet is turned in we will assume that everything within the unit was in good condition.*

At the end of the lease, Tenant agrees to return the premises in a condition that matches the condition of the premises at the beginning of the lease, as reflected in this checklist, except for such deterioration that might result from normal use of the premises and furnishings.

KITCHEN

	----CHECK----		COMMENTS	FEE
	--IN--	-OUT-		
Floors	_____	_____	_____	- _____
Sinks	_____	_____	_____	- _____
Disposal Works	_____	_____	_____	- _____
Range Hood	_____	_____	_____	- _____
Exhaust fan works	_____	_____	_____	- _____
Stove Clean	_____	_____	_____	- _____
Oven Clean	_____	_____	_____	- _____
Refrigerator Light Works	_____	_____	_____	- _____
Refrigerator	_____	_____	_____	- _____
Dishwasher	_____	_____	_____	- _____
Cabinets and Drawers	_____	_____	_____	- _____
Countertops	_____	_____	_____	- _____
Walls	_____	_____	_____	- _____

Windows	_____	_____	_____	-	_____
Blinds	_____	_____	_____	-	_____
Screens	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Fire Extinguisher	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____

LIVING ROOM

-----CHECK-----
 --IN-- -OUT- COMMENTS FEE

Floors	_____	_____	_____	-	_____
Carpets	_____	_____	_____	-	_____
Walls	_____	_____	_____	-	_____
Windows	_____	_____	_____	-	_____
Blinds	_____	_____	_____	-	_____
Screens	_____	_____	_____	-	_____
Fireplace	_____	_____	_____	-	_____
--Flue clean	_____	_____	_____	-	_____
Smoke Detector	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Ceiling Fan	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____
Other:	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

BATHROOM 1

-----CHECK-----
 --IN-- -OUT- COMMENTS FEE

Sink	_____	_____	_____	-	_____
Faucets	_____	_____	_____	-	_____
Mirrors	_____	_____	_____	-	_____
Cabinet	_____	_____	_____	-	_____
Fixtures	_____	_____	_____	-	_____
Toilet	_____	_____	_____	-	_____
Shower	_____	_____	_____	-	_____
Shower Curtain Rod	_____	_____	_____	-	_____
Bathtub	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Vent Fan	_____	_____	_____	-	_____

Floors	_____	_____	_____	-	_____
Walls	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____
Other:	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

BATHROOM 2

-----CHECK-----
 --IN-- -OUT- COMMENTS FEE

Sink	_____	_____	_____	-	_____
Faucets	_____	_____	_____	-	_____
Mirrors	_____	_____	_____	-	_____
Cabinet	_____	_____	_____	-	_____
Fixtures	_____	_____	_____	-	_____
Toilet	_____	_____	_____	-	_____
Shower	_____	_____	_____	-	_____
Shower Curtain Rod	_____	_____	_____	-	_____
Bathtub	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Vent Fan	_____	_____	_____	-	_____
Floors	_____	_____	_____	-	_____
Walls	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____
Other:	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

BEDROOM 1

-----CHECK-----
 --IN-- -OUT- COMMENTS FEE

Walls	_____	_____	_____	-	_____
Carpets	_____	_____	_____	-	_____
Windows	_____	_____	_____	-	_____
Blinds	_____	_____	_____	-	_____
Screens	_____	_____	_____	-	_____
Door	_____	_____	_____	-	_____
Closet	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Smoke Alarm	_____	_____	_____	-	_____

Overall Cleanliness	_____	_____	_____	-	_____
Other:					
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

BEDROOM 2

	----CHECK----				
	--IN--	-OUT-	COMMENTS	FEE	
Walls	_____	_____	_____	-	_____
Carpets	_____	_____	_____	-	_____
Windows	_____	_____	_____	-	_____
Blinds	_____	_____	_____	-	_____
Screens	_____	_____	_____	-	_____
Door	_____	_____	_____	-	_____
Closet	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Smoke Alarm	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____
Other:					
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

BEDROOM 3

	----CHECK----				
	--IN--	-OUT-	COMMENTS	FEE	
Walls	_____	_____	_____	-	_____
Carpets	_____	_____	_____	-	_____
Windows	_____	_____	_____	-	_____
Blinds	_____	_____	_____	-	_____
Screens	_____	_____	_____	-	_____
Door	_____	_____	_____	-	_____
Closet	_____	_____	_____	-	_____
Working Light bulbs	_____	_____	_____	-	_____
Smoke Alarm	_____	_____	_____	-	_____
Overall Cleanliness	_____	_____	_____	-	_____
Other:					
_____	_____	_____	_____	-	_____
_____	_____	_____	_____	-	_____

GENERAL

	-----CHECK-----		COMMENTS	FEE
	--IN--	-OUT-		
Deck	_____	_____	_____	- _____
Entrance Door	_____	_____	_____	- _____
Stairway	_____	_____	_____	- _____
Hallway	_____	_____	_____	- _____
Coat/Hall Closet	_____	_____	_____	- _____
Storage Closet	_____	_____	_____	- _____
Utilities Closet	_____	_____	_____	- _____
Laundry Closet/Room	_____	_____	_____	- _____
Overall Cleanliness	_____	_____	_____	- _____
Other:				
Entry Keys () _____	_____	_____	_____	- _____
Mailbox Keys () _____	_____	_____	_____	- _____
Gargage Openers () _____	_____	_____	_____	- _____
_____	_____	_____	_____	- _____
_____	_____	_____	_____	- _____

TOTAL AMOUNT RETAINED FROM DEPOSIT / BILLED TO TENANTS: _____

Tenant has tested and acknowledges that all smoke detectors were found to be in working order. Tenant agrees to test the detector(s) at least every month and to report any problems to Landlord in writing. If the detector is battery operated, Tenant agrees to replace the battery as necessary with a new alkaline battery (unless applicable laws require otherwise). Tenant also acknowledges that they have located their fire extinguisher for their respective unit. If the extinguisher is ever used or if it ever loses its charge, the tenant agrees to notify the Landlord in writing so that the extinguisher can be replaced

The tenant hereby acknowledges that they have read this checklist and agree that the condition and contents of the above-mentioned rental dwelling are, without exception, as represented in this checklist. Tenant understands that Tenant is liable for any damage done to this dwelling as outlined in the signed Lease Agreement and Rules. A copy of this checklist, the lease and rules, and the deposit shall be mailed to the tenant’s forwarding address within 30 days from lease expiration, as stated in the rules. Questions regarding this matter may be directed to our office at (515) 597-5457.

TENANT(S) (CHECKIN):

Date: _____

Date: _____

TENANT(S) (CHECKOUT) :

Date: _____

Date: _____