

# Rental Property Inspection Checklist

Property Address:

Inspection Date:

Inspector Name:

Tenant Name(s):

## General Condition

Area/Item	Condition (Good/Fair/Poor)	Notes
Entry/Exit Doors		
Walls & Ceilings		
Floors/Carpet		
Windows		
Lights/Fixtures		

## Kitchen

Area/Item	Condition	Notes
Sink & Plumbing		
Cabinets/Countertops		
Appliances		
Flooring		

## Bathroom

Area/Item	Condition	Notes
Sink & Plumbing		
Toilet		
Bath/Shower		
Cabinets/Fixtures		
Flooring		

## Bedrooms

Area/Item	Condition	Notes
Walls & Ceilings		
Floors/Carpet		
Closets		
Windows		

## Living/Dining Room

Area/Item	Condition	Notes
Walls & Ceilings		
Floors/Carpet		
Lights/Fixtures		
Windows		

## Other Areas

Area/Item	Condition	Notes
Garage/Basement/Laundry		
Outdoor Areas		
Other		

## Additional Notes/Comments

## Signatures

<b>Inspector:</b>	
<b>Date:</b>	
<b>Tenant:</b>	
<b>Date:</b>	