Form 68A Move-in/Move-out Inspection Rev. 3/88 Page 1 of 2

MOVE-IN / MOVE OUT INSPECTION AGREEMENT

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NO DEPOSIT MAY BE COLLECTED UNLESS LESSOR AND TENANT FILL IN AND SIGN THIS CHECK LIST.

Tenant's Name (Print)		Lessor's Name (Print) Apt/Unit No.		
Address of Premises				
Describe the condition, cleanliness and ex	isting damage to the premises a	and furnishings; AT MOVE-OUT		
Kitchen:	AT WOVE-IN	AT MOVE-001		
Walls/Ceiling				
Floor/Exhaust Fan				
Cabinets/Counters				
Appliances/Drains				
Living Room:				
Walls/Ceiling				
Floor/Carpet				
Windows/Drapes				
Bedrooms:				
Walls/Ceiling		_		
Floor/Carpet				
Windows/Drapes				
Bath:				
Walls/Ceiling		 		
Floor/Windows				
Fixtures				
Furniture				
Garage/Carport				
Yard/Patio				
Approved Smoke Detection device insta	alled and tested			
Other:				
Ottlei.				
				
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: 				
Date:	Lessor or Lessor's Agent Signature	Tenant Signature and Receipt for Co		

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(Continued)

WITHIN FOURTEEN DAYS AFTER TENANT MOVES OUT, LESSOR IS REQUIRED BY LAW TO COMPLETE THE FOLLOWING (OR A SIMILAR STATEMENT) AND DELIVER IT, PERSONALLY OR BY MAIL, WITH ANY REFUND TO TENANT (AT TENANT'S LAST KNOWN ADDRESS).

AMOUNT OF DEPOSIT			\$
LESS:			
☐ Unpaid rent for periodto	_, inclusive	\$	 -
☐ Deduction for the damage and/or lack of cleaning (insert detailed description):			
		\$	
☐ Other deduction(s) (insert detailed description):			
		\$	
TOTAL DEDUCTIONS			\$
REFUND CHECK ENCLOSED			\$
Date		Lessor or Lessor's Agen	t Signatura
		Lessor or Lessors Agen	i oignature