

Property Maintenance Inspection Form

Property Information

Property Address

Unit/Apartment #

Owner/Manager Name

Inspection Details

Date of Inspection

Time

Inspector Name

Inspection Checklist

Area/Room	Condition	Comments
Living Room	<input type="text"/>	<input type="text"/>
Kitchen	<input type="text"/>	<input type="text"/>
Bathroom	<input type="text"/>	<input type="text"/>
Bedroom(s)	<input type="text"/>	<input type="text"/>
Exterior	<input type="text"/>	<input type="text"/>

Area/Room	Condition	Comments
Other		

Maintenance Issues / Recommendations

Inspector Signature

Date

Owner/Manager Signature

Date
