



## INVENTORY CHECKLIST

COMMENCEMENT  
INVENTORY CHECKLIST FORM

<b>ADDRESS:</b>	<b>DATE RECEIVED:</b>	
<b>NAME:</b>	<b>PHONE NUMBER:</b>	<b>DATE RETURNED:</b>

*YOU MUST COMPLETE THIS CHECKLIST NOTING THE CONDITION OF THE RENTAL PROPERTY AND RETURN IT TO THE LANDLORD WITHIN **7 DAYS** OF OBTAINING POSSESSION OF THE RENTAL UNIT. YOU ARE ALSO ENTITLED TO REQUEST AND RECEIVE A COPY OF THE LASTER TERMINATION INVENTORY CHECKLIST WHICH SHOWS CLAIMS CHARGEABLE AGAINST THE LAST PRIOR TENANTS.*

### TYPE OF DAMAGE

<b>LIVING ROOM</b>	
DOOR (INCLUDING LOCKS)	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>DINING ROOM</b>	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>KITCHEN</b>	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
APPLIANCES	
OTHER:	
<b>HALLWAY</b>	
WALLS	
CEILING	
FLOORING	
OTHER:	

**TYPE OF DAMAGE**

<b>BEDROOM 1, _____</b>	Location & Occupant Name:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>BEDROOM 2, _____</b>	Location & Occupant Name:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>BEDROOM 3, _____</b>	Location & Occupant Name:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>BEDROOM 4, _____</b>	Location & Occupant Name:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
OTHER:	
<b>BEDROOM 5, _____</b>	Location & Occupant Name:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	

CEILING	
OTHER:	
<b>BATHROOM 1</b> _____	Location:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
TOILET	
TOWEL BARS	
OTHER:	
<b>BATHROOM 2</b> _____	Location:
DOOR	
WINDOWS	
WINDOW BLINDS	
WINDOW SCREENS	
FLOORING	
WALLS	
CEILING	
TOILET	
TOWEL BARS	
OTHER:	
<b>BATHROOM 3</b> _____	Location:
DOOR	
FLOORING	
WALLS	
CEILING	
TOILET	
TOWEL BARS	
OTHER:	
<b>BASEMENT/GARAGE/OTHER:</b>	If other, specify:
<b>**PLEASE INDICATE BEDROOM LOCATION AND OCCUPANT.</b>	